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

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

**For reporting on   
FFY 2019**

**South Carolina**

U.S. Department of Education seal

**PART C DUE   
February 1, 2021**

**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**

Effective July 1, 2017, lead agency responsibilities for the South Carolina system of early intervention, known as "BabyNet" transitioned from South Carolina First Steps to School Readiness (SCFSSR) to the South Carolina Department of Health and Human Services (SCDHHS) pursuant to Executive Order 2016-20, issued by Governor Nikki R. Haley on September 14, 2016. From 2017-2020, the BabyNet program has operated as a semi-independent program under the SCDHHS umbrella with the Part C Coordinator reporting to the agency head. Compliance efforts have focused on integrating the program into the larger SCDHHS and Medicaid enterprise.   
  
Since transferring to SCDHHS, the BabyNet program began focusing on integration into the Medicaid agency in the areas of provider enrollment and payor policy, coordination of benefits with Medicaid managed care organizations (MCOs), the development of a new BabyNet Policy and Procedure manual, new State Systemic Improvement Plan (SSIP) and the integration of the BabyNet Reporting & Intervention Data Gathering Electronic System (BRIDGES) case management system and the state's Medicaid Management Information System (MMIS) through a project called BRIDGES Integration. In 2018, South Carolina negotiated a voluntary Corrective Action Plan (CAP) that outlined the actions necessary to bring the program into compliance. Work began in earnest in 2018 to address all areas in the CAP and beginning in FFY 2019, many of the large scale changes were implemented. Those include:  
  
 \*Implemented statewide, secure web-based referral portal. To date, 20,566 referrals have been processed through the webform.  
 \*Increased central referral team staff increases in order to process the increasing number of referrals.  
 \*Enrollment of service coordination providers as Medicaid providers through SCDHHS.  
 \*Coordination of benefits with MCOs for BabyNet eligible children receiving services.   
 \*Slowly began implementing some of the changes brought about as a result of the BRIDGES Integration project.   
 \*Implemented a bulk approval function for service coordination providers allowing them to review and approve service logs in bulk in order to process them for payment.  
 \*Began running BabyNet claims through the MMIS to ensure coordination of benefits and non-duplication of payments.   
  
Due to the extensive changes made within the BabyNet system in FFY 2019, the IDEA, Part C program and SCDHHS conducted 7 webinars for service providers, 2 narrated PowerPoint presentations, sent out 21 provider alerts, 1 Medicaid Bulletin and created 4 job aids related to updated policies, procedures and billing processes between June 20, 2019-December 4, 2019. All trainings and alerts are available on the BabyNet website.   
  
Work continued on the BRIDGES Integration project in early 2020 and then in mid-March the state began shutting down to the national pandemic-COVID-19. SCDHHS and the BabyNet program worked quickly to allow service providers to continue to deliver IDEA, Part C services via telehealth platforms. Delay reasons for Indicator 1 and 7 were added to include COVID-System and COVID-Parent/Family. Initially providers were delivering services in a hybrid model with some face-to-face interactions with families, while others were delivered via telehealth. As the cases increased in our state, providers moved to virtual platforms to ensure the safety of the children and families served as well as their staff.   
  
Changes were also made to the BabyNet eligibility determination process in our state due to COVID-19. Since face-to-face interactions were no longer safe, eligibility staff used a combination of tools, information from healthcare providers and the family to make eligibility determinations. Eligibility staff have relied heavily on informed clinical opinion during this unprecedented time. The ability to make eligibility determinations this way actually had a positive impact on our Indicator 7 data and we are now reporting significant increases in the timeliness of the eligibility process.   
  
FFY 2019 was a busy year in which SCDHHS took aggressive steps to address longstanding issues that have historically plagued South Carolina's Part C program. Those steps include addressing staff development, financial and systems process improvement, General Supervision and collaboration with partnering agencies. The agency is committed to continuing this work in the coming years.   
   
UPDATE DURING CLARIFICATION:   
  
Technical Assistance received by South Carolina during FFY 2019  
8/1/19: Emails with Sherry Franklin, Sharon Walsh and Sarah Walters regarding payor source questions related to the Part C data system.  
1/8/20: Email conversation with Sherry regarding setting targets.  
1/25/20: Email conversation with Sherry Franklin regarding dispute resolution.   
3/3/20: Email conversation with Sherry Franklin regarding race categories in data system.   
3/24/20: Email conversation with Sherry Franklin regarding COVID and SSIP related questions.   
4/13/20: Email conversation with Sherry Franklin regarding dates for the clarification period.   
5/6/20: Email conversation with Sherry Franklin regarding Part C and Hospice Services.   
5/15/20: Email conversation with Sherry Franklin regarding reporting of local performance data.   
5/21/20: Email conversation with Sherry Franklin regarding surrogate parents.   
  
508 Compliance:   
The state had several issues trying to get the Interagency Coordinating Council signature form to pass 508 Compliancy. On January 28, 2021 BabyNet state staff contacted SCDHHS IT staff to see if they could assist in getting the form to pass. When that was unsuccessful, a second IT person at SCDHHS was contacted and he experienced similar results. BabyNet state staff then reached out to the EDFacts Partner Support Center regarding the problem and notified Brenda Wilkins, OSEP State Lead (Email 1/29/21). We were told by Sarah Manjus at EDFacts Partner Support Center that a ticket was opened (Ticket 21-00630). Jessica Lamanti at EdFacts then escalated the issue because she encountered similar results. She believed the form that was posted for use had errors that would prevent it from meeting compliancy. On 2/1/2021, BabyNet state staff received an email from Jess Greene at the EDFacts Partner Support Center indicating that she too had escalated our issue, but indicated that South Carolina should submit the ICC form as is, and explain what occurred during clarification since the problem would not be resolved before the SPP/APR needed to be submitted.   
  
South Carolina’s SSIP was reloaded and included 508 Compliance Verification.

Additional information related to data collection and reporting

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

**General Supervision System**

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

Prior to 2019, South Carolina's South Carolina's IDEA Part C program had not implemented a system of general supervision. As a condition of the Corrective Action Plan (CAP) negotiated with OSEP in 2018, SCDHHS developed an interim general supervision plan which was implemented in October 2019 when the state issued its first set of findings of noncompliance to the Part C Regional Coordinators and Director of BabyNet Eligibility. These letters outlined findings of noncompliance for Indicators 1 and 7 based upon reports generated by the SCDHHS DGO. The Regional Part C Coordinators and Director of BabyNet Eligibility are responsible for working with their staff to correct findings of noncompliance and ensure that the child did actually receive the service as outlined in their IFSP.   
  
The Regional Part C Coordinators also generate monthly reports from the BRIDGES data system and work with local BabyNet service coordination providers on ensuring their data is current in the system. These reports include, but are not limited to:  
\*Children who have turned 3, but have not been closed in the data system  
\*Timely services delay reasons  
\*45-Day timeline  
\*Transition   
\*Child outcome summary  
  
In 2019, the BabyNet team worked towards developing a dispute resolution process that folds into existing processes within SCDHHS. Meetings took place with both areas and the BabyNet website was updated to include access for families, providers and agencies to file formal complaints or request due process or mediation.

**Technical Assistance System:**

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to early intervention service (EIS) programs.**

South Carolina has a strong system of technical assistance available to its provider network including an electronic help desk system that allows providers to submit questions to BabyNet state staff. These questions are answered by 3 state-level staff who are all supervised by the BabyNet Operations Manager. This structure helps ensure consistency in answering and coordination of timely responses. These staff are also responsible for monthly meetings with providers at the local level so they are able to share questions and answers to assist the provider community as a whole. These meetings did change from face-to-face to virtual once COVID-19 made it impractical to meet in person. The local meetings are also used for training and technical assistance as well as to discuss resources in their community that could impact service delivery.   
  
In addition to state and local meetings, the BabyNet program established four email addresses that are managed by BabyNet state staff covering topics such as provider enrollment, billing support and outreach. These email addresses allow providers to send messages/questions directly to BabyNet state staff and receive responses to their questions.   
  
During the period of time when SCDHHS was implementing a significant number of changes to the provider community, communication was crucial. In addition to SCDHHS' specific trainings for providers, the IDEA, Part C program conducted 7 webinars, 2 narrated PowerPoint presentations, sent out 21 Medicaid Alerts, 1 Medicaid Bulletin and 4 job aids related to updated policies, procedures and billing practices between June 20, 2019 and December 4, 2019. These trainings are available on the IDEA, Part C website at https://msp.scdhhs.gov/babynet/site-page/announcements.

**Professional Development System:**

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

Since the Part C program transferred to SCDHHS, it has focused most of its efforts on the development of policies, procedures and systems integration. Work had begun to ensure service coordination providers were trained in the Routines-Based Interview (RBI) process and then COVID-19 hit. To date, one Region in South Carolina has been trained in RBI. This training was to lead to state certification for service coordinators in order to assist the state in becoming compliant in the area of family-assessment, which has historically been an area of noncompliance for South Carolina. COVID-19 has made it difficult to begin work in the area of RBI training given the hands-on nature of the training.   
  
Recently, a new Director was hired for the Team for Early Childhood Solutions (TECS), an agency contracted to provide training and technical assistance to the Part C provider community. The new director has been tasked with overhauling the outdated learning management system and updating all modules, heading up the changes made to the Family Outcomes Measurement process and ensuring that all service coordinators in the state are trained in RBI. The director is nationally trained in the RBI process, so she will also be responsible for looking for alternative ways to deliver RBI content given the need for social distancing.   
  
In addition to the previously mentioned activities, the IDEA, Part C state office has begun recording trainings that correspond to policy and procedure changes made over the last few years. This plan is to implement these trainings in the coming months.

**Stakeholder Involvement:**

**The mechanism for soliciting broad stakeholder input on 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 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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

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

YES

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2018 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 2018 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 2018 APR in 2020, is available.**

The state was unable to report on performance by EIS program for FFY 2018 because the state did not have a system of general supervision in place at the time nor had it issued any findings. Findings were issued in the fall of 2019 for the first time in the program's history.   
  
The FFY 2018 SPP/APR was not posted to the website within 120 days, but is now posted on the state's website in the federal reporting section.  
  
UPDATE DURING CLARIFICATION:   
Response to Public Reporting: South Carolina has had problems identifying noncompliance, notifying providers when it occurred and following up to ensure correction when concerns were identified. Under the previous lead agency, the state did not have a coordinated system of general supervision that was developed, implemented, and communicated at all levels of the program or to the stakeholder community. For these reasons, South Carolina is unable to correct findings of noncompliance identified in FFY 2015 as the state is unable to verify those instances were ever formally issued to providers. The state is unable to report any information for FFY 2016 for similar reasons. In addition, any instances that might have been identified but not issued, are unable to be corrected now because these children are no longer enrolled in the IDEA Part C program.   
   
In keeping with the indicators addressed in our Interim General Supervision plan, data related to local performance has been posted on the BabyNet website for FFY 2018 and 2019. This information can be found using the following link; https://msp.scdhhs.gov/babynet/site-page/babynet-state-and-federal-reporting. Local determinations will be made for FFY 20 based upon the newly drafted General Supervision plan due to OSEP on May 1, 2021.

## Intro - Prior FFY Required Actions

The State has not publicly reported on the FFY 2017 (July 1, 2017-June 30, 2018), FFY 2016 (July 1, 2016-June 30, 2017), FFY 2015 (July 1, 2015-June 30, 2016), and FFY 2014 (July 1, 2014-June 30, 2015) performance of each EIS program or provider located in the State on the targets in the State’s performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of IDEA. With its FFY 2019 SPP/APR, the State must provide a Web link demonstrating that the State reported to the public on the performance of each early intervention service program or provider located in the State on the targets in the SPP/APR for FFY 2017, FFY 2016, FFY 2015, and FFY 2014. In addition, the State must report with its FFY 2019 SPP/APR, how and where the State reported to the public on the FFY 2018 performance of each early intervention service program or provider located in the State on the targets in the SPP/APR.   
  
The State's IDEA Part C determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 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 2019 SPP/APR submission, due February 1, 2021, 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.  
  
In the FFY 2019 SPP/APR, the State must provide a FFY 2019 target and report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year 5; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP’s coherent improvement strategies, including infrastructure improvement strategies, and evidence-based practices that were implemented by the State and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State’s capacity to improve its SiMR data. If, in its FFY 2019 SPP/APR, the State is not able to demonstrate progress in implementing its coherent improvement strategies, including progress in the areas of infrastructure improvement strategies or the implementation of evidence-based practices with fidelity, the State must provide its root cause analysis for each of these challenges.  
  
OSEP notes that one or more of the attachments included in the State’s FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

**Response to actions required in FFY 2018 SPP/APR**

## Intro - OSEP Response

The State's determinations for both 2019 and 2020 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 23, 2020 determination letter informed the State that it must report with its FFY 2019 SPP/APR submission, due February 1, 2021, 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.  
  
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 reported that, due to the circumstances created by the COVID-19 pandemic and resulting interruption of EIS programs and services, the State experienced challenges with implementation of Indicator 11 and associated data collection activities.   
  
The State's FFY 2018, FFY 2019, and FFY 2020 IDEA Part C grant was subject to specific conditions as a result of OSEP's 2017 monitoring letter (which identified four findings of noncompliance). The State is also subject to a corrective action plan (CAP) initially approved in 2018 and a revised CAP approved by OSEP on January 31, 2019. The State timely submitted its October 1, 2020, and May 1, 2021 progress reports under the FFY 2020 Grant Specific Conditions and OSEP will respond separately to the data in these reports in its FFY 2021 IDEA Part C grant letter to South Carolina.

## Intro - Required Actions

The State has not publicly reported on the FFY 2017 (July 1, 2017-June 30, 2018), FFY 2016 (July 1, 2016-June 30, 2017), FFY 2015 (July 1, 2015-June 30, 2016), and FFY 2014 (July 1, 2014-June 30, 2015) performance of each EIS program or provider located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of IDEA. With its FFY 2020 SPP/APR, the State must provide a Web link demonstrating that the State reported to the public on the performance of each early intervention service program or provider located in the State on the targets in the SPP/APR for FFY 2017, FFY 2016, FFY 2015, and FFY 2014. In addition, the State must report with its FFY 2020 SPP/APR, how and where the State reported to the public on the FFY 2019 performance of each early intervention service program or provider located in the State on the targets in the SPP/APR.   
  
The State's IDEA Part C determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.   
The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.  
  
The State must provide the FFY 2020 required data for Indicator 11, including the State’s progress in implementing the State Systemic Improvement Plan, in the FFY 2020 SPP/APR.  
  
OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 11 attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

# 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | NVR | 32.20% | 40.63% | 40.25% | 59.65% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 5,428 | 7,457 | 59.65% | 100% | 73.74% | 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.***

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

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

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

State database

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

July 1, 2019-June 30, 2020

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

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

**If needed, provide additional information about this indicator here.**

Historically South Carolina has had problems identifying noncompliance, notifying providers when it occurred and following up to ensure correction when concerns were identified. Under the previous lead agency, the state did not have a coordinated system of general supervision nor did it maintain any of the data associated with findings captured in previous APRs. For these reasons, South Carolina is unable to correct findings of noncompliance identified in FFY 2015 as the state is unable to verify those instances were ever formally issued to providers. In addition, these instances cannot be corrected now due to the children no longer being enrolled in the Part C system. South Carolina was required to develop an interim general supervision plan and implement it as a condition of the corrective action plan in 2018. That interim plan was developed and implemented in the fall of 2019 when the first findings of noncompliance were issued in our state.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2015 | 56 |  |  |
|  |  |  |  |
|  |  |  |  |

## 1 - Prior FFY Required Actions

**Response to actions required in FFY 2018 SPP/APR**

## 1 - OSEP Response

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR the status of correction of findings issued October 1, 2019 based on FFY 2017 data. The State did not provide the status of correction of those findings. However, in its October 1, 2020 Specific Conditions progress report, the State reported "it did not pull subsequent data to demonstrate correction of those findings (consistent with OSEP Memo 09-02) until they were preparing for the FFY 2019 SPP/APR submission (in October 2020 and to be submitted in Feb. 2021). After receiving technical assistance (TA), SCDHHS has developed a draft General Supervision process, which they will continue to refine, to ensure that subsequent data are reviewed to demonstrate correction of findings."  
  
Reporting updated data and on correction of noncompliance under this indicator is part of the State's FFY 2020 IDEA Part C grant award specific conditions. The State was required to submit two progress reports on October 1, 2020 and May 1, 2021 under its FFY 2020 Specific Conditions. The State timely submitted its October 1, 2020 and May 1, 2021 progress reports. OSEP will respond to the FFY 2020 Specific Conditions in its FFY 2021 IDEA Part C grant award letter.

## 1 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance, based on FFY 2019 data, for this indicator. In addition, the State must report on the status of correction of noncompliance identified in October 2020, based on FFY 2018 data, for this indicator. Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the findings of noncompliance identified in October 2019, based on FFY 2017 data were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in October 2019, based on FFY 2017 data and October 2020, based on FFY 2018 data: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# 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 EDFacts 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** |
| --- | --- |
| 2005 | 86.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= | 99.00% | 97.64% | 97.64% | 97.64% | 98.00% |
| Data | NVR | 97.64% | 97.33% | 97.82% | 98.03% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= | 98.00% |

**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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

The South Carolina Interagency Coordinating Council (SCICC) and interested members of the public met on January 20, 2021 to discuss the FFY 2019 APR. Data related to this indicator was shared and members of the SCICC were asked to provide input on potential causes for slippage. The group was unable to provide potential causes for the slippage in this indicator other than the loss of a small number of providers in early FFY 2019.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 5,922 |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Total number of infants and toddlers with IFSPs | 6,318 |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 5,922 | 6,318 | 98.03% | 98.00% | 93.73% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

The state reviewed the FFY 2019 data for Indicator 2 and one potential explanation for the slippage is the loss of approximately 25 providers in FFY 2019 due to the large scale changes being made in South Carolina's Part C system. On July 1, 2019, SCDHHS began implementing some of the system integration changes associated with the integration of the BRIDGES data system into MMIS. Some billing practices were modified or discontinued which resulted in lower reimbursement rates for providers. As a result of the rapid changes and reimbursement rates some providers terminated their contracts. The rate of slippage was less than 5% so the state is confident that this issue can be addressed given the Part C system's ability to work with the DGO at SCDHHS to run reports to assist with provider recruitment. Now that policies, procedures and system integration have been addressed, IDEA, Part C staff will have the ability to focus more time and effort on provider recruitment.

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

None

## 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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A1** | 2008 | Target>= | 80.00% | 78.00% | 78.00% | 78.00% | 80.10% |
| **A1** | 80.00% | Data | 79.86% | 78.40% | 78.17% | 77.07% | 74.09% |
| **A2** | 2013 | Target>= | 59.00% | 54.00% | 54.00% | 54.00% | 60.00% |
| **A2** | 59.25% | Data | 53.46% | 53.99% | 50.70% | 52.03% | 49.40% |
| **B1** | 2008 | Target>= | 82.00% | 81.00% | 81.00% | 81.00% | 82.10% |
| **B1** | 82.00% | Data | 81.90% | 80.99% | 81.68% | 79.48% | 78.99% |
| **B2** | 2013 | Target>= | 54.00% | 50.00% | 50.00% | 50.00% | 55.00% |
| **B2** | 54.54% | Data | 49.94% | 49.94% | 47.54% | 48.13% | 46.47% |
| **C1** | 2008 | Target>= | 82.00% | 82.00% | 82.00% | 82.00% | 82.10% |
| **C1** | 82.00% | Data | 81.90% | 81.51% | 80.28% | 78.04% | 76.70% |
| **C2** | 2013 | Target>= | 57.00% | 51.00% | 51.00% | 51.00% | 58.00% |
| **C2** | 57.71% | Data | 53.63% | 51.74% | 49.43% | 50.02% | 48.51% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1>= | 80.10% |
| Target A2>= | 60.00% |
| Target B1>= | 82.10% |
| Target B2>= | 55.00% |
| Target C1>= | 82.10% |
| Target C2>= | 58.00% |

**FFY 2019 SPP/APR Data**

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

4,154

**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 | 88 | 2.12% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 843 | 20.29% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,208 | 29.08% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,380 | 33.22% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 635 | 15.29% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 2,588 | 3,519 | 74.09% | 80.10% | 73.54% | Did Not Meet 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 | 2,015 | 4,154 | 49.40% | 60.00% | 48.51% | 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 | 81 | 1.95% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 733 | 17.65% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,465 | 35.28% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,460 | 35.16% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 414 | 9.97% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 2,925 | 3,739 | 78.99% | 82.10% | 78.23% | Did Not Meet 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 | 1,874 | 4,153 | 46.47% | 55.00% | 45.12% | Did Not Meet Target | Slippage |

**Provide reasons for B2 slippage, if applicable**

When the lead agency changed in 2017, SCDHHS identified many efforts that needed time and attention in order to bring the Part C system into compliance. New policies, procedures, forms and data system integration were among the highest priorities identified by the new lead agency. Now that these items have been addressed, the lead agency will be turning its attention to training on these policies and procedures, including additional focus on the child outcomes summary process. The state has also hired a new director for the contracting agency responsible for providing training and technical assistance for the Part C provider community. This position will allow for additional focus on provider training across the state.

**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 | 74 | 1.78% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 747 | 17.98% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 1,424 | 34.28% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 1,445 | 34.79% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 464 | 11.17% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 2,869 | 3,690 | 76.70% | 82.10% | 77.75% | 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 | 1,909 | 4,154 | 48.51% | 58.00% | 45.96% | Did Not Meet Target | Slippage |

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

When the lead agency changed in 2017, SCDHHS identified many efforts that needed time and attention in order to bring the Part C system into compliance. New policies, procedures, forms and data system integration were among the highest priorities identified by the new lead agency. Now that these items have been addressed, the lead agency will be turning its attention to training on these policies and procedures including additional focus on the child outcome summary process. The state has also hired a new director for the contracting agency responsible for providing training and technical assistance for the Part C provider community. This position will allow for additional focus on provider training across the state.

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

| **Question** | **Number** |
| --- | --- |
| The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State’s part C exiting 618 data | 5,576 |
| 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. | 1,392 |

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

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

YES

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

• Battelle Developmental Inventory (BDI-2)  
• The Carolina Curriculum for Infants and Toddlers with Special Needs (CCITSN), Third Edition (birth to 24 months) or  
• The Carolina Curriculum for Preschoolers with Special Needs (CCITSN), Second Edition (24-60 months)  
• The Hawaii Early Learning Profile (0-3)  
• Service Provider documentation of evaluation, assessment and service delivery   
• Family input related to outcomes  
• Primary healthcare provider input related to outcomes (collected prior to the initial and annual IFSPs)

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

None

## 3 - Prior FFY Required Actions

None

## 3 - OSEP Response

## 3 - Required Actions

# Indicator 4: Family Involvement

**Instructions and Measurement**

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

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

A. Know their rights;

B. Effectively communicate their children's needs; and

C. Help their children develop and learn.

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

Provide the actual numbers used in the calculation.

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

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

Report the number of families to whom the surveys were distributed.

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

If the analysis shows that the demographics of the families responding are not representative of the demographics of infants, toddlers, and families enrolled 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.

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2012 | Target>= | 86.00% | 74.00% | 74.00% | 74.00% | 86.10% |
| A | 86.00% | Data | 85.91% | 74.06% | 63.21% | 65.07% | 63.19% |
| B | 2012 | Target>= | 86.00% | 72.00% | 72.00% | 72.00% | 86.10% |
| B | 86.00% | Data | 81.82% | 72.18% | 61.02% | 60.63% | 64.69% |
| C | 2012 | Target>= | 86.00% | 75.00% | 75.00% | 75.00% | 86.10% |
| C | 86.00% | Data | 87.73% | 75.94% | 64.63% | 70.18% | 72.54% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A>= | 86.10% |
| Target B>= | 86.10% |
| Target C>= | 86.10% |

**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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

The South Carolina Interagency Coordinating Council (SCICC) and interested members of the public met on January 20, 2021 to discuss the FFY 2019 APR. Data related to this indicator was shared with members of the SCICC and a discussion regarding potential reasons for slippage occurred.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 2,896 |
| Number of respondent families participating in Part C | 319 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 203 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 308 |
| 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 | 188 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 288 |
| 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 | 218 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 305 |

| **Measure** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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) | 63.19% | 86.10% | 65.91% | Did Not Meet 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) | 64.69% | 86.10% | 65.28% | Did Not Meet 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) | 72.54% | 86.10% | 71.48% | Did Not Meet Target | Slippage |

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

While the state has seen slippage in 4C, this is the area of focus for our State Systemic Improvement Plan (SSIP). Our state's SIMR is "Families who have received BabyNet services for 6-12 months will be able to more effectively help their child develop and learn." The state recently revised it's family outcomes process and launched a pilot in ten counties in the Midlands region of the state. This pilot includes surveying families after receiving Part C services for 6 months and again 1 month after they exit the program. The pilot group receives increased education and awareness information by Service Coordinators, along with improved dissemination practices. The state anticipated that this pilot would improve response rates and provide a more accurate representation of families' Part C experiences. The state has surveyed Service Coordinators to gather input about successes and suggestions for how to improve this work. Early data indicates higher response rates in the pilot district, so the state hopes this trend continues and will result in higher rates for 4C in next year's APR.

| **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 families responding are representative of the demographics of infants, toddlers, and families 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 demographics of the families responding to our surveys are not representative of infants, toddlers and families enrolled in South Carolina's Part C program in a three areas. The response rates for Hispanic/Latino, black or African American and 2 or more races are all lower than they should be to be representative. The difference between the response rates of black or African American families compared to the demographics of the state was less than 3%, so this is not a significant area of concern, however; the difference between the response rates of Hispanic/Latino families and those who identify as 2 or more races is more significant.   
  
The strategies to address the issue of representativeness will be to continue working with South Carolina's Parent Training Information Center, Family Connection of South Carolina. In the past, the IDEA, Part C program has participated on the Latinos Making Connections Committee aimed at identifying current services, needs, barriers and challenges that Latino families face, while improving collaboration and grass roots efforts in their community. The Executive Director of Family Connection of South Carolina continues to employ Spanish speaking staff who assist Hispanic/Latino families seeking Part C services for their children. These staff assist in making referrals to the Part C program and guide the families when necessary.   
  
South Carolina continues to focus it's efforts on the Family Outcomes Measurement process as noted above as a part of our SSIP work. This work will continue in earnest during FFY 2020 and the state hopes to report improved response rates in next year's APR.

**Include the State’s analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.**

The collected data is representative of SC IDEA Part C eligible population in FFY 2019-2020, with a 95% confidence level with a +/- 5.63 confidence interval based on the population of 6318 children and families. One of the coherent improvement strategies was developed to address South Carolina's SIMR, is to focus on the Family Outcomes Measurement System. This strategy includes dissemination practices and improving response rates.  
  
Race/Ethnicity Number and Percent of All Families of Infants and Toddlers Served by IDEA/Part C in South Carolina   
Hispanic/Latino: 550, 8.71%  
American Indian or Alaska Native: 13, 0.21%   
Asian: 60, 0.95%  
Black or African American: 1754, 27.77%  
Native Hawaiian or Other Pacific Islander: 9, 0.14%   
White: 3241, 51.30%  
Two or More Races: 691, 10.94%   
Total: 5064, 100%  
  
Percent of Families of Infants and Toddlers Responding to Family Outcomes Survey   
Hispanic/Latino: 13, 4.08%  
American Indian or Alaska Native: 2, 0.62%   
Asian: 9, 2.82%  
Black or African American: 80, 25.08%  
Native Hawaiian or Other Pacific Islander: 1, 0.31%   
White: 214, 67.08%  
Two or More Races: 19, 5.96%   
Total: 319, 100%

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

None

## 4 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 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 2018 SPP/APR**

## 4 - OSEP Response

## 4 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

# 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 compared to national data. (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 EDFacts 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 and compare the results to the target and to national data. 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 0.89% | 0.74% | 0.95% | 0.98% | 0.99% |
| Data | 0.66% | 0.74% | 0.95% | 0.89% | 0.98% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 0.99% |

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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

The South Carolina Interagency Coordinating Council (SCICC) and interested members of the public met on January 20, 2021 to discuss the FFY 2019 APR. Data related to this indicator was shared with members of the SCICC and a positive discussion took place regarding the increase in referrals of children birth to one.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 1 with IFSPs | 687 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 1 | 56,122 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 687 | 56,122 | 0.98% | 0.99% | 1.22% | Met Target | No Slippage |

**Compare your results to the national data**

The national data for birth to one year reflects 1.37% of infants and toddlers receive Part C services, while South Carolina's data for FFY 2019 is 1.22%. The state contributes this difference to South Carolina's restrictive eligibility criteria. While our data is lower than the national average, South Carolina did exceed it's target for this indicator.   
  
Referrals to BabyNet have increased since the program transferred to SCDHHS and outreach efforts continue with outside agencies and referral sources including the South Carolina Department of Social Services, the South Carolina Department of Health and Environmental Control and other child serving agencies.

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

None

## 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 compared to national data. (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 EDFacts 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 and compare the results to the target and to national data. 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 2.13% | 2.30% | 2.49% | 2.49% | 2.50% |
| Data | 2.12% | 2.30% | 2.49% | 2.82% | 3.18% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 2.50% |

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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

The South Carolina Interagency Coordinating Council (SCICC) and interested members of the public met on January 20, 2021 to discuss the FFY 2019 APR. Data related to this indicator was shared with members of the SCICC and a positive discussion took place regarding the increase in referrals of children birth to three. Child find efforts will continue to take place as they have been in order to maintain these numbers.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups | 07/08/2020 | Number of infants and toddlers birth to 3 with IFSPs | 6,318 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin | 06/25/2020 | Population of infants and toddlers birth to 3 | 171,715 |

**FFY 2019 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,318 | 171,715 | 3.18% | 2.50% | 3.68% | Met Target | No Slippage |

**Compare your results to the national data**

The national data for birth to one year reflects 3.70% of infants and toddlers receive Part C services. This percentage is lower in South Carolina and the state contributes the difference to South Carolina's restrictive eligibility criteria. The state's data for FFY 2019 surpassed our target by more than 1.1%.   
  
Referrals to BabyNet have increased since the program transferred to SCDHHS and outreach efforts continue with outside agencies and referral sources including the South Carolina Department of Social Services, the South Carolina Department of Health and Environmental Control and other child serving agencies.

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

None

## 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 65.16% | 72.40% | 83.46% | 83.25% | 67.90% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,613 | 5,576 | 67.90% | 100% | 79.23% | 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.**

805

**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, 2019-June 30, 2020

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

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

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

Historically South Carolina has had problems identifying noncompliance, notifying providers when it occurred and following up to ensure correction when concerns were identified. Under the previous lead agency, the state did not have a coordinated system of general supervision nor did it maintain any of the data associated with findings captured in previous APRs. For these reasons, South Carolina is unable to correct findings of noncompliance identified in FFY 2015 as the state is unable to verify those instances were ever formally issued to providers. In addition, these instances cannot be corrected now due to the children no longer being enrolled in the Part C system. South Carolina was required to develop an interim general supervision plan and implement it as a condition of the corrective action plan in 2018. That interim plan was developed and implemented in the fall of 2019 when the first findings of noncompliance were issued in our state.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2015 | 35 |  |  |
|  |  |  |  |
|  |  |  |  |

## 7 - Prior FFY Required Actions

**Response to actions required in FFY 2018 SPP/APR**

## 7 - OSEP Response

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR the status of correction of findings issued October 1, 2019 based on FFY 2017 data. The State did not provide the status of correction of those findings. However, in its October 1, 2020 Specific Conditions progress report, the State reported it did not pull subsequent data to demonstrate correction of those findings (consistent with OSEP Memo 09-02) until they were preparing for the FFY 2019 SPP/APR submission (in October 2020 and to be submitted in Feb. 2021). After receiving technical assistance (TA), SCDHHS has developed a draft General Supervision process, which they will continue to refine, to ensure that subsequent data are reviewed to demonstrate correction of findings.  
  
Reporting updated data and on correction of noncompliance under this indicator is part of the State's FFY 2020 IDEA Part C grant award specific conditions. The State was required to submit two progress reports on October 1, 2020 and May 1, 2021 under its FFY 2020 Specific Conditions. The State timely submitted its October 1, 2020 and May 1, 2021 progress reports. OSEP will respond to the FFY 2020 Specific Conditions in its FFY 2021 IDEA Part C grant award letter.

## 7 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance, based on FFY 2019 data, for this indicator. In addition, the State must report on the status of correction of noncompliance identified in October 2020, based on FFY 2018 data, for this indicator. Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the findings of noncompliance identified in October 2019, based on FFY 2017 data were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in October 2019, based on FFY 2017 data and October 2020, based on FFY 2018 data: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8A - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 4,086 | 4,086 | 100.00% | 100% | 100.00% | Met Target | No Slippage |

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

0

**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, 2019-June 30, 2020

**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 2019 excludes 468 children whose initial IFSP was developed within 90 days of the child's third birthday.

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

None

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8A - Prior FFY Required Actions

None

## 8A - OSEP Response

## 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 SEA and the 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 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 4,617 | 4,617 | 100.00% | 100% | 100.00% | Met Target | No Slippage |

**Number of parents who opted out**

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

0

**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:  
  
1. "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.  
2. "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.  
3. "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.  
4. "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  
5. "Over 34.5 month report" from BRIDGES of children referred to BabyNet over 34.5 months of age in the assigned geographic area.  
  
Each report includes directory information (child's name, date of birth, address and telephone number) for children in the assigned geographic area for the LEA. If no children in a school district qualify for notification, a "zero report" is made which notifies the South Carolina Department of Education and the LEA that three are no children to report in the specific month range.

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

NO

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

State database

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

July 1, 2019-June 30, 2020

**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. The number of children reported for FFY 2018 excludes 159 children whose initial IFSP was developed within 45 days of the child's third birthday. Data represent all children for whom a transition plan was developed (4086), plus all children for whom an IFSP was developed after 33 months of age (468), plus all children referred after 34.5 months of age (63).  
UPDATE DURING CLARIFICATION:   
There was a typographical error in the FFY listed above. It should have read, “The number of children reported for FFY 2019 excludes 159 children who’s initial IFSP was developed within 45 days of the child’s third birthday.”

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

None

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 8B - Prior FFY Required Actions

None

## 8B - OSEP Response

## 8B - Required Actions

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

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

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

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the 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 2019 SPP/APR, the data for FFY 2018), 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 84.72% | 96.47% | 85.97% | 90.50% | 91.69% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,607 | 4,086 | 91.69% | 100% | 88.91% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

South Carolina's slippage in this indicator is likely the result of the COVID-19 pandemic. In early 2020 when the cases in South Carolina began growing the state felt it needed to shut down all school districts to slow the spread of the virus. This resulted in some difficulty in scheduling and conducting transition conferences. Staff at both SCDHHS and the South Carolina Department of Education, Office of Special Education Services spoke on a regular basis to address these issues/concerns. SCDHHS issued guidance related to transition conferences in its March 30, 2020 Medicaid Bulletin. That bulletin allowed transition conferences to be performed via telehealth to ensure social distancing practices. This type of ongoing communication and collaboration continues as the COVID-19 crisis has lingered throughout 2020. Both agencies also just signed a Memorandum of Understanding outlining the responsibilities of both agencies as it relates to transition from Part C to B.

**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.**

759

**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.**

351

**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, 2019-June 30, 2020

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

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

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

Historically South Carolina has had problems identifying noncompliance, notifying providers when it occurred and following up to ensure correction when concerns were identified. Under the previous lead agency, the state did not have a coordinated system of general supervision nor did it maintain any of the data associated with findings captured in previous APRs. For these reasons, South Carolina is unable to correct findings of noncompliance identified in FFY 2015 as the state is unable to verify those instances were ever formally issued to providers. In addition, these instances cannot be corrected now due to the children no longer being enrolled in the Part C system. South Carolina was required to develop an interim general supervision plan and implement it as a condition of the corrective action plan in 2018. That interim plan was developed and implemented in the fall of 2019 when the first findings of noncompliance were issued in our state.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2015 | 5 |  |  |
|  |  |  |  |
|  |  |  |  |

## 8C - Prior FFY Required Actions

None

## 8C - OSEP Response

OSEP's response to the State's FFY 2018 SPP/APR required the State to include in the FFY 2019 SPP/APR the status of correction of findings issued October 1, 2019 based on FFY 2017 data. The State did not provide the status of correction of those findings. However, in its October 1, 2020 Specific Conditions progress report, the State reported it did not pull subsequent data to demonstrate correction of those findings (consistent with OSEP Memo 09-02) until they were preparing for the FFY 2019 SPP/APR submission (in October 2020 and to be submitted in Feb. 2021). After receiving technical assistance (TA), SCDHHS has developed a draft General Supervision process, which they will continue to refine, to ensure that subsequent data are reviewed to demonstrate correction of findings.

## 8C - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance, based on FFY 2019 data, for this indicator. In addition, the State must report on the status of correction of noncompliance identified in October 2020, based on FFY 2018 data, for this indicator. Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the findings of noncompliance identified in October 2019, based on FFY 2017 data were corrected.   
  
When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in October 2019, based on FFY 2017 data and October 2020, based on FFY 2018 data: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# 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 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 EDFacts 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.**

NO

**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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1(a) Number resolution sessions resolved through settlement agreements | 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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

N/A

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= |  |

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  |  |  | N/A | N/A |

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

South Carolina reported no formal complaints in FFY 2019.

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

This Indicator is not applicable to the State.

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

Sampling 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.

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 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1 Mediations held | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2019-20 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 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 (pre-COVID). During BRIDGES Integration work in early FFY 2019, state office staff reached out to groups of providers for input via conference call or email to solicit their input on potential changes and how those changes might impact their work.   
  
Stakeholder groups have met to provide input on the state's SSIP and on various improvement strategies necessary to meet our state's SIMR. That includes surveys, emails, and conference calls. The same strategies were used to collect feedback on the RBI training process.   
  
When COVID-19 impacted the service delivery system, SCDHHS conducted webinars and developed online portals for providers to submit their COVID related questions and feedback. Their input was also solicited while developing COVID-19 guidance in March 2020 as well as when subsequent guidance was provided to the Part C system.   
  
Input from physicians across the state resulted in modifications to the IDEA, Part C online referral portal. That feedback noted the form was too long and had too many required fields, so the program responded by addressing both concerns and updating the online webform.

N/A

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target>= |  |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | 0 |  |  |  | N/A | N/A |

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

South Carolina held no mediations in FFY 2019.

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2019. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 10 - 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:**

Part C Director

**Email:**

Jennifer.Buster@scdhhs.gov

**Phone:**

803-898-3068

**Submitted on:**

04/23/21 3:50:21 PM

# ED Attachments

  