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

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

**For reporting on   
FFY 2020**

**South Carolina**

U.S. Department of Education seal

**PART C 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 infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. 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 BabyNet program focused on integration into the Medicaid agency in the areas of provider enrollment and payor policy, coordination of benefits with Medicaid managed care organizations (MCOs), the development of a new BabyNet Policy and Procedure manual, new State Systemic Improvement Plan (SSIP) and the integration of the BabyNet Reporting & Intervention Data Gathering Electronic System (BRIDGES) case management system and the state's Medicaid Management Information System (MMIS) through a project called BRIDGES Integration. In March 2020, South Carolina completed the final tasks included in the Corrective Action Plan signed with OSEP on June 1, 2018.   
  
To date, the following improvements have been made to the Part C System:   
  
-A central referral team processes all referrals made to BabyNet and schedules all intake visits.   
  
-Service providers and service coordinators bill through BRIDGES, and claims are processed through MMIS due to successful implementation of the BRIDGES Integration project.   
  
-Implemented an Interim General Supervision plan and later a full General Supervision Plan was approved by OSEP and findings will be issued to Local Early Intervention Systems for Indicators 1, 7, and 8C beginning in FFY 2020.   
  
-Piloted a new Family Outcomes Measurement System, including changing the survey tool to the Family Outcomes Survey-Revised for the entire state beginning July 1, 2020.   
  
-Developed revised Routines-based Interview training plan based on delays caused by COVID-19.  
  
Changes were also made to the BabyNet eligibility determination process in our state due to COVID-19. Since face-to-face interactions were no longer safe, eligibility staff used a combination of tools and information from healthcare providers and families to make eligibility determinations. Eligibility staff have relied heavily on informed clinical opinion during this unprecedented time. The ability to make eligibility determinations this way positively impacted our Indicator 7 data, and we are now reporting significant increases in the timeliness of the eligibility process. As of June 30, 2021, the statewide average number of days from referral to initial IFSP was 36.  
  
The COVID-19 pandemic continued to impact the service delivery system for BabyNet eligible children throughout FFY 2020. BabyNet providers delivered services to children and families either in person or virtually using telehealth flexibilities implemented in March and April 2020. Providers faced numerous challenges, including monitoring positive case counts to determine safe modes of service delivery, protecting the children (some of whom have conditions placing them at greater risk) and families served, as well as their employees. Despite a slight decrease in the number of referrals to the program at the beginning of the pandemic, South Carolina was one of only a few states that saw an increase in overall program enrollment throughout the pandemic. Decisions regarding the mode of service delivery used by BabyNet providers were left up to the discretion of individual companies based on local case counts and resources. The BabyNet program refrained from imposing state-driven decisions on its provider network.   
  
Technical Assistance (TA)  
FFY 2020 was a busy year in which SCDHHS took aggressive steps to address longstanding issues that have historically plagued South Carolina's Part C program. Those steps include addressing staff development, financial and systems process improvement, general supervision and collaboration with partnering agencies. The agency is committed to continuing this work in the coming years. The State participated in many national-level technical assistance opportunities throughout FFY 2020. The State took several actions as a result of the received technical assistance opportunities (listed below). The most important outcomes from our TA were the development and submission of a full General Supervision plan that replaced the previous Interim General Supervision Plan. We also worked diligently with TA providers to draft a "Parent Notice of Family Rights and Safeguards" document, and created a new form for parents' signature documenting that the rights and safeguards were explained to them and that they received a copy of the document.  
  
   
National-level Technical Assistance received by South Carolina during FFY 2020:  
  
10/19/20-10/21/20: IDEA DaSy Data Conference   
  
10/22/20: National OSEP TA Call   
  
10/27/20: Call with Sherry Franklin regarding Accountability   
  
11/2/20: DaSy Data Call   
  
11/04/20: ECTA- Effective Strategies for Correcting Non-Compliance workgroup   
Action: Began drafting a new full General Supervision Plan  
  
11/16/20: Zoom meeting with Sherry Franklin on SC Accountability   
  
11/17/20: ECTA- Effective Strategies for Correcting Non-Compliance workgroup   
Action: Continued drafting a new full General Supervision Plan  
  
12/7/20: DaSy Data Call   
  
12/16/20: Email with Sarah Walters from CiFR regarding her assignment to SC for TA   
  
12/10/20: National OSEP TA Call   
  
12/29/20: Email to Sherry Franklin regarding APR   
  
1/4/21: DaSy Data Call   
  
1/12/21: IDEA Early Childhood Inclusion Community of Practice with ECTA/Alyson Cavanaugh   
  
2/1/20: DaSy Data Call   
  
2/9/21: Email from Sherry Franklin requesting a copy of our APR   
  
3/1/20: DaSy Data Call   
  
3/9/21: IDEA Early Childhood Inclusion Community of Practice hosted by ECTA/Alyson Cavanaugh   
  
3/11/20: National OSEP TA Call   
  
3/18/21: Establishing an Effective Monitoring System for Compliance & Results Working Series #1   
Action: Continued drafting a new full General Supervision Plan  
  
3/30/21: Zoom meeting with Sherry Franklin regarding General Supervision   
Action: Continued drafting a new full General Supervision Plan  
  
4/8/21: Establishing an Effective Monitoring System for Compliance and Results Working Series #2   
Action: Continued drafting a new full General Supervision Plan  
  
4/21/21: Zoom meeting with Sherry Franklin regarding General Supervision   
Action: Continued drafting a new full General Supervision Plan  
  
4/29/21: Establishing an Effective Monitoring System for Compliance and Results Working Series #3  
Action: Worked to finalize our full General Supervision plan, including a rubric for local determinations.   
  
4/30/21: Email conversation with Sherry Franklin regarding Parent Rights   
Action: Finalized our full General Supervision plan, including a rubric for local determinations on 4/30/2021  
  
5/3/21: DaSy Data Call   
  
5/4/21: ARP Funds Call   
  
5/11/21: IDEA Early Childhood Inclusion Community of Practice hosted by ECTA/Alyson Cavanaugh   
  
5/13/21: Zoom meeting with Sherry Franklin regarding General Supervision   
Action: Reviewed final draft of general supervision plan.  
  
5/14/21: Email conversation with Sherry Franklin & Alyson Cavanaugh regarding Parental Rights   
  
5/24/21: CiFR Part C Southern Region CoP Call   
  
5/25/21: Zoom meeting with Sherry Franklin and Alyson Cavanaugh regarding Parental Rights   
Action: See below 6/21/2021  
  
5/26/2021: Discussed and received data system design information from Sherry Franklin and team  
Action: Researched other recommended states' data systems  
  
6/7/21: DaSy Data Call   
  
6/21/21: Email conversation with Sherry Franklin and Alyson Cavanaugh regarding Parental Rights   
Action: Updated our Parent Notice of Family Rights and Safeguards document, and created a new form for parents' signature documenting that the rights and safeguards were explained to them and that they received a copy of the document.  
  
6/24/21: Establishing an Effective Monitoring system for Compliance and Results Working Series – reunion  
Action: Shared that we had fully revised and submitted our new full General Supervision plan. Explained that knowledge and TA gained from the work group was key in making sure our plan was complete and covered all requirements.

Additional information related to data collection and reporting

The COVID-19 pandemic did not impact South Carolina's ability to capture valid and reliable data. Because the BRIDGES system is web-based, providers were able to continue to update the system even as the method of delivering services changed. As previously mentioned, the state did add two delay reasons for Indicator 1 and 7 to accommodate COVID-19 and possible delays in services, but the lead agency's quick response in getting telehealth guidance to the field resulted in limited service delays (less than 2 weeks).

**General Supervision System**

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

Prior to FFY 2018, South Carolina's IDEA Part C program had not implemented a system of general supervision. For FFY 2018 and 2019, as part of the Interim General Supervision plan, the state issued findings to the Lead Agency for Indicators 1 and 7. Those findings were cleared and the state moved towards implementation of the full, newly approved General Supervision Plan for FFY 2020. All findings identified in FFY 2019 were cleared with subsequent data pulls, so all districts started the FFY 2020 General Supervision cycle with no findings.  
  
For FFY 2020 data, BabyNet began implementation of the full General Supervision plan and issued findings for Indicators 1, 7, and 8c on 10/30/2021 to the local early intervention systems (LEIS), also known as the BabyNet districts. BabyNet used a 10% sample of data by district for July 1, 2020 to December 31, 2020. This data was scrubbed and sent to service coordination providers to submit manual corrections or updates during the month of September 2021. After updates were made and final non-compliance was documented, findings were issued on October 30, 2021, which was within 90 days of identification of non-compliance (identification was made on 9/1/21). Correction of non-compliance will be verified with subsequent data pulls in January 2022. If activities did eventually occur and no new activities were late, the finding will be cleared. If both of those conditions are not met, the findings will carry over to the next fiscal year. The state will report these findings in the FFY 2021 APR. The BabyNet Regional Coordinators held a virtual LEIS Meeting with each of their assigned districts to review the general supervision process, non-compliance identified, and issued findings. Local system personnel had the opportunity to ask questions throughout this meeting.  
   
The Regional Part C Coordinators generate monthly reports from the BRIDGES data system and work with their assigned LEIS teams to ensure data is current in the system. These reports include, but are not limited to:   
  
-Children who have turned 3, but have not been closed in the data system   
-Timely services delay reasons   
-45-Day timeline   
-Timely Transition Conferences  
-Child outcome summary data  
-Payor source errors   
   
In FFY 2020, BabyNet fully integrated the dispute resolution process with in SCDHHS. Staff also participated in a webinar called "Dispute Resolution: A Tune-Up," so that we can continue to get ideas on how other states are improving dispute resolution processes.

**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 early intervention service (EIS) programs.**

South Carolina has a strong system of technical assistance available to its provider network, including an electronic help desk system that allows providers and service coordinators to submit questions to BabyNet state staff. These questions are answered by 3 state-level staff who are supervised by the BabyNet Operations Manager. This structure helps ensure consistency in answering and coordinating timely responses, and identifying trends. These staff are also responsible for monthly meetings with providers at the local level where they can share relevant information and answer questions to assist the provider and local early intervention community as a whole. These meetings changed from face-to-face to virtual once COVID-19 made it impractical to meet in person. The local meetings are also used for training, technical assistance, and as a forum to discuss resources in their community that could impact service delivery.   
   
In the past, early intervention personnel and other stakeholders contacted the State Office using four different email accounts, based on the topic of their communication. The BabyNet program moved away from the four topic-specific email addresses and transitioned to one email address for the BabyNet State Office. When a user sends and email to this account, it is automatically sent to Service Manager, a ticketing system. The Service Manager system then creates a ticket, and the ticket containing the email is assigned to the appropriate staff person, based on the ticket topic. This change has allowed for more streamlined communication and the ability to report metrics on frequently asked questions and staff workload.

**Professional Development System:**

**The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.**

Since the Part C program transferred to SCDHHS, it has focused most of its efforts on the development of policies, procedures and systems integration. Work had begun to ensure service coordination providers were trained in the Routines-Based Interview (RBI) process and then COVID-19 hit. To date, two of the four regions in the state have completed training in RBI. Both of those regions are in the process of training their individual service coordination providers, who will earn a state-level certification. RBI implementation will ensure that South Carolina is appropriately assessing families’ resources, priorities, and concerns. The state is on track to have all service coordinators trained and implementing the RBI process by the summer of 2023.  
   
The Team for Early Childhood Solutions (TECS) contracts with the lead agency to provide training and technical assistance and to manage the Comprehensive System of Personnel Development. TECS has been under new leadership since November 2020. The new director has made many improvements throughout her first year, including the following:   
  
-Upgraded and re-launched the outdated Learning Management System   
-Revised and produced updated online Part C foundational modules (BabyNet Basics)   
-Updated Family Outcomes training   
-Developed RBI training and state-certification plan design and implementation   
-Redesigned the TECS Website  
-Updated BRIDGES modules  
-Beginning to redesign many components of the state’s comprehensive system of personnel development   
  
In addition to the previously mentioned activities, the IDEA, Part C state office has posted narrated modules that correspond to policy and procedure changes made over the last few years.

**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 11, the State’s Systemic Improvement Plan (SSIP).**

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

**Apply stakeholder input from introduction to all Part C results indicators (y/n)**

YES

**Number of Parent Members:**

3

**Parent Members Engagement:**

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

The director of SC's Parent Training and Information Center (PTIC), along with two parent members, participated in two SCICC meetings where all indicators were discussed and target setting recommendations were made. All three parent representatives provided vital input to the process.

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

**Describe the activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for infants and toddlers with disabilities and their families.**

The PTIC provided peer-to-peer support for 874 families in FFY 2020. These families appear to be representative of our Part C enrollment data. The PTIC prepared 605 parents to participate on local, state, and national committees and boards in FFY 2020. The PTIC also trained 246 parents on a variety of topics related early intervention, the service delivery system for children with special needs, and available resources and supports. They also provided Part C referral assistance to 1,085 English-speaking families and 175 Spanish-speaking families.

**Soliciting Public Input:**

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

South Carolina solicited public input in a number of ways in FFY 2020. BabyNet State Office conducted four public hearings; 8/20/20, 8/24/20, 12/18/20 and 12/30/20. Prior to each public hearing, the proposed changes were posted to the BabyNet website and a comment period of 60 days began. Information related to the change(s) was sent out on the BabyNet listserv (reaching over 3500 early intervention personnel and other stakeholders) and discussed in meetings with partnering agencies. Due to COVID-19, all public hearings were held virtually for FFY 2020.

**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.**

Targets were set for FFY 2020 during the SCICC meetings held in October of 2021. The Part C Coordinator reviewed the definition and measurement of each indicator, past data and targets and baselines. The council unanimously agreed on the targets and baselines set for each of the results indicators. The state office posted the presentation, data, and recommended targets/baselines on the BabyNet website on November, 3, 2021. A webform and email address were also added as a method for stakeholders to provide additional input. The state received no additional input before the FFY 2020 APR was completed. https://msp.scdhhs.gov/babynet/webform/public-comment

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2019 performance of each EIS Program 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 §303.702(b)(1)(i)(A); and a description of where, on its website, 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.**

Data related to local performance is posted on the BabyNet website for FFY 2018-2020. This information can be found using the following link; https://msp.scdhhs.gov/babynet/site-page/babynet-state-and-federal-reporting. Local performance data for FFY 2020 was discussed during two ICC meetings in the month of October 2021 and again at each Local Early Intervention System (LEIS) meeting in the month of November 2021. Participants in the LEIS meetings include, but are not limited to, local service providers, service coordinators, program managers, local education agency representatives, and PTIC representatives. Local determinations will be made before May 1 2022 and will be posted on the same link. This will be the first time local determinations have been made for South Carolina.

## Intro - Prior FFY Required Actions

The State has not publicly reported on the FFY 2017 (July 1, 2017-June 30, 2018), FFY 2016 (July 1, 2016-June 30, 2017), FFY 2015 (July 1, 2015-June 30, 2016), and FFY 2014 (July 1, 2014-June 30, 2015) performance of each EIS program or provider located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of IDEA. With its FFY 2020 SPP/APR, the State must provide a Web link demonstrating that the State reported to the public on the performance of each early intervention service program or provider located in the State on the targets in the SPP/APR for FFY 2017, FFY 2016, FFY 2015, and FFY 2014. In addition, the State must report with its FFY 2020 SPP/APR, how and where the State reported to the public on the FFY 2019 performance of each early intervention service program or provider located in the State on the targets in the SPP/APR.   
  
The State's IDEA Part C 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.  
  
The State must provide the FFY 2020 required data for Indicator 11, including the State’s progress in implementing the State Systemic Improvement Plan, in the FFY 2020 SPP/APR.  
  
OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 11 attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

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

Under previous lead agencies, South Carolina had problems identifying noncompliance, notifying providers when it occurred and following up to ensure correction when concerns were identified. Under the previous lead agency, the state did not have a coordinated system of general supervision that was developed, implemented, and communicated at all levels of the program or to the stakeholder community. For these reasons, South Carolina is unable to correct findings of noncompliance identified in FFY 2015-2017, as the state is unable to verify those instances were ever formally issued to providers. The state is unable to report any information for FFY 2016 for similar reasons. In addition, any instances that might have been identified but not issued, are unable to be corrected now because these children are no longer enrolled in the IDEA Part C program.   
  
However, the State has posted local performance data on the website for FFY 2018, 2019, and 2020. Local Performance Data can be found at: https://msp.scdhhs.gov/babynet/site-page/babynet-state-and-federal-reporting#Local%20Performance.   
 As part of the newly approved Full General Supervision plan, the State will also make (and post) local determinations prior to submission of the FFY 2022 Grant application.  
  
The State participated in many technical assistance opportunities throughout FFY 2020. The State's National TA participation is listed in the TA section of the FFY 2020 APR Introduction.  
  
The State has included all required section of the SSIP report in the Indicator 11 section of this APR. All phases of the SSIP are posted on the BabyNet website. https://msp.scdhhs.gov/babynet/site-page/babynet-state-and-federal-reporting#SSIP  
  
The State has made all documents related to the FFY 2019 APR available on its website: https://msp.scdhhs.gov/babynet/site-page/babynet-state-and-federal-reporting#State%20Performance%20Plans  
  
The State uploaded two attached documents to this APR. Both passed 508 compliance checks. The ICC form has a warning related to table order, which must be passed manually. After receiving TA from EdFacts and OSEP on the issue, the State was told to add the attachment with the warning. The new Family Outcomes survey was also uploaded. This document passed the compliance check. Both reports were also uploaded.

## Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support the State lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report. OSEP accepts the SICC form, which will not be posted publicly with the State's SPP/APR documents.  
  
The State's FFYs 2020 and 2021 IDEA Part C grant awards were subject to specific conditions as a result of OSEP's 2017 monitoring letter. The State is subject to a corrective action plan (CAP), which was last approved by OSEP on January 31, 2019 and which require correction and data reporting under SPP/APR Indicators 1 and 7. OSEP's March 4, 2022 memo responded to the State's November 1, 2021 FFY 2021 specific conditions progress report. The State is required to submit on May 1, 2022, an updated progress report. OSEP will respond separately to the May 2022 report in its FFY 2022 IDEA Part C grant letter to South Carolina.   
  
The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to sections 616(e)(1) and 642 of the IDEA and 34 C.F.R. § 303.704(a), OSEP's June 22, 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 C 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: Timely Provision of Services

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Compliance indicator:** Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must be based on actual, not an average, number of days. Include the State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

**Measurement**

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

**Instructions**

If data are from State monitoring, describe the method used to select early intervention service (EIS) programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

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. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

The State’s timeliness measure for this indicator must be either: (1) a time period that runs from when the parent consents to IFSP services; or (2) the IFSP initiation date (established by the IFSP Team, including the parent).

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs’ (OSEP’s) response table 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, methods to ensure correction, 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.

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 95.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 32.20% | 40.63% | 40.25% | 59.65% | 73.74% |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner** | **Total number of infants and toddlers with IFSPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,512 | 8,374 | 73.74% | 100% | 78.00% | Did not meet target | No Slippage |

**Number of documented delays attributable to exceptional family circumstances**

***This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.***

20

**Provide reasons for delay, if applicable.**

The reasons for delays include, but are not limited to, lack of providers in certain geographic areas of the state, low capacity of existing providers in certain geographic areas of the state, providers not scheduling families to begin services within 30 days of the IFSP where the service was identified as a need, and finally, service coordinators not making referrals to service providers in a timely manner. Our data system has the ability to capture late reasons for services, but the field is currently not required. The State struggles to get service coordinators to enter these late reasons in a timely manner. The state is investigating the possibility of making this field mandatory.

**Include your State’s criteria for “timely” receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).**

The South Carolina early intervention system defines timely receipt as initiation of all new IFSP services within 30 calendar days of parent signature on the plan.   
   
South Carolina has continued to see slow, steady improvement in Indicator 1 data since the lead agency transfer in July 1, 2017 and while we did not meet the target of 100%, the state did not have slippage in this indicator. The state has moved from 40.25% timely services in FFY 2017 to 78.18% timely services in FFY 2020 and looks forward to continued improvements in this data. South Carolina does continue to experience provider shortages in certain areas of the state and the significant changes made within the system in FFY 2019 caused the loss of approximately 25 providers. Both could be contributing factors as to why South Carolina's data for Indicator 1 isn't higher.   
   
In early 2020, the BabyNet program added two service delay reasons to the BRIDGES data system to account for COVID-19 related delays. These delay reasons were COVID-Parent/Family and COVID-System. These two options were shared with BabyNet personnel, along with guidance indicating when the codes should be used. The COVID-Parent/Family reason is to be used if a provider was available to provide services, but the family was not comfortable receiving those services due to concerns related to COVID-19. The COVID-System code was added to capture instances where a child and family needed a service, but they were unable to receive it due to the provider's inability to provide services in a timely manner due to COVID.   
   
The IDEA, Part C program works closely with staff in the Data Analytics Office (DAO), formerly known as Data Governance, at SCDHHS to develop and run reports. One such area of focus has been provider availability. In order to address provider shortages, a report was developed by the DAO that allows BabyNet state staff to enter a zip code and service type and search for local providers in a given area. The report captures both Medicaid and BabyNet providers separately and indicates the location of that provider in miles to the family's home. The development of this report allows staff in the BabyNet Provider Relations office to target areas where additional providers are needed by provider type and location. Because the report also indicates Medicaid providers in a given area, outreach can occur to those providers to encourage them to enroll as BabyNet providers. While the report does not capture whether providers have openings, it can assist in provider recruitment strategies. An intern working with the BabyNet program during FFY 2020, began reaching out to Medicaid providers who were not BabyNet providers, to provide information related to BabyNet and determine if they may be interested in enrolling as a BabyNet provider.  
   
The 2019 data for Indicator 1 is slightly above what was reported in the November 1, 2020 Progress Report submitted to OSEP, but that discrepancy is due to the fact that SCDHHS receives a data dump from the BRIDGES system daily and it is a complete replacement each day. BRIDGES does not maintain a historical view. As a result, when generating reports from the same timeline, but several months apart, the source data may not be the same. In addition, as a result of the MMIS integration in November 2019, BRIDGES updated the values in several key fields in the source data that we use to determine what services should be counted as timely and untimely. The methodology has remained consistent. This is the same explanation for the data discrepancy between the Indicator 1 data reported above at 59.65% for FFY 2018 vs. what was reported in the October 1, 2019, Progress Report to OSEP.

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

July 1, 2020 – June 30, 2021

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

We consider our calculations to be valid because we have built data structures and linked the data structures based upon business needs. The calculations are reliable because the data structures are based upon business rules and not internal system IDs, the requirements are well-known and the methodology is repeatable.   
   
Staff in the BabyNet program work with staff in the Data Analytics Office (DAO) at the SC Department of Health and Human Services to generate reports for Indicator 1. These are produced based upon data the DAO receives from a secure daily file transfer from BRIDGES to SCDHHS.

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

For FFY 2020 data, the state issued findings for indicators 1, 7, and 8C. These findings were issued to the local early intervention systems (LEIS). For the first time, non-compliance could be attributed to service coordinators, service providers, and the state. For indicator 1, each of the seven districts received a finding. Although the districts received findings, the findings were based on very few instances of non-compliance (see below). The state will analyze subsequent data pulled in January 2022 to determine if findings are cleared or continued.   
  
FFY 2020 Findings   
These findings and subsequent correction will be reported in the FFY 2021 APR.   
  
Indicator 1:  
  
Anderson- 3 children with late services = 1 finding   
Charleston- 1 child with late service(s) = 1 finding   
Colleton- 4 children with late services = 1 finding   
Horry- 3 children with late services = 1 finding   
Richland- 3 children with late services = 1 finding   
Spartanburg- 6 children with late services = 1 finding   
York- 2 children with late services = 1 finding   
  
Historically South Carolina has had problems identifying non-compliance, notifying providers when it occurred and following up to ensure correction when concerns were identified. Under the previous lead agency, the state did not have a coordinated system of general supervision, nor did it maintain any of the data associated with findings captured in previous APRs. For these reasons, South Carolina is unable to correct findings of noncompliance identified in FFY 2015 as the state is unable to verify those instances were ever formally issued to providers. In addition, these instances cannot be corrected now due to the children no longer being enrolled in the Part C system. South Carolina was required to develop an interim general supervision plan and implement it as a condition of the corrective action plan in 2018. That interim plan was developed and implemented in the fall of 2019 (using FFY 2018 data) when the first findings of noncompliance were issued in our state.

**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 | 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.***

In April 2021, the state requested from the DAO a 10% sample of all services that were supposed to begin in the month of November 2020. Through this data and electronic record review, the state determined that all late services previously identified, did eventually occur (though they were late) AND there were no new late services identified. Through this data review, the state was able to verify correction of non-compliance for all previously issued findings for Indicator 1. No findings carried over to FFY 2020.

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

In April 2021, the state requested from the DAO a 10% sample of all services that were supposed to begin in the month of November 2020. Through this data and electronic record review, the state determined that all late services previously identified, did eventually occur (though they were late) AND there were no new late services identified. Through this data review, the state was able to verify correction of non-compliance for all previously issued findings for Indicator 1. No findings carried over to FFY 2020.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 1 - 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, based on FFY 2019 data, for this indicator. In addition, the State must report on the status of correction of noncompliance identified in October 2020, based on FFY 2018 data, for this indicator. Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the findings of noncompliance identified in October 2019, based on FFY 2017 data were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in October 2019, based on FFY 2017 data and October 2020, based on FFY 2018 data: (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 EIS program or provider, 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.

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

In April 2021, the state requested from the DAO a 10% sample of all services that were supposed to begin in the month of November 2020. Through this data and electronic record reviews, the state determined that all late services previously identified in FFY 2019, did eventually occur (though they were late) AND there were no new late services identified. Through this data review, the state was able to verify correction of non-compliance for all previously issued findings for Indicator 1. No findings carried over to FFY 2020.

## 1 - OSEP Response

OSEP's response to the State's FFY 2019 SPP/APR required the State to include in the FFY 2020 SPP/APR, the status of correction of noncompliance of prior year findings. In the correction of noncompliance section under this indicator, the State reported on its prior interim general supervision plan. However, in its November 1, 2021 progress report under its FFY 2021 IDEA Part C grant specific conditions, the State provided updated information and confirmed that it issued findings under this indicator in FFY 2021 based on its FFY 2019 and FFY 2020 data under this indicator. The State also further reported in its November 1, 2021 FFY 2021 IDEA Part C grant specific conditions progress report that these findings were issued based on the 2021 OSEP-approved State's General Supervision Plan under its 2019 Corrective Action Plan.  
  
The State is required to report updated data and on the correction of noncompliance on the timely service provision requirements under this indicator as part of the State's FFY 2021 IDEA Part C grant award specific conditions. The State timely submitted its progress report on November 1, 2021. OSEP's March 4, 2022 Memorandum responded to this report. The State is required to submit a May 1, 2022, progress report under its FFY 2021 Specific Conditions. OSEP will respond to the FFY 2021 Specific Conditions in its FFY 2022 IDEA Part C grant award letter.

## 1 - 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 EIS program or provider 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 EIS program or provider, 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 2: Services in Natural Environments

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings. (20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

**Instructions**

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

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

The data reported in this indicator should be consistent with the State’s 618 data reported in Table 2. If not, explain.

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 93.44% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= | 97.64% | 97.64% | 97.64% | 98.00% | 98.00% |
| Data | 97.64% | 97.33% | 97.82% | 98.03% | 93.73% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 93.00% | 93.10% | 93.20% | 93.30% | 93.40% | 93.50% |

**Targets: Description of Stakeholder Input**

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

Because the baseline for this indicator had been in place since 2005 AND the state implemented all new policies and procedures on July 1, 2019, the state is re-baselining this indicator to 93%. The state feels re-baselining is important because the data for FFY 2019 and FFY 2020 is a result of newly implemented policies and procedures.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 6,128 |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Total number of infants and toddlers with IFSPs | 6,558 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings** | **Total number of Infants and toddlers with IFSPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,128 | 6,558 | 93.73% | 93.00% | 93.44% | N/A | N/A |

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

## 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 3: Early Childhood Outcomes

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of infants and toddlers with IFSPs who demonstrate improved:

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

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

C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

**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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

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

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

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

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

**Summary Statement 1:** Of those infants and toddlers who entered early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 1:**

Percent = [(# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d)) divided by (# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d))] times 100.

**Summary Statement 2:** The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 2:**

Percent = [(# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e)) divided by the (total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

**Instructions**

*Sampling of****infants and toddlers with IFSPs****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 page 2 for additional instructions on sampling.)*

In the measurement, include in the numerator and denominator only infants and toddlers with IFSPs who received early intervention services for at least six months before exiting the Part C program.

Report: (1) the number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting data under Section 618 of the IDEA; and (2) the number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

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.

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 Process (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.

If the State’s Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i), the State must report data in two ways. First, it must report on all eligible children but exclude its at-risk infants and toddlers (i.e., include just those infants and toddlers experiencing developmental delay (or “developmentally delayed children”) or having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay (or “children with diagnosed conditions”)). Second, the State must separately report outcome data on either: (1) just its at-risk infants and toddlers; or (2) aggregated performance data on all of the infants and toddlers it serves under Part C (including developmentally delayed children, children with diagnosed conditions, and at-risk infants and toddlers).

## 3 - Indicator Data

**Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i)? (yes/no)**

NO

**Targets: Description of Stakeholder Input**

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A1** | 2020 | Target>= | 78.00% | 78.00% | 78.00% | 80.10% | 80.10% |
| **A1** | 74.22% | Data | 78.40% | 78.17% | 77.07% | 74.09% | 73.54% |
| **A2** | 2020 | Target>= | 54.00% | 54.00% | 54.00% | 60.00% | 60.00% |
| **A2** | 47.49% | Data | 53.99% | 50.70% | 52.03% | 49.40% | 48.51% |
| **B1** | 2020 | Target>= | 81.00% | 81.00% | 81.00% | 82.10% | 82.10% |
| **B1** | 77.92% | Data | 80.99% | 81.68% | 79.48% | 78.99% | 78.23% |
| **B2** | 2020 | Target>= | 50.00% | 50.00% | 50.00% | 55.00% | 55.00% |
| **B2** | 42.84% | Data | 49.94% | 47.54% | 48.13% | 46.47% | 45.12% |
| **C1** | 2020 | Target>= | 82.00% | 82.00% | 82.00% | 82.10% | 82.10% |
| **C1** | 76.94% | Data | 81.51% | 80.28% | 78.04% | 76.70% | 77.75% |
| **C2** | 2020 | Target>= | 51.00% | 51.00% | 51.00% | 58.00% | 58.00% |
| **C2** | 43.83% | Data | 51.74% | 49.43% | 50.02% | 48.51% | 45.96% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1>= | 74.22% | 74.32% | 74.42% | 74.52% | 74.62% | 74.72% |
| Target A2>= | 47.49% | 47.59% | 47.69% | 47.79% | 47.89% | 47.99% |
| Target B1>= | 77.92% | 78.02% | 78.12% | 78.22% | 78.32% | 78.42% |
| Target B2>= | 42.84% | 42.94% | 43.04% | 43.14% | 43.24% | 43.34% |
| Target C1>= | 76.94% | 77.04% | 77.14% | 77.24% | 77.34% | 77.44% |
| Target C2>= | 43.83% | 43.93% | 44.03% | 44.13% | 44.23% | 44.33% |

**FFY 2020 SPP/APR Data**

**Number of infants and toddlers with IFSPs assessed**

4,458

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

| **Outcome A Progress Category** | **Number of children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 85 | 1.91% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 894 | 20.05% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,362 | 30.55% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,456 | 32.66% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 661 | 14.83% |

| **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 3 years of age or exited the program | 2,818 | 3,797 | 73.54% | 74.22% | 74.22% | N/A | N/A |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program | 2,117 | 4,458 | 48.51% | 47.49% | 47.49% | 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 Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 79 | 1.77% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 819 | 18.37% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,650 | 37.01% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,519 | 34.07% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 391 | 8.77% |

| **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 3 years of age or exited the program | 3,169 | 4,067 | 78.23% | 77.92% | 77.92% | N/A | N/A |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program | 1,910 | 4,458 | 45.12% | 42.84% | 42.84% | N/A | N/A |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 95 | 2.13% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 836 | 18.75% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,573 | 35.28% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,533 | 34.39% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 421 | 9.44% |

| **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 3 years of age or exited the program | 3,106 | 4,037 | 77.75% | 76.94% | 76.94% | N/A | N/A |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program | 1,954 | 4,458 | 45.96% | 43.83% | 43.83% | N/A | N/A |

**The number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program**.

| **Question** | **Number** |
| --- | --- |
| The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s Part C exiting 618 data | 5,886 |
| The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program. | 1,413 |

| **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.**

-Battelle Developmental Inventory (BDI-2)  
-The Carolina Curriculum for Infants and Toddlers with Special Needs (CCITSN), Third Edition (birth to 24 months) or   
-The Carolina Curriculum for Preschoolers with Special Needs (CCITSN), Second Edition (24-60 months)   
-The Hawaii Early Learning Profile (0-3)   
-Service Provider documentation of evaluation, assessment and service delivery   
-Family input related to outcomes   
-Primary healthcare provider input related to outcomes (collected prior to the initial and annual IFSPs)  
  
The Part C data system, BRIDGES, collects COS ratings at entry and exit. A COS screen was added to BRIDGES that captures the information gathered on the ECO COS form. Logic is built into the system to determine if entry/exit data is required. The system only requires entry data if the child is under 30 months at the time of referral and only requires exit data if the child received at least 6 months of services. It also will not allow the child to be exited from the system if exit data is missing. Service Coordinators can't enter exit data if entry data hasn't been entered. Because of this logic, the State no longer has missing COS data.

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

Re-baselining:  
Because the baseline for this indicator had not been adjusted since the lead agency changed in 2017 and significant changes were made to policies and procedures that were implemented on July 1, 2019, the state is re-baselining this indicator (all six summary statements). Re-baselining is important because the reported data for FFY 2019 and FFY 2020 is a result of newly implemented policies and procedures.

## 3 - Prior FFY Required Actions

None

## 3 - 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.

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

**Monitoring Priority:** Early Intervention Services In Natural Environments

**Results indicator:** Percent of families participating in Part C who report that early intervention services have helped the family:

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

**Data Source**

State selected data source. State must describe the data source in the SPP/APR.

**Measurement**

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs) divided by the (# of respondent families participating in Part C)] times 100.

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

**Instructions**

*Sampling of****families participating in Part C****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 page 2 for additional instructions on sampling.)*

Provide the actual numbers used in the calculation.

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

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 families to whom the surveys were distributed and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

States will be required to compare the current year’s response rate to the previous year(s) response rate(s), 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 families that received Part C services.

Include the State’s analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers receiving services in the Part C program. States should consider categories such as race/ethnicity, age of infant or toddler, 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 infants or toddlers for whom families responded are not representative of the demographics of infants and toddlers receiving services in the Part C program, 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 families (e.g., by mail, by e-mail, on-line, by telephone, in-person), if a survey was used, and how responses were collected.

Beginning with the FFY 2022 SPP/APR, due February 1, 2024, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race and ethnicity in its analysis. In addition, the State’s analysis must also include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, 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.

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target>= | 74.00% | 74.00% | 74.00% | 86.10% | 86.10% |
| A | 82.94% | Data | 74.06% | 63.21% | 65.07% | 63.19% | 65.91% |
| B | 2020 | Target>= | 72.00% | 72.00% | 72.00% | 86.10% | 86.10% |
| B | 89.76% | Data | 72.18% | 61.02% | 60.63% | 64.69% | 65.28% |
| C | 2020 | Target>= | 75.00% | 75.00% | 75.00% | 86.10% | 86.10% |
| C | 89.24% | Data | 75.94% | 64.63% | 70.18% | 72.54% | 71.48% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 82.94% | 82.95% | 82.96% | 82.97% | 82.98% | 82.99% |
| Target B>= | 89.76% | 89.77% | 89.78% | 89.79% | 89.80% | 89.81% |
| Target C>= | 89.24% | 89.25% | 89.26% | 89.27% | 89.28% | 89.29% |

**Targets: Description of Stakeholder Input**

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 3,180 |
| Number of respondent families participating in Part C | 381 |
| Survey Response Rate | 11.98% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 316 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 381 |
| B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs | 342 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 381 |
| C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn | 340 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 381 |

| **Measure** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- |
| A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2) | 65.91% | 82.94% | 82.94% | N/A | N/A |
| B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2) | 65.28% | 89.76% | 89.76% | N/A | N/A |
| C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2) | 71.48% | 89.24% | 89.24% | N/A | N/A |

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

| **Question** | **Yes / No** |
| --- | --- |
| Was a collection tool used? | YES |
| If yes, is it a new or revised collection tool? | YES |
| If your collection tool has changed, upload it here. |  |
| The demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. | NO |

**If not, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.**

As described below, survey results are determined to be representative on the basis of geographic location. Using a criterion of a +/- 3% discrepancy, the data for race and ethnicity are underrepresented for children who identify as Black/African American (-7.82 compared to all families served) and overrepresented for children identify as white (+12.66% compared to all families served). The state will begin monitoring the response rates and data quarterly to identify any issues before the fiscal year has ended. The state will also begin sending reminders to families who haven't responded within 30 days of receiving their survey.   
   
South Carolina continues to focus its efforts on the Family Outcomes Measurement process as noted above as a part of our SSIP work. This work will continue in earnest during FFY 2020, and the state hopes to report improved response rates in next year's APR. The state has also developed new Spanish materials that explain the survey process. The state is working to also have the Spanish survey added as an electronic survey (like the English version).

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Survey Response Rate | 11.02% | 11.98% |

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

SC’s SSIP is focused on improving indicator 4, specifically 4C. The two improvement strategies include a completely revamped Family Outcomes Measurement System (FOMS) and statewide implementation of the Routines-based Interview as the family assessment tool. The new FOMS adds the service coordinator as an active participant in the process. In the past, the surveys were mailed from the state-level and service coordinators were mostly removed from the process. In the revised system, the service coordinator will give and review with the family a post card that explains the importance of the survey and gives a link and QR code for families to access the online version. Families will now complete the survey after their first 6-Month Review and again about a month after their child exits BabyNet. This process was piloted in the Richland District of the state. This district includes ten counties located in the midlands area of the state. In FFY 2019, there were only 43 exit survey responses in those ten counties, and in FFY 2020, there were 320 first 6-month review and exit survey responses combined in those same ten counties. Because the state changed so much of the process from FFY 2019 to FFY 2020, it is very hard to compare the differences from year to year. The number of first 6-month review surveys is a great indicator of future improvements in exit survey response rate increases. The state looks forward to reporting on the response rates for FFY 2021, which will include a year of full statewide implementation of the new FOMS.

**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 families that received Part C services.**

The state reviewed non-response data to determine if there was nonresponse bias identified. Two groups' response rates were more than 3% lower than the total response rate. Those groups are Hispanic families (6.38% response rate) and Black/African American (6.64% response rate). The state will work with the PTIC to offer additional survey completion assistance to Hispanic families. For FFY 2020, Spanish materials were not yet available. Beginning in September of 2021, new Spanish materials that explained the updated survey process were mailed to all service coordination agencies. The state is also investigating adding a Spanish version of the electronic survey. Currently, the survey is only available to Spanish-speaking families in a hard copy.   
  
The state will also begin monitoring the response rates of all families quarterly to identify any non-response bias before the fiscal year has ended. The state will also begin sending reminders to families who haven't responded within 30 days of receiving their survey, and will focus on Hispanic and Black/African American families.   
  
The strategies to address the issue of nonresponse bias will be to continue working with South Carolina's Parent Training Information Center, Family Connection of South Carolina. In the past, the IDEA, Part C program has participated on the Latinos Making Connections Committee aimed at identifying current services, needs, barriers and challenges that Latino families face, while improving collaboration and grass roots efforts in their community. The Executive Director of Family Connection of South Carolina continues to employ Spanish speaking staff who assist Hispanic/Latino families seeking Part C services for their children. These staff assist in making referrals to the Part C program and guide the families when necessary. Babynet also works with the PTIC to ensure that Hispanic families understand their rights and responsibilities under IDEA by employing 5 Bilingual Bicultural Staff-, three of whom have successfully completed their Certificate in Special Education Interpreting from the University of Georgia and one is a Certified Medical Interpreter.

**Include the State’s analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program.** **States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State.**

Race/Ethnicity:  
The following survey respondent groups are considered representative: American Indian/Native Alaskan, Asian, Hispanic, Native Hawaiian/Other Pacific Islander, Two or More Races  
The following survey respondent groups are NOT considered representative: Black/African American (-7.82%), White (12.66%)  
  
Urban/Rural:  
Urban and Rural survey respondent groups are considered representative.  
Urban, All families=92.95%  
Urban, Survey Respondents=92.91%  
Rural, All families=7.05%  
Rural, Survey Respondents=7.09%

**Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy, age of the infant or toddler, and geographic location in the proportion of responders compared to target group).**

Survey results are determined to be representative on the basis of geographic location. Using a criterion of a +/- 3% discrepancy, the data for race and ethnicity are underrepresented for children who are Black/African American (-7.82 compared to all families served) and overrepresented for children who are white (+12.66% compared to all families served).

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

Re-baselining:  
Because the baseline for this indicator had not been adjusted since the lead agency changed in 2017 and significant changes were made to policies and procedures that were implemented on July 1, 2019, the state is re-baselining this indicator (all six summary statements). Re-baselining is important because the reported data for FFY 2019 and FFY 2020 is a result of newly implemented policies and procedures.

## 4 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , 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 families responding are representative of the population.

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

As described below, survey results are determined to be representative on the basis of geographic location. Using a criterion of a +/- 3% discrepancy, the data for race and ethnicity are underrepresented for children who identify as Black/African American (-7.82 compared to all families served) and overrepresented for children identify as white (+12.66% compared to all families served). The state will begin monitoring the response rates and data quarterly to identify any issues before the fiscal year has ended. The state will also begin sending reminders to families who haven't responded within 30 days of receiving their survey.   
   
South Carolina continues to focus its efforts on the Family Outcomes Measurement process as noted above as a part of our SSIP work. This work will continue in earnest during FFY 2020, and the state hopes to report improved response rates in next year's APR. The state has also developed new Spanish materials that explain the survey process. The state is working to also have the Spanish survey added as an electronic survey (like the English version).

## 4 - 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.

## 4 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , 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 families responding are representative of the population.

## 4 - State Attachments



# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

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

**Results indicator:** Percent of infants and toddlers birth to 1 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the E*DFacts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

**Measurement**

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100.

**Instructions**

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

Describe the results of the calculations.The data reported in this indicator should be consistent with the State’s reported 618 data reported in Table 1. If not, explain why.

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 0.92% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 0.74% | 0.95% | 0.98% | 0.99% | 0.99% |
| Data | 0.74% | 0.95% | 0.89% | 0.98% | 1.22% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 1.00% | 1.05% | 1.10% | 1.15% | 1.20% | 1.25% |

Targets: Description of Stakeholder Input

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 1 with IFSPs | 683 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 1 | 56,371 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 683 | 56,371 | 1.22% | 1.00% | 1.21% | Met target | No Slippage |

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

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

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

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

**Results indicator:** Percent of infants and toddlers birth to 3 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (E*MAPS*)) and Census (for the denominator).

**Measurement**

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100.

**Instructions**

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

Describe the results of the calculations . The data reported in this indicator should be consistent with the State’s reported 618 data reported in Table 1. If not, explain why.

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 2.07% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 2.30% | 2.49% | 2.49% | 2.50% | 2.50% |
| Data | 2.30% | 2.49% | 2.82% | 3.18% | 3.68% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 3.71% | 3.76% | 3.81% | 3.86% | 3.91% | 3.96% |

Targets: Description of Stakeholder Input

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/08/2021 | Number of infants and toddlers birth to 3 with IFSPs | 6,558 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2010 to July 1, 2020 | 07/08/2021 | Population of infants and toddlers birth to 3 | 171,821 |

**FFY 2020 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,558 | 171,821 | 3.68% | 3.71% | 3.82% | Met target | No Slippage |

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

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

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

## 6 - Required Actions

# Indicator 7: 45-Day Timeline

**Instructions and Measurement**

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

**Compliance indicator:** Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system and must address the timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

**Measurement**

Percent = [(# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

**Instructions**

*If data are from State monitoring, describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.*

Targets must be 100%.

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 actual numbers used in the calculation.

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 7 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 97.90% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 72.40% | 83.46% | 83.25% | 67.90% | 79.23% |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline** | **Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 5,918 | 6,974 | 79.23% | 100% | 95.15% | Did not meet target | No Slippage |

**Number of documented delays attributable to exceptional family circumstances**

**This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.**

718

**Provide reasons for delay, if applicable.**

Delays for late initial IFSPs for FFY 2020 were a result of ongoing service coordinators failing to conduct the assessments and meeting within 45 days of referral. For all instances of non-compliance, the ongoing service coordinators had at least 20 (of 45) days after eligibility was determined to complete assessments and conduct the initial IFSP team meeting. Per BabyNet policies and procedures, the BabyNet Intake Coordinator has up to 25 to process the referral, make initial contacts, complete intake appointment, conduct evaluations, and determine eligibility. The ongoing service coordinator has at least 20 days to conduct necessary assessments and facilitate the initial IFSP team meeting.

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

07/1/2020-6/30/2021

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

We consider the calculations to be valid because we have built data structures and linked the data structures based upon business needs. The calculations are reliable because the data structures are based upon business rules and not internal system IDs, the requirements are well known, and the methodology is repeatable.

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

In FFY 2019, the state issued findings to itself for indicators 1 and 7. These findings were based on non-compliance that was a result of lack of providers for indicator 1 and untimely processing of eligibility for indicator 7 (25 days from referral). For indicator 7, the state received a finding for five of the seven districts. All five were cleared after a subsequent data pull and analysis in January 2021.   
  
For FFY 2020 data, the state issued findings for indicators 1, 7, and 8C. These findings were issued to the local early intervention system (LEIS). For the first time, non-compliance could be attributed to service coordinators, service providers, and the state. For Indicator 7, only three of the seven districts received findings (issued Oct 30, 2021). Although districts received findings, the findings were based on very few instances of non-compliance (see below).   
  
Changes were also made to the BabyNet eligibility determination process in our state due to COVID-19. Since face-to-face interactions were no longer safe, eligibility staff used a combination of tools, information from healthcare providers and families to make eligibility determinations. Eligibility staff have relied heavily on informed clinical opinion during this unprecedented time. The ability to make eligibility determinations this way positively impacted our Indicator 7 data, and we are now reporting significant increases in the timeliness of the eligibility process. As of June 30, 2021, the statewide average number of days from referral to initial IFSP was 36.  
  
FFY 2020 Findings   
These findings and subsequent correction will be reported in the FFY 2021 APR.   
  
Indicator 7:  
  
Horry- 1 late Initial IFSP = 1 finding   
Richland- 5 late Initial IFSPs = 1 finding   
Spartanburg- 2 late Initial IFSPs = 1 finding

**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** |
| --- | --- | --- | --- |
| 5 | 5 |  | 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.***

In January 2021, the state requested from the Data Analytics Office a 10% sample (by district) of all referrals in the month of November 2020. Through this data and electronic record review, the state determined that all late IFSPs previously identified, did eventually occur (though they were late) AND there were no new late initial IFSPs identified. Through this data review, the state was able to verify correction on non-compliance for all previously issued findings for Indicator 7. No findings carried over to FFY 2020.

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

In January 2021, the state requested from the Data Analytics Office a 10% sample (by district) of all referrals in the month of November 2020. Through this data and electronic record review, the state determined that all late IFSPs previously identified, did eventually occur (though they were late) AND there were no new late initial IFSPs identified. Through this data review, the state was able to verify correction on non-compliance for all previously issued findings for Indicator 7. No findings carried over to FFY 2020.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 7 - 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, based on FFY 2019 data, for this indicator. In addition, the State must report on the status of correction of noncompliance identified in October 2020, based on FFY 2018 data, for this indicator. Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the findings of noncompliance identified in October 2019, based on FFY 2017 data were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in October 2019, based on FFY 2017 data and October 2020, based on FFY 2018 data: (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 EIS program or provider, 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.

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

The state first issued findings of non-compliance with it's FFY 2018 APR.  
  
FFY 2018:  
5 Findings total  
Subsequent data was not pulled  
  
FFY 2019:  
The same 5 districts had late IFSPs, so their 5 findings continued to FFY 2019.  
The state completed a subsequent 10% sample data pull for the month of November 2020 and there were no new late IFSPs. Also, the late IFSPs identified in the initial pull did eventually happen, even though they were late.  
  
FFY 2020:  
Three districts had a finding for non-compliance. All late IFSPs did eventually occur.

## 7 - OSEP Response

The State is required to report on the correction of noncompliance on the 45-day timeline requirements under this indicator as part of the State's FFY 2021 IDEA Part C grant award specific conditions. The State timely submitted its progress report on November 1, 2021. OSEP's March 4, 2022 Memorandum responded to this report. The State is required to submit a May 1, 2022, progress report under its FFY 2021 Specific Conditions. OSEP will respond to the FFY 2021 Specific Conditions in its FFY 2022 IDEA Part C grant award letter.   
  
OSEP's response to the State's FFY 2019 SPP/APR required the State to include in the FFY 2020 SPP/APR, the status of correction of noncompliance of prior year findings. In the correction of noncompliance section under this indicator, the State reported on its prior interim general supervision plan. In its November 1, 2021 progress report under its FFY 2021 IDEA Part C grant specific conditions, the State provided updated information and confirmed that it issued findings under this indicator in FFY 2020 based on its FFY 2019 under this indicator. The State also further reported in its November 1, 2021 FFY 2021 IDEA Part C grant specific conditions progress report that these findings were issued based on the 2021 OSEP-approved State's General Supervision Plan under its 2019 Corrective Action Plan.

## 7 - 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 EIS program or provider 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 EIS program or provider, 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 8A: Early Childhood Transition

**Instructions and Measurement**

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

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

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

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 8A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 88.00% |

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

**Targets**

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

**FFY 2020 SPP/APR Data**

**Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday. (yes/no)**

YES

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 4,216 | 4,216 | 100.00% | 100% | 100.00% | Met target | No Slippage |

**Number of documented delays attributable to exceptional family circumstances**   
**This number will be added to the “Number of children exiting Part C who have an IFSP with transition steps and services” field to calculate the numerator for this indicator.**

0

**Provide reasons for delay, if applicable.**

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

07/1/2020-06/30/2021

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

BRIDGES, South Carolina's Part C data system requires transition planning with the initial IFSP and with each subsequent 6-month review or evaluation of the IFSP. Service coordinators cannot save the IFSP in the data system without a completed transition plan. The number of children reported for FFY 2020 excludes 183 children whose initial IFSP was developed within 90 days of the child's third birthday.

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

SCDHHS only has data going back to 2006 for actual data. We could not find baseline information from 2005. In 2006, the actual data was 88%. BabyNet has changed Lead Agencies twice since 2005 and the current Part C leadership does not have access to the APR from 2005. Because OSEP asked for baseline data to be added to the historical section, we added 88% as our best guess.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8A - Prior FFY Required Actions

None

## 8A - OSEP Response

The State provided baseline data for this indicator, using data from FFY 2005, however, OSEP cannot accept the baseline because the State reported "SCDHHS only has data going back to 2006 for actual data. We could not find baseline information from 2005. In 2006, the actual data was 88%. BabyNet has changed Lead Agencies twice since 2005 and the current Part C leadership does not have access to the APR from 2005. Because OSEP asked for baseline data to be added to the historical section, we added 88% as our best guess." If the State is unable to report the actual data from FFY 2005 as its baseline data, the State may consider using a subsequent baseline year and the associated data.

## 8A - Required Actions

The State must provide, in the FFY 2021 SPP/APR, a baseline year and the associated data for this indicator.

# Indicator 8B: Early Childhood Transition

**Instructions and Measurement**

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

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

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

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 8B - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 100.00% |

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

**Targets**

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

**FFY 2020 SPP/APR Data**

**Data include notification to both the SEA and LEA**

YES

| **Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 4,216 | 4,216 | 100.00% | 100% | 100.00% | Met target | No Slippage |

**Number of parents who opted out**

**This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.**

0

**Provide reasons for delay, if applicable.**

**Describe the method used to collect these data.**

Using the data from the BRIDGES data system, the staff at the Team for Early Childhood Solutions (TECS) sends data reports on a monthly basis to the SEA and each of the state's LEAs as follows:   
  
-"24-month report" from BRIDGES of children who turned 24 months (2 years) of age in the previous month and for whom an initial IFSP was developed.   
  
-"Over 24-month report" from BRIDGES of children who were 24 months (2 years) of age during the previous month and for whom an initial IFSP was developed   
  
-"30-month report" from BRIDGES of children who turned 30 months (2.5 years) of age and for whom an initial IFSP was developed at age 30 months during the previous month.   
  
-"Over 33-month report" from BRIDGES of children with an initial IFSP developed between the age of 33 months (2 years 9 months) and 34.5 months (2 years 10.5 months); and   
  
-"Over 34.5-month report" from BRIDGES of children referred to BabyNet over 34.5 months of age in the assigned geographic area.   
  
Each report includes directory information (child's name, date of birth, address and telephone number) for children in the assigned geographic area for the LEA. If no children in a school district qualify for notification, a "zero report" is made which notifies the South Carolina Department of Education and the LEA that three are no children to report in the specific month range.

**Do you have a written opt-out policy? (yes/no)**

NO

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

July 1, 2020 – June 30, 2021

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

Because the notification to the State Education Agency (SEA) and each Local Education Agency (LEA) is completed electronically as described above, the state has ensured 100% compliance with Indicator 8b.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

## 8B - Required Actions

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

**Compliance indicator:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and

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

(20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

**Instructions**

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State’s monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child’s record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child’s record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to “opt-out” of the referral. Under the State’s opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State’s Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table 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, methods to ensure correction, 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.

## 8C - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 93.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 96.47% | 85.97% | 90.50% | 91.69% | 88.91% |

**Targets**

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

**FFY 2020 SPP/APR Data**

**Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services. (yes/no)**

YES

| **Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,661 | 4,104 | 88.91% | 100% | 90.44% | Did not meet target | No Slippage |

**Number of toddlers for whom the parent did not provide approval for the transition conference**

**This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.**

831

**Number of documented delays attributable to exceptional family circumstances**

**This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.**

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**Provide reasons for delay, if applicable.**

The most prevalent reason for delayed transition conferences during FFY 2020, was COVID-19. LEAs and Service Coordination agencies had trouble meeting in a timely manner due to parents, service coordinators, and school district staff being absent or uncomfortable meeting in person for transition conferences. Teams eventually made adjustments and began meeting with families via conference call or virtual video platform. The state also realized that many service coordinators were not aware that they could continue with the conference even if the LEA chose not to participate. The state has since disseminated updated guidance to the field regarding transition conference requirements.

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

State database

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

July 1, 2020 – June 30, 2021

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

With the monthly data reminders for missing and/or invalid data, service coordinators have been responsive to requests to enter both transition and exit data in BRIDGES, including instances when parents decline the transition conference process and when the conference was delayed due to parent reasons. Part B and Part C have collaborated on a number of projects and communicate frequently with each other at the state and local level.

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

In FFY 2019, the state issued findings to itself for indicators 1 and 7 only (as approved by OSEP in the Interim General Supervision Plan).These findings were based on non-compliance that was a result of lack of providers for indicator 1 and untimely processing of eligibility for indicator 7 (25 days from referral). For indicator 1, the state received a finding for each of the seven districts. All were cleared after a subsequent data pull and analysis in April 2021. For indicator 7, the state received a finding for five of the seven districts. All five were cleared after a subsequent data pull and analysis in January 2021. Based on the Interim General Supervision plan requirements, the state has no findings to report below for Indicator 8C for FFY 2019.   
  
In FFY 2020, the state issued findings for indicators 1, 7, and 8C. These findings were issued to the local early intervention system (LEIS). For the first time, findings could be attributed to service coordinators, service providers, and the state. For indicator 8C, all seven districts received a finding. Although the districts received findings, the findings were based on very few instances of non-compliance (see below). The state will analyze subsequent data pulled in January 2022 to determine if findings are cleared or continued. There are no findings for Indicator 8C from FFY 2019 because 8C was not included in the Interim General Supervision plan. Findings for indicator 8C were first issued with FFY 2020 data and the implementation of the Full General Supervision Plan.  
  
FFY 2020 Findings   
These findings and subsequent correction will be reported in the FFY 2021 APR.   
  
Indicator 8C:  
  
Anderson- 2 children with late transition conferences = 1 finding   
Charleston- 1 child with a late transition conference = 1 finding   
Colleton- 1 child with a late transition conference = 1 finding   
Horry- 2 children with late transition conferences = 1 finding   
Richland- 6 children with late transition conferences = 1 finding   
Spartanburg- 5 children with late transition conferences = 1 finding   
York- 1 child with a late transition conference = 1 finding

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8C - 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, based on FFY 2019 data, for this indicator. In addition, the State must report on the status of correction of noncompliance identified in October 2020, based on FFY 2018 data, for this indicator. Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the findings of noncompliance identified in October 2019, based on FFY 2017 data were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in October 2019, based on FFY 2017 data and October 2020, based on FFY 2018 data: (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 EIS program or provider, 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.

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

As per the Interim General Supervision Plan, Indicator 8C was not monitored until FFY 2020, so there were no findings issued in FFY 2019. The state will report on correction of non-compliance in the FFY 2021 APR.

## 8C - OSEP Response

OSEP's response to the State's FFY 2019 SPP/APR required the State to include in the FFY 2020 SPP/APR, the status of correction of noncompliance of prior year findings. In the correction of noncompliance section under this indicator, the State reported that it issued findings in FFY 2020 based on its FFY 2020 data for this indicator. OSEP approved in June 2021 its General Supervision Plan under its 2019 Corrective Action Plan.

## 8C - 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 EIS program or provider 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 EIS program or provider, 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 9: Resolution Sessions

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

**Results indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures under section 615 of the IDEA are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = (3.1(a) divided by 3.1) times 100.

**Instructions**

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

This indicator is not applicable to a State that has adopted Part C due process procedures under section 639 of the IDEA.

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, the State must develop baseline and targets and report 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 618 data, explain.

States are not required to report data at the EIS program level.

## 9 - Indicator Data

**Not Applicable**

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

YES

**Provide an explanation of why it is not applicable below.**

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

OSEP notes that this indicator is not applicable.

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

**Monitoring Priority:** Effective General Supervision Part C / General Supervision

**Results indicator:** Percent of mediations held that resulted in mediation agreements. (20 U.S.C. 1416(a)(3)(B) and 1442)

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED*Facts* Metadata and Process System (E*MAPS*)).

**Measurement**

Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

**Instructions**

Sampling from the State’s 618 data 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 mediations reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR.

The consensus among mediation practitioners is that 75-85% is a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data. 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 618 data, explain.

States are not required to report data at the EIS program level.

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

**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

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1 Mediations held | 0 |
| SY 2020-21 EMAPS IDEA Part C 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 C Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= |  |  |  |  |  |  |

**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** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  |  |  | N/A | N/A |

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

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

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

## 10 - Required Actions

# Indicator 11: 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 infants and toddlers with disabilities and their families. 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 Infants and Toddlers with Disabilities and their Families.

***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 2022 through February 2027, 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 Infants and Toddlers with Disabilities and their Families. 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 infants and toddlers with disabilities and their families by improving early intervention services. Stakeholders, including parents of infants and toddlers with disabilities, early intervention service (EIS) programs and providers, the State Interagency Coordinating Council, and others, are critical participants in improving results for infants and toddlers with disabilities and their families and must be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State’s targets under Indicator 11. 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 Infants and Toddlers with Disabilities and their Families;

- 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 EIS Program and/or EIS Provider 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 for Infants and Toddlers with Disabilities and Their Families (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 FFY 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., April 1, 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.

## 11 - Indicator Data

**Section A: Data Analysis**

**What is the State-identified Measurable Result (SiMR)?**

Families who have received BabyNet services for 6-12 months will be able to more effectively help their child develop and learn.

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

NO

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

NO

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

NO

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

https://msp.scdhhs.gov/babynet/sites/default/files/Theory%20of%20Action.pdf

Progress toward the SiMR

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages)*.***

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 89.24% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 89.24% | 89.34% | 89.44% | 89.54% | 89.64% | 89.74% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| # of Families who said Part C services helped them know how to help their child learn and develop. | Total # of Families who responded to the survey | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 340 | 381 | 71.48% | 89.24% | 89.24% | N/A | N/A |

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

Data source for FFY 2020 data for Indicator 11 are the responses to the Family Outcomes Survey (ECO FOS-R), provided to the family following their exit from Part C services. All families receive the survey except those whose child received less than 6 months of services.  
  
-Numerator: # of Families who said Part C services helped them know how to help their child learn and develop  
-Denominator: Total # of Families who responded to the survey

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

Data for the Family Outcomes Survey is collected from families through the Team for Early Childhood Solutions (TECS). Both online and hardcopies of the form are available, and the state’s Parent Training and Information Center (PTIC) provides telephonic supports for families requiring foreign language interpretation or other types of assistance. Preliminary analysis is completed by TECS. Final analysis is completed by the State Leadership Team (SLT). In previous years’ APRs, South Carolina used the National Center for Special Education Accountability and Measurement (NCSEAM) Impact on Family Scale (IFS) as the tool by which data for Indicator 4 were collected.   
  
As part of the work of the SSIP, it was determined that South Carolina would change from use of the NCSEAM-IFS to the Early Childhood Outcome Center’s Family Outcome Survey (revised edition, FOS-R) for collection of data related to Indicators 4 and 11. Use of the ECO FOS-R began in July 2020. Using a scale of one to five, the FOS-R analysis includes calculating an average rating of the parent’s responses to items relating to each outcome, then determining if the average meets the cutoff established by the tool’s developers.   
  
The FOS-R revised survey exhibits excellent psychometric properties Cronbach’s alpha, a measure of internal consistency, is noted for each subscale below:   
  
-Outcome 1: Understanding your child’s strengths, needs, and abilities, a = .73   
-Outcome 2: Knowing your rights and advocating for your child, a = .78   
-Outcome 3: Helping your child develop and learn, a = .87   
-Outcome 4: Having support systems, a = .78   
-Outcome 5: Accessing the community, a = .91   
  
-Indicator 1: Knowing your rights, a = .90   
-Indicator 2: Communicating your child’s needs, a = .74   
-Indicator 3: Helping your child develop and learn, a = .94.

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

YES

**Describe any additional data collected by the State to assess progress toward the SiMR.**

Additional data collected includes a survey that Service Coordinators completed regarding their experience with the new Family Outcomes Measurement System (FOMS), RBI Implementation Checklist, and RBI Boot Camp Evaluations. The survey and evaluation results are used to assist in identifying necessary revisions to the processes. Trainees must score 80% or higher on the checklist in order to become state-certified in RBI and be allowed to conduct the RBI with families in SC.

**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)**

NO

Section B: Implementation, Analysis and Evaluation

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

NO

**Describe how the data support the decision not to make revisions to the evaluation plan. Please provide a link to the State’s current evaluation plan.**

The evaluation plan can be found in the State's Phase 3, Year 1 SSIP report found here: https://msp.scdhhs.gov/babynet/sites/default/files/SSIP%20Phase%203-year%201-4.28.2020-Final.pdf  
The state still considers this evaluation plan to appropriately determine progress towards the SIMR.

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

The State has focused on two infrastructure improvement strategies, the Family Outcomes Measurement System (FOMS) and the family assessment process. The SLT, Regional Implementation Team (RIT) and other team members collaborated to make progress on SSIP activities. Since the role of Director of Training and Technical Assistance at the Team for Early Childhood Solutions (TECS) had been vacant for several years, the State determined that filling this position was vital in the success of the SSIP. The State’s objective for this position, among other things, is to manage the family assessment process to ensure fidelity, lead the effort to have all service coordinators in the state trained in RBI, and to provide oversight and guidance to Part C personnel. In November 2020, TECS hired a new director who is RBI certified and has experience as a statewide training director. The TECS Director was also assigned to work in collaboration with the RIT for statewide implementation of FOMS. The joint effort in these practices and each improvement strategy is included below:   
  
1. Statewide Training and Implementation of ECO Family Survey:   
During the last reporting year, the State began implementing the revised Family Outcomes Measurement System. The SLT and the RIT analyzed past data and assigned the region with the lowest response rates as the pilot for the new family survey process. The FOMS training for the pilot group was held in August 2020. The ECO Family Outcomes Survey responses regarding how to help a child learn and develop supported implementation of the new practice. Service coordinators offered positive feedback related to the new process and the SLT determined response rates had increased in the pilot region. Based on this feedback and positive results, the State made the decision to scale up to statewide implementation of the new FOMS process.  
  
The new TECS director and the RIT arranged a meeting to analyze the Stakeholder feedback and review the FOMS presentation for adjustments. In May, 2020, the SLT and RIT dispersed a Save the Date to Service Coordinators announcing the revised FOMS and training. The goal of the training was to introduce statewide staff to the new FOMS, though they would not begin implementation until FFY 2021. Staff were given the option to attend a live webinar or to view the presentation online since it was a State requirement for the new practice. The presentation was posted in the South Carolina Early Intervention Learning System (SCEILS), the learning management system used by the State, which is administered and maintained by TECS. The pilot group was offered the opportunity to attend the training as a refresher (to their August 2020 original training).  
  
In June, 2021, the TECS director and the RIT presented an overview of the FOMS to the entire state. During the training, the survey procedures were outlined, and staff were informed of the dissemination process. Participants were shown the postcard to deliver to families during their first 6 month IFSP and at exit. Families have several format options for survey completion, including online, paper or telephone. The QR code on the postcard navigates the family directly to the online survey. All families were mailed a hard copy of the survey, as well, and could choose to complete the paper version or online version. The family could contact Family Connection of South Carolina, the state’s PTIC, for assistance or for Spanish translation. Participants of the training completed the same stakeholder survey as the pilot group in order to provide additional feedback to the State and measure proficiency of the new practice.   
  
While the State completed the training on FOMS and the family survey during the reporting year, full implementation did not begin until July 1, 2021. Consequently, the State will not see statewide results in the data until next year.   
  
2. Spanish Translation of Postcard:   
Post cards were printed in English and Spanish and disseminated to local providers. Providers are able to request additional cards from the State whenever necessary.  
  
3. Family Outcomes Policy and Procedure  
The draft of the Family Outcomes policy and procedure began during FFY 2019, and the State finalized these during FFY 2020.The IDEA Part C Director approved the drafted policies and procedures in May 2021, so two public hearings were scheduled for public comment in July 2021. Further details will be outlined in the next reporting period.  
  
4. FOMS Resources  
After the statewide FOMS training was conducted in June 2021, the accompanying Frequently Asked Questions (FAQ) document was revised to include additional questions. Both Child and Family Outcome tools have traditionally been posted on TECS website. The RIT and TECS Director combined efforts to complete an overhaul of the materials on the website since it had not been updated in many years. Outdated items and links to various sources that were no longer functional were removed. The team worked together to develop updated guidance, tips sheets, and instructions on the new FOMS process.

**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.**

1. Short-term outcomes – 1 year  
  
-Implementation of FOMS in Regions 1, 3 and 4.  
-Implementation of RBI in Regions 2, 1 and 3.  
  
The State has made great progress with both short-term outcomes. The following description will explain the implementation of FOMS in Regions 1, 3 and 4. The SLT and RIT continued to broaden infrastructure through professional development. An overview of the new practice, including an explanation of FOMS, the importance of survey completion and the role of Service Coordinators during the dissemination process. On June 16, 2021, the RIT and TECS Project Director collaborated to scale-up with implementation of FOMS through a training and Question and Answer session with the remaining portion of the state, Regions 1, 3 and 4. As a result, FOMS was fully implemented statewide on July 1, 2021.   
  
During the pilot stage, a Stakeholder Survey was used as a data source to measure sustainability of system improvement efforts as well as determining necessary strategies towards achievement of the SiMR. The Stakeholder Survey completed by the pilot region provided the State with positive feedback regarding the family outcomes survey, the dissemination process and responses from families. Additional responses from the pilot addressed a few items to support the system change. For example, the need for a survey to be translated in Spanish was in the original plan, but not expected to be completed and distributed until after scaling-up, statewide, with the new process. This Stakeholder input presented the need for the RIT and TECS Project Director to produce the proposed timeline of the statewide process and share with providers. Further, this team also included a Question and Answer (Q/A) session in the plan for the statewide training, which would include the appropriate contacts to assist families in completing the survey and Spanish interpretation.  
  
The State used the same Stakeholder Survey with the remaining regions and was able to compare the responses and feedback received to those of the pilot. The feedback received from the Service Coordinators confirmed they understood the new dissemination process for the family survey and acknowledged their responsibility in the new practice. The SIT, RIT and TECS Project Director created additional tools and resources based on the feedback that was received during the pilot training. The resources included, FOMS Frequently Asked Questions, Talking Tips for Families, and a Flow Chart. These efforts guide and support ongoing progress towards the SiMR. Technical Assistance was provided during the statewide training, for local staff to obtain an understanding of the materials and to provide assistance to families. Some of the responses regarding these tools conclude that Service Coordinators increased their knowledge of how to explain the survey to families and communicate the importance of their responses. Most Service Coordinators now have an understanding of their role in dissemination but are concerned with follow-through from the family. Some participants admitted their lack of confidence in defining family outcomes prior to the training but are now capable of explaining the entire family outcomes process.  
  
The resources for the new FOMS have been posted to the TECS website. In addition, the FOMS training is available for viewing in the SCEILS Learning Management System.

**Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)**

NO

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

1. Develop and implement survey/evaluation to measure fidelity of practice for FOMS.  
2. More actively involve Stakeholders in the review and use of data.  
3. Research analyst to send the SLT and RIT family survey responses quarterly. This allows real-time monitoring of progress towards SiMR. Being able to see how many families are responding to the survey and then analyzing their feedback will provide the State with evidence of services being received and how well a family understands how to help their child develop and grow. The responses received from families will be the driving force in determining training and technical assistance to provide Service Coordinators.

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

The Routines-Based Interview was the selected evidence-based practice that was implemented in Region 4 during the reporting period.

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

The Routines-Based Interview is a detailed interview of mostly open-ended questions the Service Coordinator conducts with the family and/or caregiver prior to the initial IFSP. This conversation focuses on the day-to-day routines in which the child and family participate and is seen through the eyes of the parent. The interview allows the Service Coordinator to receive a rich description of the family and child while establishing a strong relationship with the family. As a result of the interview, functional outcomes for the child and family are created based on the priorities and concerns of the family throughout their daily routines.

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

Historically, the State used a Family Assessment that was more like a checklist. The tool did not provide a summary of the daily routines of the family. During regular reviews of child records, IFSP outcomes were not always functional and measurable, so it was determined that Service Coordinators needed updated training on writing functional outcomes. The State concluded with the implementation of the RBI, Service Coordinators would be provided with a more thorough family assessment and would learn how to appropriately write IFSP outcomes. Since the RBI provides a semi-structured interview about a family’s day-to-day life, Service Coordinators are given an opportunity to receive a broad description of child and family functioning and are able to build a trusting relationship with the family. The interview sets the stage for gaining an understanding of the child’s engagement, independence and their social interactions throughout the day. Throughout the interview, Service Coordinators highlight problem areas for the family as well as what seems to be working well, which results in a list of family-chosen functional outcomes/goals. In turn, the outcomes/goals that are created would assist families in helping their child develop and learn (SiMR).  
  
Throughout the RBI Boot Camp, participants are taught to create an ECO map. This map is a representation of the family unit and the support systems that surround them. Participants are also gaining knowledge on the structure of the RBI and how to use the RBI protocol. Since the interview is so detailed, participants learn how to ask open-ended questions and how to walk the family through each routine in their day. This change in practice will help families become more engaged in family training activities and will teach Service Coordinators how to be active listeners and to focus on the needs of the family and child.

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

Data was collected to monitor fidelity of implementation of the RBI and how it aligns with both the Knowledge and Family Engagement Strand from the Theory of Action. During this reporting period, only Region 4 had completed RBI Boot Camp. Region 4 had an RBI refresher course in April 2021, since the Boot Camp had taken place prior to the pandemic. Once participants completed the training, they were given six weeks to practice using the new family assessment tool prior to submitting their video for state certification. At the time of submission, participants were expected to send a completed ECO map, a video of a full RBI with a family, the IFSP outcomes that were created from the RBI, and the internal implementation plan to be used by Service Coordination Agency Trainers. Each participant was scored from the RBI Implementation Checklist. The checklist was comprised of 37 questions that are broken into categories with the RBI. For each question, the participant will receive:  
 (+) Observed as Directed,  
 (+/-) Partially Observed, or   
(-) Not Observed or Observed to be Incorrect.   
  
The categories are: Beginning, Routines, Style, Family Issues, and Outcomes/Goals Selection. To obtain RBI certification and move on as a trainer for the Service Coordination Agency, the participant must score 80%. If the participant scores between 75-79%, they are given another 4-6 weeks before they must submit an additional video that includes 2-3 daily routines. If the participant scores below 75%, they are given another 4-6 weeks before they must submit a completely new video of an RBI with a family.  
  
Once a participant has scored 80%, they are state-certified trainers and will train their agency’s/company’s staff based on the Internal Implementation Plan that is submitted with their video. SLT and TECS review and respond to the internal plan within 7 days of receiving it from the agency. After approval is received, all staff of that agency must be fully trained and completing RBI’s within six weeks. The requirements for the Internal Implementation Plan include:  
1. Method in which the training will be executed.  
2. Examples of RBI continuing education provided.  
3. RBI will be observed and scored, annually, for each Service Coordinator within each agency to ensure sustainability of new practices and fidelity of RBI.  
4. Each agency will be required to keep an RBI scored checklist on file for each Service Coordinator.  
5. All initial RBI training must be completed within six weeks of approval of Internal Implementation Plan.  
  
During the reporting period, Region 4 certified 17 RBI trainers. Region 2 completed Boot Camp and state-certification in FFY 2021. These results will be discussed in the FFY 2021 APR.

**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.**

The SLT and RBI Boot Camp trainers have received positive feedback from trainees regarding the impacts the RBI has made on the family, team, and IFSP goal attainment. The State will not be able to compare Indicator 4C data until FFY 2021 based on when the RBI was implemented. The State will be able to compare past years’ Indicator 4 data and current Indicator 4 data for Region 4 (RBI trained) and the rest of the state that was not trained during the reporting period.

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

The State will continue to scale-up with RBI implementation. Region 2 RBI Boot Camp took place in September 2021 and will be included in the next reporting period. Region 1 is scheduled for Boot Camp in March 2022. Region 3 is scheduled for their Boot Camp during summer/fall of 2022. This will result in the full implementation of RBI with families, statewide, by February 2023.  
  
To provide additional support and feedback, the TECS Director will develop a Community of Practice for all Service Coordinators. This will provide a time to meet virtually, once a month, with a breakdown of each indicator included on the RBI checklist. This allows the opportunity for Service Coordinators to practice the RBI and to gather insights on different techniques that can be used.

**Describe any changes to the activities, strategies, or timelines described in the previous submission 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 new timeline for training is detailed in the section above. This is the only change noted.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

The state solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings (pre-COVID) with providers. During BRIDGES Integration work in early FFY 2020, state office staff reached out to groups of providers for input via conference call, survey, or email to solicit their input on potential changes and how those changes might impact their work. The SCICC met in January 2021 and reviewed all indicators and targets. The Council discussed each of the results indicators and revised targets and baselines, as needed.  
  
The state also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual public hearings to accept public comment. In FFY 2020, the State held four public hearings to review policy/procedure meetings and accept comment on the changes. Those dates include 8/20/20, 8/24/2020, 12/18/2020, and 12/30/2020.  
   
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. Formats include, surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

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

Interagency Improvement Council (ICC)  
The ICC meets every other month and the SSIP improvement strategies are discussed. ICC members are encouraged to provide input, feedback and suggestions to the SLT and SIT.  
  
Family Connection of South Carolina  
The PTIC contributed to continued progress toward the SiMR by offering family engagement trainings and creating a new website with parenting resources, including the updated Central Directory. In addition, Family Connection has continued to provide assistance to families in need of interpretation/translation services while completing the family survey or any other families in need of support with the survey.  
  
Service Coordinators  
Service Coordinators are given a Stakeholder survey to evaluate their satisfaction with the new FOMS process after attending training. The feedback provided by the Service Coordinators provides the SIT and RIT with specific training and/or technical assistance needs related to FOMS implementation.  
Some of the feedback received includes:  
“It explained the why behind the process as well as what Service Coordinators are expected to do.”   
  
“This training was informative in helping me learn how to explain the survey to families and how to set them up for success when completing the survey.”  
  
“It was great that we were able to ask questions and had a thorough explanation as to the why behind it!”  
  
Service Coordinators are also given an evaluation once RBI Boot Camp has been completed. This evaluation allows participants the opportunity to share their suggestions or concerns and a chance to share experiences. Feedback received from participants includes:  
  
“RBI is a great way to know the family and what their family needs and desires in working with their child/children. Looking forward to learning more about the process and implementing it with families.”  
  
“I think this training was very informative. This was very relatable as an EI/SC. Seeing the actual RBI was very helpful to know what it will look like from start to finish.”   
  
“Was very detailed. The video gave a great example of how to ask questions and make the interview flow.”  
  
“I believe that RBI would help children reach their maximum goals because it is aimed at each individual child. However, I have concerns regarding the time limit and expectancies of the parent.”   
  
Public Hearing  
The provider community was made aware of the updates to the policies and procedures for FOMS through the Part C Listserv and through the Local Early Intervention Systems Meetings (LEIS). Providers were given an opportunity to submit comments and/or questions regarding the new policies and procedures. The new process was also discussed in detail at monthly Interagency Program Manager meetings.  
  
Local Early Intervention Systems Meetings  
Service Coordinators and Service Providers attend month LEIS meetings. During these meetings, participants are updated on all program updates, including SSIP and are given an opportunity to ask questions and provide suggestions/feedback. Attending LEIS meetings ensures capacity building for implementation and sustainability of new practices with a consistent group of participants.

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

YES

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

In the Stakeholder Survey that was completed by Service Coordinators, many Service Coordinators expressed the need for additional resources to help start conversations with families regarding the explanation of family outcomes and the family survey. To address this concern, the RIT created a Talking Tips resource for Service Coordinators to use. The resource can be found on TECS website: https://uscmed.sc.libguides.com/tecs/family   
  
During the FOMS feedback webinar, the need for a Spanish version of the survey was expressed. Since the Spanish version was in the original plan and would be disseminated after Service Coordinators had been trained in FOMS, statewide, Service Coordinators were made aware of this through the training and through an announcement on the Listserv. This announcement also included how Service Coordination agencies would receive postcards, both Spanish and English, starting in January 2022.

**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.**

The General Supervision Plan will be fully implemented starting in FFY 2021. As the state begins to monitor indicators 1, 7 and 8C, services will be more likely to be provided in a timely manner. As services are provided timely, families will develop a more trusting relationship with their providers and will learn more about how to help their child develop and learn (SiMR).   
  
The State plans to scale-up with RBI in other regions of the state. In September 2021, RBI Boot Camp was held with Region 2. Once Region 2 has successfully become certified to train their agencies in RBI, additional RBI Boot Camps will be conducted in March 2022 and summer 2022.   
  
The System Point of Entry (Eligibility) staff will begin using the Developmental Profile-4 (DP-4) to determine eligibility. The DP-4 is a comprehensive assessment instrument. It includes 190 test items that describe a particular skill. The parent/caregiver informs whether the child has mastered each skill. The DP-4 evaluates the functioning of a child within 20-40 minutes. The norms-based standard scores allow the opportunity to compare the child’s functioning to that of their same aged peers. Service Coordinators and families will be able to identify the child’s strengths and weaknesses and develop a team to assist the family in helping to understand their child’s needs and how to help them develop and learn (SiMR).

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

The Team for Early Childhood Solutions will be providing preliminary survey results to service coordination agencies and the state throughout FFY 2021. This will allow parties to address issues prior to the end of the fiscal year.   
  
Family Outcomes Survey dissemination:  
Each family with an active IFSP will receive a survey approximately 6 months after their initial IFSP and again approximately 1 month following their BabyNet exit. The expects to be able to compare the families' first and second survey responses and report on the results in the FFY 2021 SSIP report.  
  
RBI Training:  
Region 4: May 2019 (refresher April 2021)  
Region 2: September 2021  
Region 1: March 2022  
Region 3: Summer 2022  
  
DP-4 implementation: August 2021

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

A barrier the state has run into is determining whether the RBI Boot Camps should be conducted face-to-face or if they should continue virtually. One challenge with face-to-face trainings is not knowing whether COVID-19 cases will be on the rise and if rescheduling would need to take place. Another challenge is finding an implementation site capable of providing the right amount of space. A large room would be needed for all participants to observe the family interview, but smaller rooms are necessary for the break-out sessions. The State is still in the planning stages of determining future formats of the training, however, has a timeline is in place to continue scaling-up with RBI.

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

## 11 - Prior FFY Required Actions

None

## 11 - 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.

## 11 - Required Actions

# Certification

**Instructions**

**Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.**

**Certify**

**I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.**

**Select the certifier’s role**

Designated Lead Agency Director

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.**

**Name:**

Jennifer Buster

**Title:**

IDEA Part C Director

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**Submitted on:**

04/22/22 3:00:27 PM

# ED Attachments

**  **