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

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

**For reporting on   
FFY 2021**

**South Carolina**

U.S. Department of Education seal

**PART C DUE   
February 1, 2023**

**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**

Prior to July 1, 2021, the BabyNet program completed all aspects of the 2018 Corrective Action Plan. The program's major accomplishments since changing lead agencies in 2017 include, but are not limited to, the following:  
-developing and implementing all new policies and procedures  
-centralizing referrals and intake  
-integrating billing and payments  
-implementing the full general supervision plan, including issuing findings and determinations to local programs  
-initiating the use of the Routines-based Interview  
-revising the Family Outcomes Measurement System  
  
Statewide staffing shortages have had a negative impact on service provision, especially services provided in the natural environment. For the first time, the State experienced shortages in service coordination providers. Stakeholder groups met to determine possible ways to address these shortages. Staffing shortages also led to a decrease in the number of services provided in the natural environment. Higher caseloads made it more difficult for providers to drive to homes (or other natural environment settings) and many reported they didn't feel as safe providing services outside of their clinics. Many companies laid off staff in the early days of the pandemic and have not filled those positions again. Other staff have left the field completely or have decided to provide services for programs that allow for more flexibilities with telehealth.  
  
Along with larger agency-wide reorganizations, the BabyNet State Office also underwent internal reorganizations. The new positions and redesign of previous positions has allowed BabyNet to better serve the local providers and stakeholders, as well as complete required reporting to the OSEP. Notable changes include adding a full-time Part C Data Manager, Fiscal/Budget Manager, and Provider Relations Manager. Several other positions were added under each track (see list below).  
  
BabyNet Part C Coordinator  
-BabyNet Administrative Coordinator  
-Part C Data Manager (new)  
 --BabyNet Quality Assurance Specialist (new)  
-Part C Operations Manager  
 --Regional Coordinators (3) (1 currently vacant)  
-Finance/Budget Manager (new)  
 --Fiscal Analyst (new)  
-Provider Relations Manager (new)  
 --Provider Relations Specialist (new) (currently vacant)  
-Policy Manager  
  
  
See "Intro-Prior FFY Required Actions" to see the list of National Technical Assistance received, as well as follow-up actions taken by the State.

Additional information related to data collection and reporting

BabyNet continued to see improvements in data related to compliance and results indicators. After discussing data reporting options with the Office of Special Education Services (OSEP), BabyNet determined it would begin using sample data for compliance indicators 1 and 7 for FFY 2021 and for 8C beginning in FFY 2022. The use of sample data will give the State more opportunities to ensure data is valid, complete, and reliable. BabyNet's current data system doesn't mandate late reasons for services not provided within 30 days of identification, so State staff have to request this information from service coordinators. Verifying late reasons manually is only possible if sample data is used due to the number of services delivered each year. This new process has proven that services are provided much timelier than previously considered.

**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.**

The State began implementation of the full General Supervision Plan with the FFY 2020 reporting cycle. The following is a list of findings for FFY 2021:  
  
Indicator 1:  
All 7 districts received findings (or continued findings) for Indicator 1.  
Indicator 7:  
Anderson, Charleston, Richland, and Spartanburg received findings (or continued findings) for Indicator 7.  
Indicator 8C:  
Anderson, Charleston, Richland, Spartanburg and York received findings (or continued findings) for Indicator 8C.  
   
For FFY 2021 data, BabyNet continued implementation of the full General Supervision plan and issued findings for Indicators 1, 7, and 8c on 10/28/2022 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, 2021 to December 31, 2021. This data was reviewed and sent to service coordination providers to submit updates during the month of September 2022. These updates include corrections to typos, omitted late reasons, and other missing data. After updates were made and final non-compliance was documented, findings were issued on October 28, 2022, which was within 90 days of identification of non-compliance (identification was made on 9/1/22). Correction of non-compliance will be verified with subsequent data pulls in January 2023. 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 2022 APR. The BabyNet Regional Coordinators held LEIS Meetings with each of their assigned districts to review the general supervision process, non-compliance identified, and issued findings in the month of November 2022. Local system personnel had the opportunity to ask questions throughout these meetings.   
   
 The Regional Part C Coordinators generate monthly reports from the BabyNet Reporting and Information Data Gathering Electronic System (BRIDGES) data system and work with their assigned LEIS teams to ensure data is current and accurate 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   
-Children who have not had a service log entered in the past 45 days (possible missed closure)  
-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 within SCDHHS. Staff also participated in a webinar called "Dispute Resolution: A Tune-Up," so the program can continue to get ideas on how other states are improving dispute resolution processes. The SCDHHS Appeals and Hearings Office and hearing officers were trained on Part C requirements, including complaints and dispute resolution, by BabyNet staff in October 2022.

**Technical Assistance System:**

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidence-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 the regional coordinators who are supervised by the BabyNet Operations Manager. This structure helps ensure consistency in answering and coordinating timely responses and identifying trends. Regional Coordinators are also responsible for monthly Local Early Intervention System (LEIS) 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. 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. While LEIS meetings adjusted to a virtual format during much of the Public Health Emergency (PHE), these meetings have returned to face-to-face formatting effective July 2022 (whatever month)  
   
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. As of the end of FFY 2021, three of the four regions have completed training to become Routines-based Interview trainers. 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 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   
  
Near the end of FFY 2021, TECS began working with the State to develop a plan to revise the Comprehensive System of Personnel Development (CSPD). This work will continue throughout FFY 2022 and will include stakeholders, such as families, service providers, service coordinators, and other state agency representatives.

**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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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:**

5

**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 four parent members, participated in SCICC meetings where all SPP/APR indicators were discussed. Targets were reviewed but not changed for FFY 2021, as the State made significant changes to targets in FFY 2022. Parent representatives had the opportunity to provide input during SCICC meetings, including the January 2023 meeting where the FFY 2021 APR was discussed.

**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.**

BabyNet partners with the PTIC, Family Connection of SC (FCSC). Through this partnership, FCSC is able offer SC families with infants and toddlers, peer-to-peer support, trainings, and outreach that align with SC's BabyNet's SPP/APR specifically with Indicators 4, 5, 6. Also, FCSC assumes responsibility for creating and maintaining BabyNet's Central Directory, in accordance with Section 635 of PL 108-446. In FFY2021, FCSC provided 996 families of infants and toddlers peer support and information. Of the 996 families, 44% of the families were families of color (22% non-Hispanic Black, 22% Hispanic). Over the past 3 years, due to the partnership, the PTI has been able to increase the number of Hispanic families (ages birth to 3) receiving peer support and navigation by 49%. FCSC offered 32 workshops, training 625 parents and professionals on issues related to early intervention and special education. BabyNet also sponsored a learning track at the FCSC’s annual Hopes & Dreams conference where 1,125 parents and professionals attended. This partnership provides scholarships so parents can attend at no cost.

**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 2021. BabyNet State Office conducted four public hearings: 7/6/2021 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.

**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.**

At the January 2023 SCICC meeting, the Part C Coordinator and Data Manager reviewed the purpose of the SPP/APR, the definition and measurement of each indicator, and previous FFY data and targets. The group also discussed possible root causes for not meeting targets and/or data slippages from the previous year. The council agreed to continue with the targets and baselines set in FFY 2020 for each of the results indicators. The SPP/APR will be posted on the BabyNet website no later than February 1, 2023. Members of the public will have the ability to provide feedback to the Lead Agency through a comment portal on the BabyNet website.

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2020 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 2020 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 2020 APR in 2022, is available.**

The SPP/APR, data related to local performance, and local determinations are posted on the BabyNet website. This information can be found using the following link; https://msp.scdhhs.gov/babynet/site-page/state-and-federal-reporting. This information was reported to the SCICC in January 2022 and posted to the BabyNet website prior to on April 20, 2022. Local determinations and data were shared with Regional Coordinators on April 20, 2022 and were discussed in their May 2022 Local Early Intervention System meetings.

## Intro - Prior FFY 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.

**Response to actions required in FFY 2020 SPP/APR**

National Technical Assistance Received:  
  
  
July 1, 2021- Call with Alyson Cavanaugh (UNC) to review feedback on our Notice of Family Rights & Safeguards  
July 26th, 2021- Participated in the Procedural Safeguards Training & TA Call (CADRA/ECTA).  
-Result: Revisions were made to Notice of Family Rights & Safeguards document.  
  
August 23, 2021- TA Call on Dispute Resolution (CADRE).   
-Result: Review of Dispute Resolution processes and education of internal staff. Provided Dispute Resolution training to Appeals and Hearings staff on the complaint investigation and dispute resolution process for Part C on 10/12/21. Updated website to include information on Dispute Resolution for Families.   
  
September 9, 2021- OSEP National TA call. Focus on IDEA SPP/APR indicators for Family Engagement. OSEP and Early Childhood Technical Assistance Center and the Center for Parent Information and Resources will share information on the role and importance of the family’s voice, input and participation throughout their children’s early intervention and special education lifespan. Discussion regarding Department’s Back to School guidance and Secretary Cardona’s commitment to engage all children and families with disabilities as well as establish and ensure equity and access to services. Discussed family survey data and COVDID’S impact on FFY 2019 survey data and the promising positive benefits of representativeness on early intervention and special education programs.  
-Result: Used information to help with explanation of data changes related to the impact of COVID.  
  
September 27, 2021- Dispute Resolution System Improvement TA call (ECTA and CADRE).   
-Result: Continue to evaluate Dispute Resolution System Improvement.  
  
September 30, 2021: Call with Sherry Franklin to discuss COS process.  
-Result: Used information to verify that current policies and procedures were up to date.  
  
October 14th, 2021- Participated in National TA call with OSEP. Discussion on the FFY 2020 State Performance Plan (SPP)/Annual Performance Report (APR).  
-Result: Used information for development of FFY 2020 SPP/APR Package.  
  
October 28, 2021- Participated in CADRE’s Dispute Resolution in Special Ed Conference.  
October 29, 2021- Participated in CADRE’s Dispute Resolution in Special Ed Conference.  
-Result: Continue to evaluate Dispute Resolution System Improvement  
  
November 30th, 2021- Call with Sharon Lunn of UNC regarding SC-C Target Setting TA Call (Re-setting Baseline for C3).  
-Result: Used information to re-set Baseline for C3.  
  
December 9, 2021- OSEP December National Technical Assistance Call regarding recently released Part C Return to School roadmap documents: Child Find, Referral, and Eligibility; and Provision of Early Intervention Services. Discussed guidance to states related to the implementation of Child Find and early intervention services, including C to B transition, as programs continue to increase in-person services.  
-Result: Ongoing discussions with Department of Education regarding improving transition.   
  
December 10, 2021- FFY2020 SPP/APR Part C Technical Webinar.  
-Result: Used information for development of FFY 2020/SPP/APR Package.  
  
January 25, 2022-Correspondence with Sharon Lunn, ECTA and other EMAPS staff regarding electronic signatures and accessibility of the ICC certification form  
-Result: Determined many states have problems with this form as it is uploaded already having accessibility issues. BabyNet has shared these concerns with OSEP and EMAPS staff for several years now.  
  
February 10th, 2022- OSEP National TA Call. Reviewed requirements for the completion of the FFY 2022 IDEA Part B and Part C grant applications.  
-Result: Used information for the completion of the Part C grant application.  
  
March 3, 2022 – Family Survey Response Rates, Representativeness and Non-response Bias  
-Result: The SSIP Collaboration Workgroup discussed the resources and tips that were shared during the Community of Practice call. New resources were created to help service coordinators improve their survey response rates and understand what families were saying about the services they received.  
  
April 14, 2022- OSEP National TA Call. States given the opportunity to clarify or correct the information submitted in FFY 2020/SPP/APR, prior to Department’s 2022 determinations for states. OSEP provided feedback through EMAPs on the State’s FFY 2020 SPP/APR data that OSE will consider in making the Department’s determination under IDEA Section 616(d).   
-Result: In response to feedback, we submitted to OSEP through EMAPs any corrected data and clarified any misunderstandings by OSEP about the data submitted.  
  
June 9, 2022- OSEP National TA Call. OSEP provided an overview of 1) the criteria the Department will use to make 2022 determinations; and 2) what States should expect once determinations are issued.   
-Result: Used information in reviewing determination.   
  
June 23, 2022-Email correspondence with Sharon Lunn, ECTA regarding service coordination models  
-Result: BabyNet used the resources and information to inform potential policy changes. These potential changes are still under review.

## 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 determinations for both 2021 and 2022 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, 2022 determination letter informed the State that it 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. The State provided the required information.

## Intro - Required Actions

# 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 40.63% | 40.25% | 59.65% | 73.74% | 78.00% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 642 | 714 | 78.00% | 100% | 95.10% | 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.***

37

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

The State attributes noncompliance to the provider, service coordinator, or state. Half of all late services were attributed to the State due to provider network inadequacies. 37.25% of late services were attributed to providers and 13.7% were attributed to service coordinators not making timely referrals.  
  
Statewide staffing shortages have had an impact on service provision in general and in the natural environment. Higher caseloads made it more difficult for providers to drive to homes (or other natural environment settings) and many reported they didn't feel safe providing services outside of their clinics. Many companies laid off staff in the early days of the pandemic and have not been able to fill those positions again. Other staff have left the field completely or have decided to provide services for programs that allow more flexibilities with telehealth.

**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.

**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, 2021-December 31, 2021

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

Calculations are considered to be valid because the State has 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.   
  
Cumulative Statewide Eligible Population (All infants and toddlers who had an IFSP during FFY 2021):  
White: 52.8%  
Black/African American: 28.7%  
2 or More: 7.4%  
Hispanic 9.15%  
Native Hawaiian-Other Pacific Islander: .14%  
American Indian-Alaskan Native: .28%  
Asian: 1.4%  
  
Sample Population:  
White: 55.19%  
Black/African American: 26.65%  
2 or More: 7.33%  
Hispanic 8.45%  
Native Hawaiian-Other Pacific Islander: .04%  
American Indian-Alaskan Native: .31%  
Asian: 2.02%

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

Prior to FFY 2021, the State reported data for Indicator I differently from general supervision (findings/noncompliance). Previously, the State reported data for Indicator I based on all timely services for all children in the state for the entire fiscal year. This was problematic because it didn't allow exceptional family circumstances to be considered in the formula. The current data system will report on late reasons, but the system does not require a late reason if it detects that the service began more than 30 days from the origination date. Some late reasons were included, but not enough to provide an accurate representation of the services not provided timely due to extenuating family circumstances. The State has known for several years that the percent of timely services provided was being reported lower than what was actually occurring but didn't know how to address the issue until recently.  
  
For general supervision, the State used a 10% sample of children by district who received services from July 1 to December 31. This method allows state office staff the opportunity to work with service coordinators and providers to determine if any late services are due to exceptional family circumstances. After discussing the two methods with SC's OSEP contact, the State decided to use the same sampling methodology for the APR and General Supervision (findings/noncompliance).

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **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 | 4 | 0 | 3 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

In January 2022, the State reviewed a 10% sample of all children who were supposed to begin at least one service in the month of November 2021. Through this data and electronic record reviews, the State determined that four of the seven districts corrected noncompliance by ensuring previously identified late services were eventually delivered AND no newly identified services were late. Three of the seven districts did eventually provide services (though late), but also had new late services identified. These three districts went into FFY 2021 with a continued finding.

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

As per the Correction of Non-compliance section in South Carolina's full General Supervision Plan, the state completed a subsequent data pull in January of 2022 to assist with verification of correction of non-compliance. This subsequent pull consisted of a 10% data sample by district for the month of November 2021. State office staff review each late service to determine correction and reviewed a 10% sample (by district) of data from the month of November 2021 to determine if all services were timely. If all late services associated with the October 30, 2021, findings eventually occurred AND there were no new late services identified in the January 2022 subsequent data pull, then the findings are considered cleared, and non-compliance corrected. For Indicator 1, the state determined that four of the seven findings were cleared, using the two-prong verification approach. Anderson, Colleton, Spartanburg, and York districts all demonstrated that the previously identified late services did eventually occur AND they had no new late services identified in the subsequent January data pull.  
  
Anderson- 3 children with late services = 1 finding-94.67% Timely--Cleared with January pull  
Charleston- 1 child with late service(s) = 1 finding—99% Timely  
Colleton- 4 children with late services = 1 finding –85.8% Timely--Cleared with January pull  
Horry- 3 children with late services = 1 finding—97.5% Timely   
Richland- 3 children with late services = 1 finding—97.7% Timely   
Spartanburg- 6 children with late services = 1 finding -96.5% Timely--Cleared with January pull  
York- 2 children with late services = 1 finding –94.8% Timely--Cleared with January pull  
  
Root Causes:  
High rate of turnover and difficulty keeping trained service coordination and provider staff   
Inconsistent understanding of requirements led to untimely service provision  
Lack of understanding of timelines policies and procedures  
Provider didn’t follow proper procedures for scheduling services  
  
Action Steps:  
Regional Coordinators have reviewed service provision procedures and timelines at local early intervention system meetings. They have also met one-on-one with providers who contributed to non-compliance. BabyNet State Office has begun sending monthly reports to providers and service coordination supervisors notifying them of late services with missing delay reasons and/or missing service logs.

**FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Three of the seven districts did not correct findings within 12 months and are required to complete a corrective action plan with the State. Subsequent data will be pulled again in January 2023 to determine if findings will be considered corrected. Each CAP included root causes for noncompliance, action steps to ensure noncompliance does not occur again, details related to subsequent data/monitoring and a target date for completion. Regional Coordinators have already begun working with their districts to provide face-to-face training and technical assistance related to the CAP. The results of the corrective action plans will be reported in the FFY 2022 APR.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 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.

**Response to actions required in FFY 2020 SPP/APR**

Included in Indicator 1 data section.

## 1 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2021- June 30, 2022). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 1 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining three uncorrected findings of noncompliance identified in FFY 2020 were corrected.  
When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2021 and each EIS program or provider with remaining noncompliance identified in FFY 2020: (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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= | 97.64% | 97.64% | 98.00% | 98.00% | 93.00% |
| Data | 97.33% | 97.82% | 98.03% | 93.73% | 93.44% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 7,266 |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Total number of infants and toddlers with IFSPs | 7,848 |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 7,266 | 7,848 | 93.44% | 93.10% | 92.58% | Did not meet target | No Slippage |

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

Statewide staffing shortages have had an impact on service provision. These shortages have also led to a decrease in the number of services provided in the natural environment. Higher caseloads made it more difficult for providers to drive to homes (or other natural environment settings) and many reported they didn't feel safe providing services outside of their clinics. Many companies laid off staff in the early days of the pandemic and have not been able to fill those positions again. Other staff have left the field completely or have decided to provide services for programs that allow more flexibilities with telehealth.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A1** | 2020 | Target>= | 78.00% | 78.00% | 80.10% | 80.10% | 74.22% |
| **A1** | 74.22% | Data | 78.17% | 77.07% | 74.09% | 73.54% | 74.22% |
| **A2** | 2020 | Target>= | 54.00% | 54.00% | 60.00% | 60.00% | 47.49% |
| **A2** | 47.49% | Data | 50.70% | 52.03% | 49.40% | 48.51% | 47.49% |
| **B1** | 2020 | Target>= | 81.00% | 81.00% | 82.10% | 82.10% | 77.92% |
| **B1** | 77.92% | Data | 81.68% | 79.48% | 78.99% | 78.23% | 77.92% |
| **B2** | 2020 | Target>= | 50.00% | 50.00% | 55.00% | 55.00% | 42.84% |
| **B2** | 42.84% | Data | 47.54% | 48.13% | 46.47% | 45.12% | 42.84% |
| **C1** | 2020 | Target>= | 82.00% | 82.00% | 82.10% | 82.10% | 76.94% |
| **C1** | 76.94% | Data | 80.28% | 78.04% | 76.70% | 77.75% | 76.94% |
| **C2** | 2020 | Target>= | 51.00% | 51.00% | 58.00% | 58.00% | 43.83% |
| **C2** | 43.83% | Data | 49.43% | 50.02% | 48.51% | 45.96% | 43.83% |

**Targets**

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

**FFY 2021 SPP/APR Data**

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

5,127

**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 | 111 | 2.16% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,013 | 19.71% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,576 | 30.66% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,728 | 33.62% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 712 | 13.85% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 | 3,304 | 4,428 | 74.22% | 74.32% | 74.62% | Met target | No Slippage |
| 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 | 2,440 | 5,140 | 47.49% | 47.59% | 47.47% | Did not meet target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 105 | 2.04% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 866 | 16.85% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,854 | 36.07% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,835 | 35.70% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 480 | 9.34% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 | 3,689 | 4,660 | 77.92% | 78.02% | 79.16% | Met target | No Slippage |
| 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 | 2,315 | 5,140 | 42.84% | 42.94% | 45.04% | Met target | No Slippage |

**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 | 124 | 2.41% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 968 | 18.83% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,852 | 36.03% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,705 | 33.17% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 491 | 9.55% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 | 3,557 | 4,649 | 76.94% | 77.04% | 76.51% | Did not meet target | No Slippage |
| 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 | 2,196 | 5,140 | 43.83% | 43.93% | 42.72% | Did not meet target | Slippage |

**Provide reasons for C2 slippage, if applicable**

Because South Carolina has strict eligibility criteria and delays may be more significant, it is less likely that a high percentage of children will leave the program at age expectations.   
The State also acknowledges that additional training on Indicator 3 and Child Outcomes Rating Process is needed. Based on the number of impossible combinations the State received on COS ratings, it is clear that some service coordinators may be confused about the rating process. The State works with local service coordinators to update the answers to A2, B2, and C2 if the combination is reported as impossible. This confusion is most likely a result of high turnover with service coordination providers.

**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 | 7,054 |
| 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. | 1,761 |

| **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.**

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)

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

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.

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

The State reported 5140 as the denominator in its calculation of the percent of infants and toddlers who were functioning within age expectations in each outcome area by the time they turned three years of age or exited the program. However, the State reported 5127 infants and toddlers with IFSPs were assessed.

## 3 - Required Actions

In the FFY 2022 SPP/APR submission, the State must explain any discrepancies between the FFY 2022 total number assessed and the FFY 2022 denominator in its calculation of the percent of infants and toddlers who were functioning within age expectations in each outcome area by the time they turned three years of age or exited the program.

# 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2020 | Target>= | 74.00% | 74.00% | 86.10% | 86.10% | 82.94% |
| A | 82.94% | Data | 63.21% | 65.07% | 63.19% | 65.91% | 82.94% |
| B | 2020 | Target>= | 72.00% | 72.00% | 86.10% | 86.10% | 89.76% |
| B | ###C04BBASEDATA### | Data | 61.02% | 60.63% | 64.69% | 65.28% | 89.76% |
| C | 2020 | Target>= | 75.00% | 75.00% | 86.10% | 86.10% | 89.24% |
| C | 89.24% | Data | 64.63% | 70.18% | 72.54% | 71.48% | 89.24% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 82.95% | 82.96% | 82.97% | 82.98% | 82.99% |
| Target B>= | 89.77% | 89.78% | 89.79% | 89.80% | 89.81% |
| Target C>= | 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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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 2021 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 9,305 |
| Number of respondent families participating in Part C | 1,463 |
| Survey Response Rate | 15.72% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 1,235 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 1,460 |
| 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 | 1,323 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 1,461 |
| 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 | 1,242 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 1,461 |

| **Measure** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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) | 82.94% | 82.95% | 84.59% | Met target | No Slippage |
| 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) | 89.76% | 89.77% | 90.55% | Met target | No Slippage |
| 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) | 89.24% | 89.25% | 85.01% | Did not meet target | Slippage |

**Provide reasons for part C slippage, if applicable**

The Early Childhood Outcomes Family Outcomes Survey-Revised (ECO FOS-R) has two sections of questions/items (A and B). For Indicator 4, only section B is included in the calculations. Although the State did show slippage for Indicator 4 based on the data from Section B, the State showed improvements in the data for Section A. Both sets of data provide insights into how families feel they can help their child develop and learn. Data from Section B equals 85.01% (as reported above). When incorporating data from both sections, 94.19% of families reported that they felt they were able to help their child develop and learn. See specific related items from the survey tool below.  
  
From the tool: Section A of the Family Outcomes Survey focuses on the ways in which you [the parent] support your child’s needs. Section B of the Family Outcomes Survey focuses on the helpfulness of early intervention.   
  
Section A: Outcome 3: Helping your child develop and learn  
2.10 - We are able to help our child get along with others.  
2.11 - We are able to help our child learn new skills.  
2.12 - We are able to help our child take care of his/her needs.  
2.13 - We are able to work on our child's goals during everyday routines.  
  
Section B: Helping your child develop and learn: How helpful has early intervention been in…  
3.12 - Giving you useful information about how to help your child get along with others?  
3.13 - Giving you useful information about how to help your child learn new skills?  
3.14- Giving you useful information about how to help your child take care of his/her needs?  
3.15 - Identifying things you do that help our child learn and grow?  
3.16 - Sharing ideas on how to include your child in daily activities?  
3.17 - Working with you to know when your child is making progress?  
  
The State also considers the effects of the pandemic on these young children. Lack of socialization and other experiences could have impacted slippage on this indicator. The State will remain engaged with research related to babies born during the pandemic and the impact it has had/will have on their development.

| **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? | NO |
| 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.**

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 2022, 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 has added a Spanish version of the electronic survey.  
  
Strategies to ensure future response data are representative:  
The State now sends quarterly snapshots to service coordinators listing who has responded, response rates, and responses by race/ethnicity. These snapshots include the percentage of eligible children by race/ethnicity, so service coordinators can monitor representativeness of respondents on a quarterly basis and follow-up as needed.   
Instruct service coordinators to follow-up with families who have not completed the survey, focusing on those who may be under-represented on the quarterly snapshot.  
Follow up should include the following: asking if the family received the survey, if they need a different format (another paper form, link to online survey, assistance from PTIC to complete verbally, etc.)

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Survey Response Rate | 11.98% | 15.72% |

**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 is in the process of meeting with stakeholders to determine the best time of year to send surveys and how long the survey window should remain open. This change, along with the postcards and education for families by service coordinators, should result in improved response rates. Follow-up outreach activities are being planned for families who have not responded to the survey within 14-30 days. Any changes made will not be implemented prior to July 1, 2023.  
  
Strategies for improved response rates:  
The State now sends quarterly snapshots to service coordinators listing who has responded, response rates, and responses by race/ethnicity.  
Instruct service coordinators to follow-up with families who have not completed the survey, specifically black/African American and Hispanic families.   
Follow up should include the following: asking if the family received the survey, if they need a different format (another paper form, link to online survey, assistance from PTIC to complete verbally, etc.)

**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.**

Survey responses were analyzed for potential non-response bias based on ethnicity, race, geographic location, and language spoken in the home. The average percent of non-response was found to be 5.33% across all categories. Using this average and a discrepancy criterion of +/- 3%, the State identified higher rates of non-response to survey items from families who identified as Hispanic (9.38%, 3.85% over sample average), and families who spoke Spanish in the home (10.67%, 5.14% over sample average).  
  
Ethnicity and Race  
Because surveys were sent based on child status (i.e., at first 6-month review of the IFSP and at exit) rather than sampling of demographics, the number of surveys sent vs. the number of survey responses was analyzed by ethnicity and race to determine if any patterns of non-response bias were present. Delimitations: Three groups (Asian, American Indian/Alaskan Native, and Native Hawaiian/Other Pacific Islander were considered outliers in this analysis as the small N size contributed to response rates of over 40%. Of the remaining ethnicity and race groups, an average response rate of 14.38% was used as a basis for comparison in determining if non-response bias was a factor.  
Families who identified as Hispanic or as Black/African American demonstrated response rates more than 3% below the modified average (9.69% and 10.89% respectively). The response rate for Hispanic families was 4.69% below the modified average, and for Black/African American families the response rate was 3.49% below the modified average. Families who identified as White or who reported two or more races responded at rate of 19.00%, or 4.62% higher than the modified average.  
  
Steps taken to reduce identified bias and promote response from a broad cross section of families:  
The survey is now available electronically in Spanish.   
The postcards used to explain the survey and provide the link and QR code for completion are now available in Spanish.  
Service Coordinators are having discussions (via a Spanish Interpreter when needed) with families about the survey. They explain the purpose of the survey, formats for completing the survey, and how BabyNet uses the results of the survey to make improvements to the program. Service Coordinators will monitor responses quarterly to ensure that these measures are helping to improve responses and lessen bias for those who speak Spanish and identify as Hispanic.

**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.**

Using a criterion of a +/- 3% discrepancy, analysis of FFY 2021 data yielded the following regarding representativeness of demographics:  
Ethnicity:  
Hispanic families represent 8.77% of families served by the State’s early intervention system. The rate of survey responses for this group was 6.33%, a difference of -2.44%. Non-Hispanic families represent 91.23% of families served the State’s early intervention system, and responded at a rate of 94.27% (+3.04%)  
  
Race (Non-Hispanic):  
Survey response analysis based on race indicate an over-response rate by families who identify as white relative to the population served by the state of 11.41%. Families who identify as Black or African American under-responded to the survey compared to the population served by the state at a rate of 11.02%. Survey response rates for all other racial groups relative to population served by the state ranged from 0.14% to 2.14%.  
  
Geographic Location:  
Using the criterion described above, no discrepancies were noted between families served by the state’s Part C system and survey respondents based on geographic location.

**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).**

The state used a discrepancy criterion of +/- 3% comparing the families served by the state’s early intervention system in the categories of ethnicity, race, and geographic location to families responding to the Family Outcomes survey.

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

With ongoing implementation of the SSIP related to Indicator 4C, FFY 2021 represents the first reporting period the State has had responses from families completing both the 6-month family outcomes survey and the exit family outcomes survey. With an n size of only 56, analysis was limited to comparison of the family’s responses to each item across surveys to see if there was any significant variability between administrations by item and by outcome. The item-by-item analysis between administrations showed that for an average of 19 families (r = 7 to 25), ratings for 13 of the 17 survey questions fell between the 6 months survey and the exit survey; for an average of 36 families there was no change between surveys.  
  
An examination of change between survey administration by outcome found minimal change between survey administration for Indicators 4A (1.79% provided a lower rating at exit than at entry) and 4B (1.79% provided a higher rating at exit than at entry). For outcome 4C, 8.93% of families provided a lower rating at exit than had been provided for the 6-month survey.

## 4 - Prior FFY 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.

**Response to actions required in FFY 2020 SPP/APR**

## 4 - OSEP Response

## 4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 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.

# 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 0.95% | 0.98% | 0.99% | 0.99% | 1.00% |
| Data | 0.95% | 0.89% | 0.98% | 1.22% | 1.21% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 1 with IFSPs | 750 |
| 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, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 1 | 54,309 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 750 | 54,309 | 1.21% | 1.05% | 1.38% | Met target | No Slippage |

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

To increase families' knowledge related to the BabyNet program and issues related to early intervention, South Carolina's Parent Training and Information Center (PTIC), Family Connection of South Carolina (FCSC), developed five social media campaigns specifically addressing: 1) the BabyNet program; 2) child find; 3) safe sleep; 4) developmental milestones; and 5) info on Medicaid/TEFRA and Waivers. These informational campaigns were released individually during the year on FCSC’s Facebook and Instagram sites reaching a total of 31,698 people across SC.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 2.49% | 2.49% | 2.50% | 2.50% | 3.71% |
| Data | 2.49% | 2.82% | 3.18% | 3.68% | 3.82% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 3 with IFSPs | 7,848 |
| 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, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 3 | 166,528 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 7,848 | 166,528 | 3.82% | 3.76% | 4.71% | Met target | No Slippage |

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

To increase families' knowledge related to the BabyNet program and issues related to early intervention, South Carolina's Parent Training and Information Center (PTIC), Family Connection of South Carolina (FCSC), developed five social media campaigns specifically addressing: 1) the BabyNet program; 2) child find; 3) safe sleep; 4) developmental milestones; and 5) info on Medicaid/TEFRA and Waivers. These informational campaigns were released individually during the year on FCSC’s Facebook and Instagram sites reaching a total of 31,698 people across SC.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 83.46% | 83.25% | 67.90% | 79.23% | 95.15% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 292 | 368 | 95.15% | 100% | 97.01% | 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.**

65

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

There were 11 late initial IFSPs identified. Of the 11, only one was attributed to the intake coordinator and 10 were attributed to the ongoing service coordinator. In SC, the intake coordinator has 25 days to complete the evaluation for eligibility and transfer the child to an ongoing service coordinator to complete the 45-day process. The ongoing service coordinator has 20 days to complete the child and family assessment and facilitate the initial IFSP.  
  
Statewide staffing shortages have had an impact on service provision. The state office has had a difficult time hiring intake coordinators to replace those who have resigned or retired from their positions. Higher caseloads for ongoing services coordinators have made it more difficult to make referrals for services in a timely manner. Other staff have left the field completely or have decided to provide services for programs that allow for more flexibilities with telehealth.

**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, 2021-December 31, 2021

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

Cumulative Statewide Eligible Population (All infants and toddlers who had an IFSP during FFY 2021):  
White: 52.8%  
Black/African American: 28.7%  
2 or More: 7.4%  
Hispanic 9.15%  
Native Hawaiian-Other Pacific Islander: .14%  
American Indian-Alaskan Native: .28%  
Asian: 1.4%  
  
Sample Population:  
White: 51.30%  
Black/AA: 29%  
2 or More: 7.60%  
Hispanic 8.90%  
NH-OPI: 0%  
AI-AN: .54%  
Asian: 2.40%

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

Prior to FFY 2021, the State reported data for Indicator 7 differently from general supervision (findings/noncompliance). Previously, the State reported data for Indicator 7 based on initial IFSPs for all children in the state for the entire fiscal year. This was problematic because the State had a difficult time verifying late reasons for all children. Using a sample allows State staff more time to review each identified late IFSP and ensure that late reasons were attributed accurately.  
  
For general supervision, the State used a 10% sample of children by district who received initial IFSPs from July 1 to December 31. This method allows state office staff the opportunity to work with service coordinators and providers to determine if any late IFSPs were due to exceptional family circumstances. After discussing the two methods with SC's OSEP contact, the State decided to use the same sampling methodology for the APR and General Supervision (findings/noncompliance).

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

As per the Correction of Non-compliance section in South Carolina's full General Supervision Plan, the state completed a subsequent data pull in January of 2022 to assist with verification of correction of non-compliance. This subsequent pull consisted of a 10% data sample by district for the month of November 2021. The State reviewed the sample of all children whose IFSPs were due in the month of November 2021. Sample data was only obtained for those local programs that were assigned a finding for Indicator 7 in October of 2021 (FFY 2020 data). Through this data and electronic record reviews, the State determined that all three of the districts corrected noncompliance by ensuring previously identified late Initial IFSPs were eventually completed AND there were not any newly identified late Initial IFSPs. This allowed all seven districts to go into FFY 2021 with no findings for Indicator 7. There were no Corrective Action Plans required for indicator 7 for this year.

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

State office staff reviewed each late initial IFSP to determine if they eventually occurred (though late) and reviewed a 10% sample (by district) of data from the month of November 2021 to determine if all initial IFSPs due that month were timely.   
  
Horry- 1 late Initial IFSP = 1 finding -97.18% Timely --Cleared with subsequent data pull  
Richland- 5 late Initial IFSPs = 1 finding -85.92% Timely --Cleared with subsequent data pull  
Spartanburg- 2 late Initial IFSPs = 1 finding -97.43% Timely --Cleared with subsequent data pull  
  
Root Causes:   
Staffing shortages for intake and ongoing service coordinators.   
  
Action Steps:  
BabyNet state office is reviewing CSPD and staffing requirements to ensure highly qualified service coordinators are hired, while also making sure the requirements are not unintentionally preventing certain professionals from being hired. Regional Coordinators have reviewed Initial IFSP related requirements with intake and ongoing service coordinators at local early intervention system meetings to ensure they are following procedures and meeting timelines. BabyNet intake coordinators and central referral staff have received job aids and extensive training to ensure related requirements and timelines are met. Intake management has developed internal workflow tools that track every referred child to ensure eligibility is determined in a timely manner and the child is transferred for IFSP development and ongoing service coordination as quickly as possible.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |

## 7 - Prior FFY 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.

**Response to actions required in FFY 2020 SPP/APR**

Included in Indicator 7 Data section.

## 7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2021- June 30, 2022). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

## 7 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# 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 2021 SPP/APR, the data for FFY 2020), 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** |
| --- | --- |
| 2021 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,401 | 6,401 | 100.00% | 100% | 100.00% | N/A | N/A |

**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).**

07/01/2021 -06/30/2022

**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 2021 excludes 254 children whose initial IFSP was developed within 90 days of the child's third birthday.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
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## 8A - Prior FFY Required Actions

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

**Response to actions required in FFY 2020 SPP/APR**

## 8A - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2021, and OSEP accepts that revision.

## 8A - Required Actions

# 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 2021 SPP/APR, the data for FFY 2020), 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** |
| --- | --- |
| 2021 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,401 | 6,401 | 100.00% | 100% | 100.00% | N/A | N/A |

**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.  
  
The number of children reported for FFY 2021 excludes 254 children whose initial IFSP was developed within 90 days of the child's third birthday.

**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).**

07/01/2021 - 06/30/2022

**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 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2021, and OSEP accepts that revision.

## 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 2021 SPP/APR, the data for FFY 2020), 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 85.97% | 90.50% | 91.69% | 88.91% | 90.44% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,269 | 5,092 | 90.44% | 100% | 92.74% | 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.**

1,178

**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.**

361

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

Based on a review of the data, the majority of the late conferences were attributed the service coordinator. For the first time, the State faced a shortage of service coordinators. The staffing shortages impacted their ability to complete transition conferences in a timely manner. As of December 2022, the shortages seem to be resolving. The State also determined there were some conferences that were late due to the referral being late, but not late enough to be considered a "late referral" and excluded from the requirements. This situation occurs when the transition conference is due prior to the initial IFSP. The State has requested that the data system vendor add a notification to the system letting intake service coordinators know if the transition conference is due prior to the initial IFSP due date.

**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, 2021-June 30, 2022

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

For Indicators 1 and 7, the State used a representative sample to report APR data. For Indicator 8C, the State decided to continue using all required exit data for FFY 2021. The State plans to use a representative 10% sample for Indicator 8C for FFY 2022.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **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 | 3 | 0 | 4 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

In January 2022, the State reviewed a 10% sample (subsequent data) of all children who exited in the month of November 2021. Sample data was only obtained for those local programs that were assigned a finding for Indicator 8C in October of 2021. Through this data and electronic record reviews, the State determined that three of the districts corrected noncompliance by ensuring previously identified late transition conferences were eventually completed AND there were not any newly identified late transition conferences. Four of the seven districts were not able to clear their findings with corrected subsequent data. These four districts went into FFY 2021 with a continued finding.

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

State office staff reviewed each record identified as having a late conference to determine if the conference eventually occurred and reviewed a 10% sample (by district) of data from the month of November 2021 to determine if all conferences were timely.  
  
Indicator 8C  
Anderson- 2 children with late transition conferences = 1 finding -91%--Cleared with subsequent data pull  
Charleston- 1 child with a late transition conference = 1 finding--94%   
Colleton- 1 child with a late transition conference = 1 finding -92%--Cleared with subsequent data pull  
Horry- 2 children with late transition conferences = 1 finding -92%--Cleared with subsequent data pull  
Richland- 6 children with late transition conferences = 1 finding-84%   
Spartanburg- 5 children with late transition conferences = 1 finding--88%   
York- 1 child with a late transition conference = 1 finding-89%  
  
Subsequent data pull: January 2022  
  
Root Causes:   
Children turned 33 months shortly after eligibility was determined but prior to the initial IFSP and start of services and steps hadn’t been put in place to make sure intake coordinators were conducting those conferences.   
Difficulty maintaining communication with LEA representatives in large districts.  
Service Coordinators not understanding their responsibilities.  
Difficultly training and keeping service coordinators   
  
Action Steps:  
During monthly staff meetings and local early intervention system meetings, Regional Coordinators and supervisors will review key transition requirements with service coordinators. They will remind staff that the transition conference must occur timely, even if the invited LEA does not show. BabyNet State Office has begun sending upcoming transition reports to all service coordination providers reminding them of conferences that are due the following month. Regional Coordinators will continue to invite LEA representatives to local early intervention system (LEIS) meetings and work to ensure they have contact information for the most appropriate representatives. Regional Coordinators also review transition data with participants at LEIS meetings. The State is in the process of revising state and district level transition reports in order to make sure LEAs and the SEA are receiving accurate and timely information for children over the age of two.

**FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Four of the seven districts did not correct findings within 12 months and are required to complete a corrective action plan with the state. Subsequent data will be pulled again in January 2023 to determine if findings will be considered corrected. The results of the corrective action plans will be reported in the FFY 2022 APR.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 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.

**Response to actions required in FFY 2020 SPP/APR**

Included in the Indicator 8C data section.

## 8C - OSEP Response

## 8C - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining four uncorrected findings of noncompliance identified in FFY 2020 were corrected.  
When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2021 and each EIS program or provider with remaining noncompliance identified in FFY 2020: (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 2022 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 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# 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

## 9 - Required Actions

OSEP notes that this indicator is not applicable.

# 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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 2021. 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 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the five years from FFY 2021 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

***Updated Data:*** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 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 2021 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 2021 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., February 1, 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

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 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) 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** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 89.34% | 89.44% | 89.54% | 89.64% | 89.74% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| # of Families who said Part C services helped them know how to help their child develop and learn. | Total # of Families who responded to the survey | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 1,378 | 1,463 | 89.24% | 89.34% | 94.19% | Met target | No Slippage |

**Provide the data source for the FFY 2021 data.**

Data source for FFY 2021 data for Indicator 11 are the responses to the Family Outcomes Survey (ECO FOS-R), provided to the family following their first 6-month IFSP review and 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 develop and learn  
-Denominator: Total # of Families who responded to the survey  
  
The ECO FOS-R has two sections of questions/items. For Indicator 11, the state considered the responses in both sections to determine if families thought they were able to help their child develop and learn. Families who responded with an average rating of greater than 3.99 on the items below from Section A and/or Section B are considered to have reported they were able to help their child develop and learn (numerator). The difference in the data for Indicator 11 and Indicator 4 is that Indicator 4 only uses responses from Section B of the survey.  
  
From the tool: Section A of the Family Outcomes Survey focuses on the ways in which you [the parent] support your child’s needs. Section B of the Family Outcomes Survey focuses on the helpfulness of early intervention.   
  
Section A: Outcome 3: Helping your child develop and learn  
2.10 - We are able to help our child get along with others.  
2.11 - We are able to help our child learn new skills.  
2.12 - We are able to help our child take care of his/her needs.  
2.13 - We are able to work on our child's goals during everyday routines.  
  
Section B: Helping your child develop and learn: How helpful has early intervention been in…  
3.12 - Giving you useful information about how to help your child get along with others?  
3.13 - Giving you useful information about how to help your child learn new skills?  
3.14- Giving you useful information about how to help your child take care of his/her needs?  
3.15 - Identifying things you do that help our child learn and grow?  
3.16 - Sharing ideas on how to include your child in daily activities?  
3.17 - Working with you to know when your child is making progress?

**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). Prior to FFY 2020, 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 the 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 following include the steps to determine the Indicator 11 data:  
-Review Total Response data (denominator)  
-Remove duplicate children  
-Average each item response for 2.10-2.13 from section A of the survey.  
-Average each item response for 3.12-3.17 from section B of the survey.  
-Filter the item responses to only include those where either section A or section B has an average rating of 3.99 or higher. (numerator)  
-Divide the number of responses with a rating of 3.99 or higher on either section A or section B by the total number of responses and multiply by 100.  
FFY 2021 Data = 94.19%  
  
The following include the steps to determine data related specifically to the State-identified Measurable Result (SiMR):  
-Review Response data  
-Remove duplicate children  
-Average each item response for 2.10-2.13 from section A of the survey.  
-Average each item response for 3.12-3.17 from section B of the survey.  
-Filter the item responses to only include those where the child had received less than or equal to 12 months of services. (denominator)  
-Filter the item responses to only include those where either section A or section B has an average rating of 3.99 or higher. (numerator)  
-Divide the number of responses with a rating of 3.99 or higher on either section A or section B by the total number of responses and multiply by 100.   
FFY 2021 SiMR Data= 93.4%  
  
SiMR: Families who have received BabyNet services for 6-12 months will be able to more effectively help their child develop and learn.

**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.**

The additional data collected by the State are the Routines-based Interview (RBI) boot camp Evaluations and Discussions, RBI Implementation Checklists, and Family Outcomes Measurement System (FOMS) Quarterly Snapshots. The evaluations and discussions are used to determine the needs and concerns of the Service Coordinators who will be using the RBI with families. In addition, it provides the necessary information to determine if revisions are needed for the training.  
  
Quarterly Snapshots are reports compiled of data, demographics, and comments/feedback from the family surveys and sent to each service coordination agency. The data provided in the snapshots assists both Service Coordination agencies and State staff in determining how many surveys were sent and received, which families responded, and what families are saying about the services they received. The State is able to track representativeness and non-response bias based on the demographics sent in each quarterly report.

**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

**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.

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

NO

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

The State had remarkable infrastructure improvement in FFY 2021. A continuation of statewide implementation of the Family Outcomes Measurement System (FOMS) and the family assessment process expanded across additional regions of the state. The activities included in each improvement strategy are included below:  
  
1. Statewide Implementation of the revised Family Outcomes Measurement System (FOMS)  
On July 1, 2021, Regions 1, 2, 3 and 4 of the state completed their FOMS training, and statewide implementation of the family survey began. Each Service Coordination agency provided a postcard with a QR code to each family at the first 6-month IFSP and at exit. The postcard explains the Family Outcomes and importance of the survey. The family has a variety of methods to choose from to complete the survey which are online, paper, or by phone.  
  
2. Spanish Translation of Online Survey  
During the Stakeholder Survey, Service Coordinators expressed the need for a Spanish translation of the online survey. This version of the survey was available in April 2021 and all Service Coordination agencies were made aware through the Team for Early Childhood Solutions (TECS) Listserv in May 2021. Prior to availability of the online Spanish survey, Spanish-speaking families were able to contact the PTIC for assistance. This is still an option for families who need additional assistance.  
  
3. Participant Code Update  
Once the Research Analyst with TECS began inputting the 6-month and exit participant codes into the data system, it became clear that the activity was too time-consuming. The SLT and Regional Implementation Team (RIT) determined the Service Coordination Agency Owners and/or Supervisors would receive a monthly list of participant codes for all upcoming first 6-month IFSP reviews, and the exit participant codes would continue to be entered in the data system by TECS staff. This would allow more time for monitoring activities to take place.  
  
4. PDF Postcard Created  
Since the Stakeholder Survey determined a need for follow-through with families completing the survey, a PDF version of the postcard was created. This allows Service Coordinators the opportunity to text or email the postcard as a follow-up when families have not completed the survey. A hardcopy is still required for the initial dissemination. Additional follow-up activities are being planned with stakeholders to begin in July 2023.  
  
5. Quarterly Snapshots  
Quarterly Snapshots are reports compiled of data, demographics, and comments from the Family Surveys which are sent to each Service Coordination agency. The data provided in the snapshots assists both Service Coordination agencies and State staff in determining how many surveys were sent and received, which families responded and what families are saying about the services they receive. This feedback provides service coordination agencies the information they need to make adjustments to internal procedures that will improve their results without waiting to the end of the fiscal year. The State is also able to track representativeness and non-response bias based on the demographics sent in each quarterly report.  
  
6. Routines-based Interview (RBI) Resource  
Each region was offered a Question & Answer session at the end of their RBI training. During this session, a thorough discussion was held between service coordination agency trainers, TECS Director, RIT and SLT to provide clarity on the family assessment and its structure. Details of the stakeholder feedback can be found in Section C: Stakeholder Engagement.

**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 and the Family Survey statewide  
-Implementation of RBI in Regions 2, 1 and 3 (in that order).   
  
The state fully implemented the new family survey on July 1, 2020, and the fully revised FOMS on July 1, 2021. FFY 2021 was the first year the state received a complete set of data from the new process, so additional data will be needed for comparison prior to making any changes to the process. The State feels it is necessary to receive the additional data before determining if a new dissemination date/range is necessary, the frequency of surveys, or the need for updates to the survey follow-up process.  
  
A discussion group, including the State Implementation Team (SIT) and RIT analyzed the family survey and family assessment processes. SIT and RIT felt it was necessary to create another workgroup so tasks could be assigned to a larger group. This decision resulted in the creation of the SSIP Collaboration Workgroup. The workgroup meets once a month to review the outcomes for improvement strategies. Each member is assigned an action item and is expected to report on the results of completed work at the next monthly meeting. The SSIP Workgroup plans to create and facilitate additional stakeholder groups to identify the best steps moving forward with the family survey.  
  
The RBI boot camp training expanded in Regions 1 and 2 during this reporting year.   
  
Region 2 participated in RBI boot camp in September 2021. Since the boot camp is a train-the-trainer model, each service coordination agency assigns 1-2 trainers (depending on agency size) from their agency for participation. Region 2 had a total of 24 participants in attendance. Of those 24, 18 have become state-certified. The participants who are certified have begun training their company's service coordinators. Service coordinators must pass the "RBI Implementation Checklist" with a score of at least 80%.   
  
To account for newly added staff or those who missed the initial training in their region, an RBI refresher course was made available in the South Carolina Early Intervention Learning System (SCEILS).  
  
During RBI boot camp, participants are assigned to breakout rooms to practice assigned roles as parents, interviewers and feedback providers. Prior to scheduling the boot camp for Region 1, a discussion was held regarding the large number of participants who would be in attendance. RBI feedback surveys indicated that Service Coordinators felt the impact of practicing the RBI with other participants was beneficial and helped them become more comfortable with the process. This feedback helped guide the decision to split the Region 1 participants across two weeks of boot camp so that breakout rooms could remain small. In March and April 2021, Region 1 participated in RBI boot camp. There were 44 participants in Region 1 and 29 have since met qualifications to become state-certified trainers. The participants who are certified have begun training their company's service coordinators. Service coordinators must pass the "RBI Implementation Checklist" with a score of at least 80%.   
  
Region 3 RBI boot camp was scheduled for October 2022 and will be included in the next reporting period.   
  
2. Intermediate goals – 2-4 years  
-Survey response rates will increase statewide.   
 --The response rate increased from FFY 2020 to FFY 2021.  
-Families are better able to identify functional IFSP outcomes based upon their resources, priorities and concerns.  
 --State staff will begin reviewing IFSP outcomes during FFY 2022-FFY 2023 after all regions of the State have fully implemented use of the tool.  
-Implementation sites, training, and implementation of Evidence-based practices (scale up regions)  
 --The State is on track for all service coordinators to be using the RBI by July 1, 2023.

**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.**

The State has planned various activities for each infrastructure improvement strategy to be implemented in the next fiscal year. The State will continue to work on the family assessment and family outcomes measurement system, while focusing on system and practice change through collaboration, knowledge and family engagement.  
  
Collaboration among newly identified stakeholders will provide the State the opportunity to work through any concerns and needs related to system changes and evidence-based practices that may arise. Stakeholder participation and data reviews will determine the State’s next steps related to training, communication and revisions. A more trusting relationship will be built with the State as stakeholders are able to provide a level of influence on decisions. The small stakeholder groups will include:  
  
-Families whose children are receiving Part C services in SC  
-Service Coordinators  
-Service Providers  
-Other Local Early Intervention System Stakeholders  
  
Meaningful family engagement is crucial in all aspects of early intervention. Since families and caregivers know their children best, their input is invaluable in the development of IFSP outcomes and making system decisions. As SIT and RIT continued to monitor the implementation of the RBI, the need for trainings, resources, and tools were identified. In order to provide this knowledge to families, service coordinators, and SIT/RIT will provide the following:  
  
1. Provide training on the "Seven Key Principles: Looks Like/Doesn’t Look Like."  
Workgroup on Principles and Practices in Natural Environments, OSEP TA Community of Practice: Part C Settings. (2008, March). Seven key principles: Looks like / doesn’t look like. Retrieved from http://www.ectacenter.org/~pdfs/topics/families/Principles\_LooksLike\_DoesntLookLike3\_11\_08.pdf  
  
2. Provide training on "Engaging Families and Creating Trusting Partnerships to Improve Child and Family Outcomes Web Series."  
  
3. Develop a process and provide a report to service coordination agencies regarding non-respondents of the Family Survey.  
  
4. Develop and provide resources for writing Functional IFSP Outcomes (in addition to the outcome writing activities included in the RBI trainings).  
  
5. Provide RBI Resources on Using the RBI with Interpreters.  
  
6. Embed RBI Training and Implementation requirements in future Comprehensive System of Personnel Development (CSPD) revisions.

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

Routines-based Interview

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

The Routines-based Interview (RBI) is an evidence-based assessment tool created by Dr. Robin McWilliam. It is a semi-structured interview intended to create an established relationship between the service provider and family upon the first meeting.

**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.**

The purpose of the RBI is to gather a rich description of how the child and family function in their everyday routines. This thorough explanation provides an exhaustive account of what is challenging or working well for the child and family, while establishing an instant relationship between the family and service coordinator (Interviewer). Since an ecomap is also developed as part of the RBI, the service coordinator has a good understanding of supports that are available to the family or if there is a need to be connected with community resources. Service coordinators will complete the RBI prior to the Initial IFSP and each annual IFSP. This allows the service coordinator and family to start building a relationship from the beginning of the child’s journey in early intervention. As a result, the IFSP team develops outcomes within the context of the daily activities that are a priority and most relevant to the family as well as assisting with any concerns.   
  
Historically, many service coordinators across the State have created IFSP outcomes that were mostly domain specific. Functional IFSP goal/outcomes writing is included as part of RBI training. This approach to goal writing focuses on identifying the priorities and concerns relevant to the family during everyday life experiences, instead of focusing on items on a child assessment that had not been met. Since research shows that children learn best when they participate in natural learning opportunities and are interested and engaged in activities involving familiar caregivers, the State believes the RBI will lead to writing higher quality functional IFSP outcomes. This, in turn, would give families the opportunity to practice new skills during their normal routines.   
  
With the RBI implemented statewide, service coordinators will improve practices which will result in an improvement of the outcomes that are made for families and children. If families are able to work on outcomes as if they are just another part of their day, it is more likely they will see progress, will gain an understanding of when to seek additional support, and will be able to help their child develop and learn.

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

The State used the Service Coordination Agency Quarterly Snapshots to monitor fidelity of implementation and to assess practice change. The Snapshots provided each service coordination agency a summary of the family survey results for designated months of the year (each quarter). The results included the total number of surveys that were sent and received statewide, during the quarterly date range. It also included the number of responses received by families who were served by the specific service coordination agency. During the March 2022 SSIP Workgroup meeting, the group determined the first quarterly report would include results from July 2021 – March 2022 so that service coordination agencies could be provided data that began at the start of the fiscal year. The data presented in each Quarterly Snapshot report was broken down as follows:  
• July 2021 – March 2022  
• April 2022 – June 2022  
For the next reporting year, the state will provide the Snapshots each quarter.  
  
The Snapshots were used to monitor fidelity by providing a visual representation of how families felt about the BabyNet services they were receiving. SLT, SIT, RIT and the SSIP Collaboration Workgroup were able to analyze and discuss a condensed version of the new process by service coordination agency. Since the family surveys correspond to a participant code to track the respondents, further investigation through record reviews was available. SIT and RIT were able to compare the service logs, determine representativeness by seeing the demographics of respondents, and had an opportunity to review the comments and feedback from families. In addition, the results gave the State enough data to develop future stakeholder discussions as well as determine areas of training and technical assistance needs for the service coordination agencies.  
  
Routines-based interview trainees had to submit videos for review and state-certification to the Team for Early Childhood Solutions. Videos were reviewed, and trainers provided extensive feedback to each interviewer. Trainees had to pass the "RBI Implementation Checklist" with a score of at least 80%. After trainees passed and received state certification to train their staff, they developed a training plan that was approved by TECS. All agency training plans had to include that service coordinators must score 80% or higher on the "RBI Implementation Checklist" before receiving certification and again for annual/bi-annual recertification.  
  
The SCEILS learning management system also houses an online space (course) where trainees from each region can communicate with each other, share resources, and access all training materials.

**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.**

During FFY 2021, there were 24 participants who attended RBI bootcamp for Region 2. Of those 24, there are 18 certified RBI trainers. In Region 1, there were 44 partipants. Of the 44 participants, there are 29 certified RBI trainers. The total number of trainees who passed their video submission and are now RBI Certified Trainers for their SC Agencies is 47. Participants have been doing well with their video submissions and have shown a clear understanding of the evidence-based practice.

**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 steps the State plans to continue with RBI implementation next year are as follows:  
1. Region 3 RBI Bootcamp Save the Date dissemination – July 2022  
2. Region 3 RBI Bootcamp – October 2022  
3. TECS RBI Community of Practice – 2023  
 -Quarterly trainings including breaking down each indicator on the RBI checklist, using various practice techniques.  
4. TECS will provide an annual RBI bootcamp for newly hired staff.  
5. Follow-up trainings to be implemented each year to focus on the quality and fidelity of the RBI.  
6. Full implementation of RBI - Spring 2023  
7. Provide monthly data to the SSIP Collaboration Workgroup regarding RBI bootcamp attendees, RBI Trainer certification, SC Agency RBI certification

**Does the State intend to continue implementing the SSIP without modifications? (yes/no)**

YES

**If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.**

Because the entire state had not fully implemented the use of the RBI by the end of FFY 2021, the plan should not be changed. The State would like to see complete data related to the coherent improvement strategies before making changes to the SSIP.

**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 with providers.   
  
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.   
  
South Carolina solicited public input in a number of ways in FFY 2021. BabyNet State Office conducted four public hearings: 7/6/2021, 7/7/2021, 10/18/2021, and 10/20, 2021. Prior to each public hearing, the proposed policy and procedure changes were posted to the BabyNet website for at least 60 days and included at least 30 days for receipt of comments. 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 2021.   
  
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 the following: 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.**

The State had many groups of stakeholders to provide the continued work of the SSIP. There was a variety of project-focused stakeholders, the ICC, internal workgroups and newly created stakeholder groups. Each of these groups met at various times, depending on the nature of the workgroup and the feedback needed.   
   
The Stakeholder Survey completed on the process of the family survey disclosed that service coordinators were concerned with follow-through from families in completing surveys. To monitor the responses received and to develop a plan to follow up with families who had not responded, the SSIP Collaboration Workgroup was established. The team includes staff from the Team for Early Childhood Solutions (TECS) as well as BabyNet State Office staff to include the Data Manager, Regional Coordinator and Quality Assurance Coordinator. This workgroup is responsible for the monitoring and decision-making of the FOMS, including the family survey and evidence-based practices. In addition, this workgroup determines when focus groups are needed to gain additional stakeholder feedback.   
  
The workgroup brainstormed ideas to create real-time monitoring of progress towards the SiMR and to eventually monitor fidelity of the practice. Customized Local Reports referred to as Quarterly Snapshots were developed to provide each agency with strengths and weaknesses from family responses on the surveys. The Snapshots include when the survey was completed, the results of each question from sections A and B and the most frequent response, the demographics of families who were sent a survey and those who completed it, and comments from the families. As agencies continue to receive the Snapshots, the State will begin to see what type of training is needed and if technical support should be provided.   
  
After analyzing the data from the Snapshots, a Stakeholder group of agencies who had received a 30% response rate were contacted by the BabyNet Data Manager. The phone call was made to determine what they were doing to engage families and how they were receiving responses. Most agencies reported they were following the instructions for the new process which was provided to them during the initial training. These instructions included hand-delivering the postcards, explaining the family outcomes process, purpose of the survey, and available methods for completion and allowing the family to ask questions. After receiving these responses, a reminder of survey dissemination was announced at the Local Early Intervention Systems (LEIS) meetings by the Regional Coordinators and included in a Memorandum sent through the TECS Listserv.   
  
Some of the feedback from families reported on the Quarterly Snapshots included:  
  
“My EI is wonderful about providing information that I need to help my child improve her developmental milestones.”  
  
“We feel blessed to have our EI and speech therapist. Not only did they work well with our child, we feel they unlocked the initial brrier that was holding him back from speaking.”  
  
“Some therapists are fast and very helpful, but others take long and I don’t understand so much delay.”  
  
Another stakeholder group included the trainers who participated in the Train-the-Trainer model of RBI Boot camp. For full implementation of the RBI, the State had planned for RBI Boot camp to be held in the 4 regions of the state. Each SC Agency, per region, assigned a trainer to participate in one of the boot camps. Trainers are responsible for training their own staff after completing the full week of boot camp and passing the state-certification process, which includes receiving a passing score from a certified RBI trainer on their demonstration RBI. During each boot camp, trainers were expected to ask questions, provide feedback and gain the support needed to carry out the training. As a result of the feedback session, the RBI Question and Answer document was created. As the State continues to scale-up with implementation of the RBI in other regions, the document will be updated and shared.

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

YES

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

The group of service coordinators who completed the Stakeholder Survey were concerned with follow-through from families in completing the family survey. The SSIP Workgroup was created and Quarterly Snapshots were developed to get an idea of the families who were or were not responding. These Snapshots also provided insight on the strengths and weaknesses of local service coordination agencies from a family/caregiver point of view. The State plans to further use the data received from the Snapshots to provide training, technical assistance and additional planning for family follow-up. The State also provided the postcard in an electronic form so service coordinators could resend the information to families by email or text.  
  
The RBI Trainer stakeholder group expressed a concern about reimbursement for time spent practicing the RBI for their submission video. The SLT and RIT discussed this issue and determined service coordinators could practice the RBI as many times as necessary but would only be reimbursed for two RBIs prior to certification. This clarification was provided to the group as well as included in the RBI Frequently Asked Questions document.   
  
The Local Early Intervention System (LEIS) stakeholder group brought up concerns regarding the need of additional training on the RBI. Once the RIT and SLT held a discussion about this with the TECS Director, an RBI refresher training was conducted and uploaded to the SCEILS learning management system. This training is made available for all service coordination agencies.

**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 State has planned various activities to be implemented in the next fiscal year. As the State continues to move towards system and practice change, the focus will continue in collaboration, knowledge and family engagement. Collaboration among newly developed stakeholders will provide the State the opportunity to work through the concerns and needs of system changes and evidence-based practices. Stakeholder participation in the review and use of data will determine the State’s next steps in terms of training, communication and revisions. A more trusting relationship will be built among stakeholders and the State since they will provide a level of influence on decisions. The small stakeholder groups will include:  
-Family Stakeholders  
-Service Coordinator Stakeholders  
-Service Provider Stakeholders  
-Local Early Intervention System Stakeholders  
  
Meaningful family engagement is crucial in all aspects of early intervention. Since families and caregivers know their children best, their input is valuable in the development of IFSP outcomes and making system decisions. As SIT and RIT continued to monitor the implementation of the RBI, the need for trainings, resources, and tools were identified. In order to provide this knowledge to families, service coordinators, and SIT/RIT will provide the following:  
  
1. Training: Seven Key Principles: Looks Like/Doesn’t Look Like   
Workgroup on Principles and Practices in Natural Environments, OSEP TA Community of Practice: Part C Settings. (2008, March). Seven key principles: Looks like / doesn’t look like. Retrieved from http://www.ectacenter.org/~pdfs/topics/families/Principles\_LooksLike\_DoesntLookLike3\_11\_08.pdf  
  
2. Training: Engaging Families and Creating Trusting Partnerships to Improve Child and Family Outcomes Web Series  
  
3. Develop a process and provide a report to service coordination agencies non-respondents of the Family Survey.  
  
4. Develop and provide resources for writing Functional IFSP Outcomes.  
  
5. RBI Resources on Using the RBI with Interpreters  
  
6. Embed RBI Training and Implementation requirements in future Comprehensive System of Personnel Development (CSPD) revisions.

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

Survey Snapshots:  
The Team for Early Childhood Solutions will be providing preliminary survey results to service coordination agencies and the State throughout FFY 2022.  
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 exit from the BabyNet program.   
-The State will continue to monitor the effectiveness and efficiency of the new FOMS and make changes as needed and implement by 7/1/2023. This includes training service coordinators on any modifications.  
  
RBI Training:  
-Region 3 boot camp: Fall 2022  
-TECS provided and will continue to provide annual RBI reviews and additional boot camps, based on the needs of service coordination agencies. The State will review evaluation data from all TECS RBI trainings.  
-Agencies are required to implement their own fidelity checks/reviews with service coordinators on an annual basis. Records of these reviews must be made available to the State upon request.  
-All service coordinators, statewide, should be trained and implementing the RBI by July 1, 2023.  
  
Improvements in the survey process and RBI implementation (including better IFSP Outcomes), are expected to help providers understand how families need assistance helping their young children develop and learn. In turn, the State expects the data for Indicators 11 and 4C to continue to improve. The State specifically monitors Indicator 11 data to determine how early in the Part C process families feel they can help their child develop and learn. The State wants families to gain this knowledge and confidence early in their BabyNet experience. The data for all survey respondents (94.19%) and those whose children have received less than 12 months of services (93.4%) is very similar. The State considers this data a positive outcome related to SSIP work.

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

The SLT has determined that two points in time for gathering family outcomes data may not be necessary. The SSIP Workgroup plans to develop family and service coordinator focus groups to gather feedback and suggestions on when and how often surveys should be disseminated in the future. The Workgroup will make a final decision on the distribution of the survey after additional stakeholder feedback is received.

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

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

## 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 Coordinator

**Email:**

Jennifer.Buster@scdhhs.gov

**Phone:**

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**Submitted on:**

04/24/23 3:12:55 PM

# Determination Enclosures

## RDA Matrix

**South Carolina**

2023 Part C Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[1]](#footnote-2)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 83.93% | Meets Requirements |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 8 | 6 | 75.00% |
| **Compliance** | 14 | 13 | 92.86% |

**2023 Part C Results Matrix**

**I. Data Quality**

**(a) Data Completeness: The percent of children included in your State’s 2021 Outcomes Data (Indicator C3)**

|  |  |
| --- | --- |
| Number of Children Reported in Indicator C3 (i.e., outcome data) | 5,127 |
| Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data) | 7,054 |
| Percentage of Children Exiting who are Included in Outcome Data (%) | 72.68 |
| **Data Completeness Score[[2]](#footnote-3)** | 2 |

**(b) Data Anomalies: Anomalies in your State’s FFY 2021 Outcomes Data**

|  |  |
| --- | --- |
| **Data Anomalies Score**[[3]](#footnote-4) | 2 |

**II. Child Performance**

**(a) Data Comparison: Comparing your State’s 2021 Outcomes Data to other States’ 2021 Outcomes Data**

|  |  |
| --- | --- |
| **Data Comparison Score[[4]](#footnote-5)** | 1 |

**(b) Performance Change Over Time: Comparing your State’s FFY 2021 data to your State’s FFY 2020 data**

|  |  |
| --- | --- |
| **Performance Change Score[[5]](#footnote-6)** | 1 |

| **Summary Statement Performance** | **Outcome A: Positive Social Relationships SS1 (%)** | **Outcome A: Positive Social Relationships SS2 (%)** | **Outcome B: Knowledge  and Skills SS1 (%)** | **Outcome B: Knowledge and Skills SS2 (%)** | **Outcome C: Actions to Meet Needs  SS1 (%)** | **Outcome C: Actions to Meet Needs SS2 (%)** |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY 2021** | 74.62% | 47.47% | 79.16% | 45.04% | 76.51% | 42.72% |
| **FFY 2020** | 74.22% | 47.49% | 77.92% | 42.84% | 76.94% | 43.83% |

**2023 Part C Compliance Matrix**

| **Part C Compliance Indicator[[6]](#footnote-7)** | **Performance (%)** | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 1: Timely service provision** | 95.10% | NO | 2 |
| **Indicator 7: 45-day timeline** | 97.01% | YES | 2 |
| **Indicator 8A: Timely transition plan** | 100.00% | N/A | 2 |
| **Indicator 8B: Transition notification** | 100.00% | N/A | 2 |
| **Indicator 8C: Timely transition conference** | 92.74% | NO | 1 |
| **Timely and Accurate State-Reported Data** | 100.00% |  | 2 |
| **Timely State Complaint Decisions** | N/A |  | N/A |
| **Timely Due Process Hearing Decisions** | N/A |  | N/A |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

**Appendix A**

**I. (a) Data Completeness:**

**The Percent of Children Included in your State's 2021 Outcomes Data (Indicator C3)**

Data completeness was calculated using the total number of Part C children who were included in your State’s FFY 2021 Outcomes Data (C3) and the total number of children your State reported in its FFY 2021 IDEA Section 618 data. A percentage for your State was computed by dividing the number of children reported in your State’s Indicator C3 data by the number of children your State reported exited during FFY 2021 in the State’s FFY 2021 IDEA Section 618 Exit Data.

|  |  |
| --- | --- |
| **Data Completeness Score** | **Percent of Part C Children included in Outcomes Data (C3) and 618 Data** |
| **0** | **Lower than 34%** |
| **1** | **34% through 64%** |
| **2** | **65% and above** |

**Appendix B**

**I. (b) Data Quality:**

**Anomalies in Your State's FFY 2021 Outcomes Data**

This score represents a summary of the data anomalies in the FFY 2021 Indicator 3 Outcomes Data reported by your State. Publicly available data for the preceding four years reported by and across all States for each of 15 progress categories under Indicator 3 (in the FFY 2017 – FFY 2020 APRs) were used to determine an expected range of responses for each progress category under Outcomes A, B, and C. For each of the 15 progress categories, a mean was calculated using the publicly available data and a lower and upper scoring percentage was set 1 standard deviation above and below the mean for category a, and 2 standard deviations above and below the mean for categories b through e[[7]](#footnote-8)[[8]](#footnote-9). In any case where the low scoring percentage set from 1 or 2 standard deviations below the mean resulted in a negative number, the low scoring percentage is equal to 0.

If your State's FFY 2021 data reported in a progress category fell below the calculated "low percentage" or above the "high percentage" for that progress category for all States, the data in that particular category are statistically improbable outliers and considered an anomaly for that progress category. If your State’s data in a particular progress category was identified as an anomaly, the State received a 0 for that category. A percentage that is equal to or between the low percentage and high percentage for each progress category received 1 point. A State could receive a total number of points between 0 and 15. Thus, a point total of 0 indicates that all 15 progress categories contained data anomalies and a point total of 15 indicates that there were no data anomalies in all 15 progress categories in the State's data. An overall data anomaly score of 0, 1, or 2 is based on the total points awarded.

|  |  |
| --- | --- |
| **Outcome A** | **Positive Social Relationships** |
| **Outcome B** | **Knowledge and Skills** |
| **Outcome C** | **Actions to Meet Needs** |

|  |  |
| --- | --- |
| **Category a** | **Percent of infants and toddlers who did not improve functioning** |
| **Category b** | **Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers** |
| **Category c** | **Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it** |
| **Category d** | **Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers** |
| **Category e** | **Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers** |

**Expected Range of Responses for Each Outcome and Category, FFY 2021**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome\Category** | **Mean** | **StDev** | **-1SD** | **+1SD** |
| **Outcome A\Category a** | 1.43 | 1.62 | -0.19 | 3.05 |
| **Outcome B\Category a** | 1.26 | 2.27 | -1.01 | 3.53 |
| **Outcome C\Category a** | 1.14 | 1.59 | -0.45 | 2.73 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome\Category** | **Mean** | **StDev** | **-2SD** | **+2SD** |
| **Outcome A\ Category b** | 23.62 | 8.94 | 5.75 | 41.49 |
| **Outcome A\ Category c** | 20.32 | 12.69 | -5.05 | 45.69 |
| **Outcome A\ Category d** | 27.33 | 9.46 | 8.42 | 46.24 |
| **Outcome A\ Category e** | 27.3 | 15.11 | -2.92 | 57.52 |
| **Outcome B\ Category b** | 25.16 | 9.76 | 5.65 | 44.68 |
| **Outcome B\ Category c** | 28.73 | 12.11 | 4.5 | 52.95 |
| **Outcome B\ Category d** | 31.76 | 8.06 | 15.64 | 47.87 |
| **Outcome B\ Category e** | 13.09 | 8.56 | -4.02 | 30.21 |
| **Outcome C\ Category b** | 20.27 | 8.49 | 3.29 | 37.26 |
| **Outcome C\ Category c** | 23.01 | 13.08 | -3.16 | 49.17 |
| **Outcome C\ Category d** | 34.09 | 8.09 | 17.9 | 50.28 |
| **Outcome C\ Category e** | 21.49 | 15.06 | -8.62 | 51.6 |

|  |  |
| --- | --- |
| **Data Anomalies Score** | **Total Points Received in All Progress Areas** |
| 0 | 0 through 9 points |
| 1 | 10 through 12 points |
| 2 | 13 through 15 points |

**Anomalies in Your State’s Outcomes Data FFY 2021**

|  |  |
| --- | --- |
| **Number of Infants and Toddlers with IFSP’s Assessed in your State** | **5,127** |

| **Outcome A — Positive Social Relationships** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 111 | 1,013 | 1,576 | 1,728 | 712 |
| **Performance (%)** | 2.16% | 19.71% | 30.66% | 33.62% | 13.85% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome B — Knowledge and Skills** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 105 | 866 | 1,854 | 1,835 | 480 |
| **Performance (%)** | 2.04% | 16.85% | 36.07% | 35.70% | 9.34% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome C — Actions to Meet Needs** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 124 | 968 | 1,852 | 1,705 | 491 |
| **Performance (%)** | 2.41% | 18.83% | 36.03% | 33.17% | 9.55% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

|  | **Total Score** |
| --- | --- |
| **Outcome A** | 5 |
| **Outcome B** | 5 |
| **Outcome C** | 5 |
| **Outcomes A-C** | 15 |

|  |  |
| --- | --- |
| **Data Anomalies Score** | 2 |

**Appendix C**

**II. (a) Data Comparison:**

**Comparing Your State’s 2021 Outcomes Data to Other States’ 2021 Outcome Data**

This score represents how your State's FFY 2021 Outcomes data compares to other States' FFY 2021 Outcomes Data. Your State received a score for the distribution of the 6 Summary Statements for your State compared to the distribution of the 6 Summary Statements in all other States. The 10th and 90th percentile for each of the 6 Summary Statements was identified and used to assign points to performance outcome data for each Summary Statement[[9]](#footnote-10). Each Summary Statement outcome was assigned 0, 1, or 2 points. If your State's Summary Statement value fell at or below the 10th percentile, that Summary Statement was assigned 0 points. If your State's Summary Statement value fell between the 10th and 90th percentile, the Summary Statement was assigned 1 point, and if your State's Summary Statement value fell at or above the 90th percentile the Summary Statement was assigned 2 points. The points were added up across the 6 Summary Statements. A State can receive a total number of points between 0 and 12, with 0 points indicating all 6 Summary Statement values were at or below the 10th percentile and 12 points indicating all 6 Summary Statements were at or above the 90th percentile. An overall comparison Summary Statement score of 0, 1, or 2 was based on the total points awarded.

*Summary Statement 1: Of those infants and toddlers who entered or exited 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.*

*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.*

**Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2021**

| **Percentiles** | **Outcome A SS1** | **Outcome A SS2** | **Outcome B SS1** | **Outcome B SS2** | **Outcome C SS1** | **Outcome C SS2** |
| --- | --- | --- | --- | --- | --- | --- |
| **10** | 43.42% | 36.60% | 54.62% | 29.02% | 55.14% | 36.15% |
| **90** | 82.74% | 69.30% | 79.34% | 55.52% | 85.72% | 76.15% |

|  |  |
| --- | --- |
| **Data Comparison Score** | **Total Points Received Across SS1 and SS2** |
| **0** | 0 through 4 points |
| **1** | 5 through 8 points |
| **2** | 9 through 12 points |

**Your State’s Summary Statement Performance FFY 2021**

| **Summary Statement (SS)** | **Outcome A: Positive Social Relationships SS1** | **Outcome A: Positive Social Relationships SS2** | **Outcome B: Knowledge and Skills SS1** | **Outcome B: Knowledge and Skills SS2** | **Outcome C: Actions to meet needs SS1** | **Outcome C: Actions to meet needs SS2** |
| --- | --- | --- | --- | --- | --- | --- |
| **Performance (%)** | 74.62% | 47.47% | 79.16% | 45.04% | 76.51% | 42.72% |
| **Points** | 1 | 1 | 1 | 1 | 1 | 1 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2(\*)** | 6 |

|  |  |
| --- | --- |
| **Your State’s Data Comparison Score** | 1 |

**Appendix D**

**II. (b) Performance Change Over Time:**

**Comparing your State’s FFY 2021 data to your State’s FFY 2020 data**

The Summary Statement percentages in each Outcomes Area from the previous year’s reporting (FFY 2020) is compared to the current year (FFY 2021) using the test of proportional difference to determine whether there is a statistically significant (or meaningful) growth or decline in child achievement based upon a significance level of p<=.05. The data in each Outcome Area is assigned a value of 0 if there was a statistically significant decrease from one year to the next, a value of 1 if there was no significant change, and a value of 2 if there was a statistically significant increase across the years. The scores from all 6 Outcome Areas are totaled, resulting in a score from 0 – 12. The Overall Performance Change Score for this results element of ‘0’, ‘1’, or ‘2’ for each State is based on the total points awarded. Where OSEP has approved a State’s reestablishment of its Indicator C3 Outcome Area baseline data the State received a score of ‘N/A’ for this element.

**Test of Proportional Difference Calculation Overview**

The summary statement percentages from the previous year’s reporting were compared to the current year using an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon a significance level of p<=.05. The statistical test has several steps.

Step 1: Compute the difference between the FFY 2021 and FFY 2020 summary statements.

e.g., C3A FFY2021% - C3A FFY2020% = Difference in proportions

Step 2: Compute the standard error of the difference in proportions using the following formula which takes into account the value of the summary statement from both years and the number of children that the summary statement is based on[[10]](#footnote-11)

Sqrt[([FFY2021% \* (1-FFY2021%)] / FFY2021N) + ([FFY2022% \* (1-FFY2022%)] / FFY2022N)] = Standard Error of Difference in Proportions

Step 3: The difference in proportions is then divided by the standard error of the difference to compute a z score.

Difference in proportions /standard error of the difference in proportions = z score

Step 4: The statistical significance of the z score is located within a table and the *p* value is determined.

Step 5: The difference in proportions is coded as statistically significant if the *p* value is it is less than or equal to .05.

Step 6: Information about the statistical significance of the change and the direction of the change are combined to arrive at a score for the summary statement using the following criteria

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

Step 7: The score for each summary statement and outcome is summed to create a total score with a minimum of 0 and a maximum of 12. The score for the test of proportional difference is assigned a score for the Indicator 3 Overall Performance Change Score based on the following cut points:

|  |  |
| --- | --- |
| **Indicator 3 Overall Performance Change Score** | **Cut Points for Change Over Time in Summary Statements Total Score** |
| **0** | Lowest score through 3 |
| **1** | 4 through 7 |
| **2** | 8 through highest |

| **Summary Statement/ Child Outcome** | **FFY 2020 N** | **FFY 2020 Summary Statement (%)** | **FFY 2021 N** | **FFY 2021 Summary Statement (%)** | **Difference between Percentages (%)** | **Std Error** | **z value** | **p-value** | **p<=.05** | **Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SS1/Outcome A: Positive Social Relationships** | 3,797 | 74.22% | 4,428 | 74.62% | 0.40 | 0.0097 | 0.4140 | 0.6789 | NO | 1 |
| **SS1/Outcome B: Knowledge and Skills** | 4,067 | 77.92% | 4,660 | 79.16% | 1.24 | 0.0088 | 1.4104 | 0.1584 | NO | 1 |
| **SS1/Outcome C: Actions to meet needs** | 4,037 | 76.94% | 4,649 | 76.51% | -0.43 | 0.0091 | -0.4701 | 0.6383 | NO | 1 |
| **SS2/Outcome A: Positive Social Relationships** | 4,458 | 47.49% | 5,140 | 47.47% | -0.02 | 0.0102 | -0.0165 | 0.9868 | NO | 1 |
| **SS2/Outcome B: Knowledge and Skills** | 4,458 | 42.84% | 5,140 | 45.04% | 2.19 | 0.0102 | 2.1614 | 0.0307 | YES | 2 |
| **SS2/Outcome C: Actions to meet needs** | 4,458 | 43.83% | 5,140 | 42.72% | -1.11 | 0.0101 | -1.0922 | 0.2747 | NO | 1 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2** | **7** |

|  |  |
| --- | --- |
| **Your State’s Performance Change Score** | **1** |

## Data Rubric

**South Carolina**

**FFY 2021 APR**[[11]](#footnote-12)

|  | **Part C Timely and Accurate Data -- SPP/APR Data** |  |
| --- | --- | --- |
| **APR Indicator** | **Valid and Reliable** | **Total** |
| **1** | 1 | 1 |
| **2** | 1 | 1 |
| **3** | 1 | 1 |
| **4** | 1 | 1 |
| **5** | 1 | 1 |
| **6** | 1 | 1 |
| **7** | 1 | 1 |
| **8A** | 1 | 1 |
| **8B** | 1 | 1 |
| **8C** | 1 | 1 |
| **9** | N/A | 0 |
| **10** | 1 | 1 |
| **11** | 1 | 1 |
|  | **Subtotal** | 12 |
| **APR Score Calculation** | **Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right. | 5 |
|  | **Grand Total** - (Sum of Subtotal and Timely Submission Points) = | 17 |

|  |  | **618 Data[[12]](#footnote-13)** |  |  |
| --- | --- | --- | --- | --- |
| **Table** | **Timely** | **Complete Data** | **Passed Edit Check** | **Total** |
| **Child Count/Settings Due Date: 4/6/22** | 1 | 1 | 1 | 3 |
| **Exiting Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Dispute Resolution Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
|  |  |  | **Subtotal** | 9 |
| **618 Score Calculation** |  |  | **Grand Total** (Subtotal X 2) = | 18.00 |

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 17 |
| B. 618 Grand Total | 18.00 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 35.00 |
| Total N/A Points in APR Data Table Subtracted from Denominator | 1 |
| Total N/A Points in 618 Data Table Subtracted from Denominator | 0.00 |
| **Denominator** | 35.00 |
| D. Subtotal (C divided by Denominator\*) = | 1.0000 |
| E. Indicator Score (Subtotal D x 100) = | 100.00 |

**\*Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 2.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APR and 618 -Timely and Accurate State Reported Data**

**DATE: February 2023 Submission**

**SPP/APR Data**

**1) Valid and Reliable Data** - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

**Part C 618 Data**

**1) Timely** – A State will receive one point if it submits counts/ responses for an entire EMAPS survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

|  |  |  |
| --- | --- | --- |
| **618 Data Collection** | **EMAPS Survey** | **Due Date** |
| Part C Child Count and Setting | Part C Child Count and Settings in EMAPS | 1st Wednesday in April |
| Part C Exiting | Part C Exiting Collection in EMAPS | 1st Wednesday in November |
| Part C Dispute Resolution | Part C Dispute Resolution Survey in EMAPS | 1st Wednesday in November |

**2) Complete Data** – A State will receive one point if it submits data for all data elements, subtotals, totals as well as responses to all questions associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. State-level data include data from all districts or agencies.

**3) Passed Edit Check –** A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection. See the EMAPS User Guide for each of the Part C 618 Data Collections for a list of edit checks (available at: <https://www2.ed.gov/about/inits/ed/edfacts/index.html>).

## Dispute Resolution



## How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP’s IDEA Website.  How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

[https://sites.ed.gov/idea/how-the-department-made-determinations/](https://nam10.safelinks.protection.outlook.com/?url=https%3A%2F%2Fsites.ed.gov%2Fidea%2Fhow-the-department-made-determinations%2F&data=05%7C01%7Cdan.royal%40aemcorp.com%7C56561a053eed4e4dffea08db4cd0ea7f%7C7a41925ef6974f7cbec30470887ac752%7C0%7C0%7C638188232405320922%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=REJfNg%2BRs0Gk73rS2KzO2SIVRCUhHLglGd6vbm9wEwc%3D&reserved=0)

1. For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part C." [↑](#footnote-ref-2)
2. Please see Appendix A for a detailed description of this calculation. [↑](#footnote-ref-3)
3. Please see Appendix B for a detailed description of this calculation. [↑](#footnote-ref-4)
4. Please see Appendix C for a detailed description of this calculation. [↑](#footnote-ref-5)
5. Please see Appendix D for a detailed description of this calculation. [↑](#footnote-ref-6)
6. The complete language for each indicator is located in the Part C SPP/APR Indicator Measurement Table at: <https://sites.ed.gov/idea/files/2023_Part-C_SPP-APR_Measurement_Table.pdf> [↑](#footnote-ref-7)
7. Numbers shown as rounded for display purposes. [↑](#footnote-ref-8)
8. Values based on data for States with summary statement denominator greater than 199 exiters. [↑](#footnote-ref-9)
9. Values based on data for States with summary statement denominator greater than 199 exiters. [↑](#footnote-ref-10)
10. Numbers shown as rounded for display purposes. [↑](#footnote-ref-11)
11. In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table. [↑](#footnote-ref-12)
12. In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a ‘0’. An N/A does not negatively affect a State's score; this is because 2 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table. [↑](#footnote-ref-13)