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

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

**For reporting on   
FFY 2021**

**South Dakota**

U.S. Department of Education seal

**PART C DUE   
February 1, 2023**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State’s systems designed to drive improved results for infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. This introduction must include descriptions of the State’s General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

## Intro - Indicator Data

**Executive Summary**

The Individuals with Disabilities Education Act (IDEA) Part C is known as the Birth to Three program in South Dakota with the Department of Education as the lead agency. The program is housed in the Office of Early Childhood Services within the Division of Special Education (IDEA Part B) and Early Learning. The ECS office is comprised of Part C, Part B 619 and the Head Start Collaboration Office. The administrator of the ECS office also serves as the Part C Coordinator.   
  
The Birth to Three program has contracts with six regional Birth to Three service coordination programs throughout the state. These regional programs provide service coordination for all 66 counties in South Dakota. South Dakota Birth to Three has a strong partnership with school districts as all eligibility and transition evaluations for Birth to Three are conducted by school district personnel. This creates a link for family engagement and communication between families, Birth to Three and the child’s resident school district.  
  
South Dakota Birth to Three utilizes an online data system in which Individualized Family Service Plans are entered. This secure system allows for real time information for providers, service coordinators and state staff. Through this system, South Dakota can verify that regional programs and providers are consistently achieving high levels of compliance with IDEA requirements.  
  
The federal Office of Special Education Programs (OSEP) evaluates states data using the Results-Driven Accountability (RDA) Matrix. The RDA Matrix is individualized and annually each state receives a Determination of Meets Requirements, Needs Assistance or Needs Intervention. The determination is based on combined scoring of two components, 1) Compliance and 2) Results for an overall score. States scoring 80% or greater are Determined to Meet Requirements. States with at least 60% but less than 80% would be Needs Assistance and State’s with less than 60% are Needs Intervention. South Dakota received 100% in the Compliance component and 75% in Results for an overall percentage of 87.5%. This resulted in South Dakota's 2022 OSEP Determination of Meets Requirements for Part C of IDEA. Over the past six years with the assistance of OSEP-funded technical assistance centers such as DaSy, ECTA and CIFR as well as collaboration with the National BDI Users Group, BDI States and BDI Publisher South Dakota has focused on improving data surrounding child and family outcomes. South Dakota will continue to work with these groups towards continued improvement for children and families served.  
  
The reader will note, December 1, 2021, child count revealed an 11% increase from the previous year, and 2022 data, which has not been reported yet, indicates additional increases with numbers higher than pre-pandemic rates. The state has experienced a significant increase in referrals and children entering the program at older ages and with higher degree of delays. These phenomena could be attributed as remnant of the pandemic when referrals to the Birth to Three program were not occurring with the same frequency.   
  
The reader will also note, throughout the SPP/APR the steps taken by the state team to ensure significant stakeholder input for target setting, SSIP work and new methodologies for gathering data to measure indicator C4 Family Outcomes. Continued relationships with OSEP-funded technical assistance centers and guidance from OSEP contributed to the state’s ability to successfully implement the State Systemic Improvement Plan and continue to improve data analysis and quality.

Additional information related to data collection and reporting

**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.**

GENERAL SUPERVISION SYSTEM  
The South Dakota Birth to Three program policies and procedures are based on the federal regulations for Part C of the Individuals with Disabilities Education Act (IDEA) at 34 CFR Part 303 and state rules at Article 24:14. The following is an overview of the State’s general supervision system:  
  
INFRASTRUCTURE  
The lead agency is the Department of Education. The Birth to Three program has divided the state into six regions which include all 66 counties. Every five years, the Birth to Three program puts forth a Request for Proposal (RFP) to provide service coordination. This RFP is advertised to the public and interested organizations through the State of South Dakota Bureau of Administration's procurement management office. Upon approval, one-year contracts are approved with recipients submitting financial and budgetary information through quarterly progress reports. Early intervention direct service providers are required to submit certification, licensure, and background checks to ensure they meet the state’s qualified standards. These documents are reviewed by Birth to Three state staff. Early intervention providers sign an annual Provider Agreement to abide by all federal and state laws and regulations which include requirements related to serving children in natural environments, implementation of the state's evidence-based model, confidentiality, conflict of interest, code of ethics/conduct and fiscal responsibilities including record keeping. In addition, the state Birth to Three office provides oversight to school district programs providing Birth to Three services to children who meet specific eligibility requirements.  
  
In the summer of 2015, in conjunction with the State Systemic Improvement Plan Phase II, South Dakota restructured the Birth to Three program state leadership team. In order to better meet the needs of the Birth to Three program and support the systemic changes of the SSIP, a team member was designated to provide statewide technical assistance, a team member was devoted to data analysis and data quality, and another team member to the professional development associated with the evidence-based practices and the training that is ongoing. Each program specialist is, however, cross-trained for each area to ensure full assistance to Birth to Three partners. In the summer of 2019, the Part C program restructured again and brought a fiscal analyst to the team. This person is responsible for the oversight of all provider invoices and conducts focused monitoring and risk assessment of providers.  
  
DATA SYSTEM  
The State Birth to Three program has an online data system that includes data on programmatic and demographic elements and includes all children's IFSP information and data points. The system also facilitates the online billing process for early intervention services. The billing system allows early intervention providers to only bill for what was written by the IFSP team in regard to frequency / intensity and location of early intervention services. Each provider reimbursement request is reviewed by Birth to Three state office staff to ensure state and federal regulations and guidelines are met before payment is approved. All provider reimbursement requests are linked to IFSPs thus providers are unable to bill for services that are not linked to an IFSP.   
  
The data system allows service coordinators to view reports relating to child count verification and SPP/APR indicators. There are several reports that serve as edit checks in order to assist service coordinators in ensuring the data they enter are valid and reliable. Examples of this would be Child Count Verification; Transition Conference Report; Exit Child List; etc. The state determined to purchase a new comprehensive data system that will allow the state to maximize data for the state’s general supervision of Part C program, include a parent portal, increase availability of quality data and allow for a more robust monitoring protocol. This system will allow the state to interface with the new Department of Education Learning Management system and Longitudinal Data System which will offer significant new opportunities for program quality. This system is anticipated to be functional fall 2024.  
  
MONITORING  
The Birth to Three state office conducts ongoing monitoring activities on all programs and services. The six regional programs are held responsible for implementing the Birth to Three program consistent with federal and state requirements. The state data system is the primary source of monitoring data. State staff are able to review compliance and reports on most SPP/APR indicators through the data system. In some instances, state staff conduct additional drill-down and inquiry to obtain information on reasons for potential delay or other factors important to consider in monitoring for requirements.   
  
When an instance of noncompliance is identified, the state works with the entity to ensure and verify correction of the noncompliance according to the two federal requirement prongs of correction (OSEP 09-02). Depending upon the state’s verification results the state may issue a PreFinding Correction letter noting the corrected noncompliance according to the two federal requirements but not issuing a finding. If correction is not verified, then a Finding Letter is issued that requires verification of correction in both prongs according to federal requirements within one year. A corrective action plan (CAP) may be required depending on the scope and level of noncompliance. A CAP for compliance issues or an improvement plan for results performance slippage is developed involving the regional service coordinators and others (e.g., early intervention providers, school districts, etc.). State Birth to Three staff approve the corrective action plan or improvement plan and provide technical assistance, assuring all improvement activities are completed in accordance with federal requirements.  
  
The state may determine to conduct an onsite focused monitoring based on findings, data slippage, parent information, past data reports etc. An onsite focused monitoring involves reviewing specific children’s files, interviewing service coordinators, early intervention providers, parents, etc. Findings resulting from the onsite focused monitoring are issued as necessary.   
  
Verification of correction of any noncompliance finding is made in accordance with the required 2 prongs of correction in OSEP 09-02.  
  
If a regional program or provider does not correct the noncompliance within one year, the state uses the additional incentives and/or sanctions as identified in writing to the agency. The content of the letter would include the following information:  
1. Failure to voluntarily correct an identified deficiency constitutes a failure to administer the program in compliance with federal law.  
2. The action the Part C Program / State Department of Education intends to take in order to enforce compliance with the state and federal law.  
3. The right to a hearing prior to Part C exercise of its enforcement; and  
4. The consequences of the Part C enforcement action on continued and future state and federal funding.  
  
DISPUTE RESOLUTION  
Public and parent concerns may be submitted to the state office at any time. Program contact information and a 1-800 number is available on the Birth to Three website and public awareness materials. Dispute resolution processes consistent with federal and state regulation are available including state administrative complaint resolution, a due process hearing, and mediation.

**Technical Assistance System:**

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

The South Dakota Birth to Three program provides ongoing comprehensive technical assistance (TA) that includes the provision of specific technical assistance to regional service coordination programs and direct service providers. State staff are available and provide daily real-time TA via telephone calls, emails, virtual meetings, and onsite visits as requested.   
  
Scheduled service coordinator and direct service provider virtual meetings are offered to provide TA on specific topics including improvement strategies for data quality, SPP/APR indicator training, child outcomes, outreach with other state partners and collaboration with family/community support entities. These calls are pre-scheduled and include not only Part C state staff but also representation from early intervention partners and family resources such as the state’s Medicaid office responsible for reimbursements, IDEA PTI Center, EHDI, Deaf-Blind Project, SD School for the Deaf, Part B 619, Head Start Collaboration Office, and the state UCEDDS (University Center for Excellence in Development Disabilities Research and Service) to name a few.   
  
The South Dakota Part C program, historically, relies heavily on technology to provide ongoing support to service coordinators and providers. Examples of this would include a state listserv which is used to send information to service coordinators, school districts, SICC members and early intervention providers statewide. The listserv is used to provide pertinent program information about policy and procedure updates, rules and regulations, program needs/shortages, and training opportunities.   
  
Service coordinators quarterly submit additional professional development activities and case load data with TA responding as needed. All providers are added to the listserv along with SPED directors from all public-school districts. As new providers are signed on, their names are added to the list to ensure access to this source of communication.   
  
Service coordinator contact information is shared among all state Birth to Three personnel, giving ease of access among providers and coordinators to share best practices and collaborate on issues.  
  
The state staff have developed and provided regional staff a self-monitoring checklist that covers the SPP/APR indicators and other federal/state rules and regulations. This is recommended to be used by regional staff to determine the status of their implementation of Part C requirements to guide their on-going supervision and continuous improvement. Regional programs can request technical assistance from state staff as needed to address any issues identified. The state team also uses the results of the annual APR performance including the results from the annual parent surveys to help plan technical assistance activities.  
  
The state office continues to communicate regularly with coordinators, providers, and families. Along with scheduled virtual meetings, if circumstances arise, the state will produce a pre-recorded TA session that is sent via a secure link to service coordinators, providers and school district staff with pertinent information and guidance and state office contact for questions. The Part C director, in role as Administrator of the Office of Early Childhood Services, takes part in monthly Department of Education management meetings which ensures alignment of program to other initiatives taking place in the state’s education system.

**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.**

The South Dakota Birth to Three program’s Professional Development system has a number of components including:  
1. All providers who work in the program must meet qualified personnel standards as required by federal and state regulations.  
2. All new service coordinators receive several days of one-on-one trainings along with comprehensive online module training on evidence-based practices.   
3. All new service coordinators receive peer coaching to reach fidelity in implementing evidence-based practice.   
4. All new service providers receive one-on-one fiscal accountability and reimbursement training.  
5. Annual training is held for all Birth to Three service coordinators on a statewide and/or regional basis in a face-to-face or virtual setting.   
6. Monthly service coordinator calls are held with Birth to Three state staff and include updates on policies and procedures, and presentations on relevant topics by Parent Connection (State PTI) and other state agency partners (i.e. Department of Health, Medicaid, Department of Social Services Child Protection Division, Head Start, Part B 619 etc.). Topics have included implementation of routines-based home visiting, Routines Based Interview (RBI) implementation and fidelity, family outcomes, functional outcomes, child development, parent rights, hearing services, vision services, outcome writing, state and federal rules, interpreter services, transition planning, and resources and support for families during difficult times, etc.  
7. Statewide and regional public trainings are offered on topics such as early literacy, family engagement, evidence-based practices, early childhood guidelines and a Birth to Three program overview. These trainings are open to service coordinators and direct service providers. The reader will note, in the SSIP portion of this report, the state took extra measures to address concerns service coordinators and providers were witnessing families experiencing due to the lingering affects brought forth by the pandemic.   
8. Periodic training events are also held as needed for service providers related to use of private insurance, Medicaid reimbursement, and tele-therapy.  
9. An online platform is used continuously to support the ongoing professional development needs of service coordinators and direct service providers. This comprehensive learning opportunity provides a support system and promotes participation in ongoing professional development regardless of physical location. Within this online tool, modules have been developed to meet the specific needs of the early interventionist in implementing identified evidence-based practices and measuring child and family outcomes. Using this platform, the South Dakota Birth to Three program is building and implementing a continuum of learning opportunities for our early interventionists regardless of their role in the Birth to Three program. Established as a private learning community, participants can also access research, a video library, discussion boards and blogs. Resources are available for new and seasoned early interventionists. This online tool is facilitated by Birth to Three state professional development staff. The online platform provides cost-effective training opportunities for the SSIP. It also proves a reliable tool to present current and accurate information to all early interventionists.  
10. Periodic training opportunities are provided in collaboration with other state and community agencies including the Center for Disabilities, Part B, Parent Connection, Head Start, Medicaid, MIECHV, Child Care Services and Human Services.  
  
The reader will note, due to the use of technology in training, there has been no lost learning time due to the pandemic. Professional development activities continued to be carried out in the virtual learning environments. The SSIP portion of the report will reveal how the state has increased the number of participants in the professional development and moved closer to statewide implementation of the evidence-based practice.

**Broad Stakeholder Input:**

**The mechanisms for soliciting broad stakeholder input on the State’s targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 11, the State’s Systemic Improvement Plan (SSIP).**

The South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

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

YES

**Number of Parent Members:**

10

**Parent Members Engagement:**

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

South Dakota has historically had strong parent representation and engagement on the State Interagency Coordinating Council (SICC). Existing membership has 5 parent members representing 20% of the council; the SICC chairperson is a parent representative. In addition to these members, one council members has an older child who received Part C services. Since its inception, the SICC membership has included a representative from the Parent Training and Information Center (PTI). Current membership also includes a Department of Health representative who oversees the MIECHV home visiting program for the state. SICC Human Services representative coordinates the state Family Support Program’s services and supports. Two parent members also serve as foster parents and one member is actively involved in ongoing research projects surrounding indigenous people. Two SICC members represent Head Start/Early Head Start, one of which is with a tribal program. These last members mentioned, while not parents, have strong connections with families throughout the state.   
  
All SICC members have been and continue to be active participants in SPP/APR and SSIP activities. During the course of the 2021 year, small workgroups, containing at least 33% parent representation, assembled to focus on one or several results indicators. These small workgroups were assisted by a content expert from ECTA and DaSy, OSEP sponsored technical assistance centers. State Part C staff role during these meetings were to prepare and provide data, answer workgroup member questions and record the discussions taking place. Each work group was tasked with:  
1) review of federal requirements for setting targets;  
2) review of specific result indicator language and calculations;  
3) analyzing of data (i.e. current, historical and projected data) at both the state and federal level;  
4) exploration and discussion of current state factors (i.e. possible provider shortages, access and participation of infants and toddlers), and  
5) determining potential targets to bring forward to the full SICC for discussion.  
  
Dynamic discussions took place between parent members and other members during these small work group sessions as data were analyzed and state factors and future needs were explored and discussed then brought forward to the full SICC to consider and voted on for the final target package.   
  
The state continued to meet quarterly with SICC members, including parents, throughout the 2022 year. At the November 2022, full-day retreat, SICC members met to analyze FFY 2021 data including those in relation to targets set the previous year and provide feedback on progress towards the State Systemic Improvement Plan. Members met in small and large workgroups and participated in a brainstorming activity facilitated by a content expert from the OSEP sponsored Early Childhood Technical Assistance Center (ECTA). All SICC meeting presentation and minutes, including the November 2021 and November 2022 dates, can be found on the South Dakota Boards and Commission site at https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57.  
  
At the conclusion of the year-long process, parent members expressed their gratitude for the manner in which the state involved all stakeholders in evaluating and planning future activities and valued how the state incorporated their recommendations into the state plan. Parents indicated along with their continued understanding of the early intervention program, they had a much greater appreciation for the data that is collected and all that is involved behind the scenes to ensure infants and toddlers with disabilities and their families receive appropriate services.

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

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

Increasing the capacity of all Part C parents/families to improve the outcomes of their infants or toddlers with disabilities and their families is the goal of the South Dakota Part C program. The most influential and impactful way South Dakota is increasing all parents / families capacity is through implementation of evidence based practices. South Dakota, with stakeholder input, purposefully selected evidence-based practices when implemented as intended, increase parent/families competence and confidence working with their infant and toddler with disabilities. As evidence in the progress of the State Systemic Improvement Plan, South Dakota is making great strides in building all families capacity. Providers implementing the EBP witness families increased involvement, awareness and knowledge. Providers utilizing the EBP speak to families better understanding their infant and toddlers development and are building on early intervention sessions by incorporating activities in their daily routines. More evidence of this presented itself in the C4 Family Outcome data. South Dakota uses the ECO Family Outcome Survey - Revised tool to gather data for the C4 indicator. Overall, 98% of families responded that the South Dakota Part C program was very helpful or extremely helpful “listening to you and respecting your choices” with Native American families responding 100%.   
  
South Dakota holds strongly to the belief family engagement and the parent-child relationship and interactions is one of the most powerful predictors to improve outcomes. The reader will note throughout the State Systemic Improvement Plan the state has described multiple activities implemented with the result of increasing all parent/family capacity and improve outcomes for all infants and toddlers with disabilities and their families. The reader will note, in the SPP/APR SSIP Theory of Action portion of the report, the state will describe actions underway to increase family capacity to improve outcomes for infants and toddlers with disabilities and their families.

**Soliciting Public Input:**

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

South Dakota Part C embarked on target setting process from September of 2020 through January 2022. The state sought volunteers to serve on small workgroups, interested individuals contacted the Part C director and in September 2020 work began. Small work groups met regularly, and final recommendations were brought forward at the November 2021 SICC meeting for the FFY 2020-2025 target package. During the 2022 year, SICC continued to meet quarterly, analyzing data and providing input to the state on progress toward SSIP progress. During the November 2022 meeting and January 2023 meetings, stakeholders convened to analyze state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. At this time SICC determined no additional adjustments were needed.  
  
Other stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).  
  
To ensure public input, South Dakota Part C follows state open meeting laws. SICC meeting agendas, containing meeting date/times, location, information for joining in person or telephonic or virtually and directions for special accommodations are posted on the South Dakota Boards and Commission website and in the public area of the Department of Education building a minimum of 72 hours prior to the meeting date (not including weekend or holidays). SICC agendas contain a Public Comment agenda line item. During this time the SICC chair pauses the meeting to take any comments from members or public who may be joining. Any comments are recorded in the meeting minutes and posted on the Boards and Commission website.   
  
South Dakota Birth to Three website provides multiple opportunities for the public to interact with a state Part C team member and also follow the SICC. Through a 1-800 number and email link the public has direct linkage to a state Part C team member. A directly link to the South Dakota Boards and Commission website is also available where the public can view any SICC meeting agenda, minutes and presentation.

**Making Results Available to the Public:**

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

South Dakota Birth to Three posts all SICC meeting work which includes target setting, data analysis, improvement strategies and evaluation to the South Dakota Boards and Commission website located https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57 no more than 10 days from the meeting date. A link to this site is available on the South Dakota Department of Education / Part C page where the State Performance Plan/Annual Performance Report (SPP/APR) is posted no more than 120 days from submission. Program SPP/APRs from the last five years are posted on this site, https://doe.sd.gov/birthto3/ , under “Public Reporting”.   
  
The South Dakota Birth to Three program annually reports to the public on performance of each region for Indicators C1 to C10 as compared to state performance. These reports titled Regional Performance are located on the Birth to Three website at http://doe.sd.gov/birthto3/ under Public Reporting and posted within the required federal timelines.

**Reporting to the Public:**

**How and where the State reported to the public on the FFY 2020 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2020 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.**

South Dakota Part C reports to the public on the FFY 2020 performance of each EIS region for Indicators C1 to C10 as compared to the state performance via South Dakota Department of Education website. These reports titled Regional Performance are located on the Part C page at https://doe.sd.gov/birthto3/ under Public Reporting within the required federal timelines.   
  
Additionally, public notices are posted in the five (5) major South Dakota newspapers notifying the public of the website where State Performance Plan/Annual Performance Report (SPP/APR) and regional reports can be accessed and availability of hard copies of the reports upon request. Newspapers printing the public notices are as follows: Sioux Falls Argus Leader; Aberdeen American News; Huron Plainsman; Pierre Capital Journal; and Rapid City Journal.  
  
Notification is also sent to SICC and Stakeholders, all regional Birth to Three programs, service coordinators, and providers of the availability of these reports on the Birth to Three website https://doe.sd.gov/birthto3/ and the availability of hard copies upon request.

## Intro - Prior FFY Required Actions

None

## Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support the State lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report.  
OSEP accepts the SICC form, which will not be posted publicly with the State's SPP/APR documents.

## Intro - Required Actions

# Indicator 1: Timely Provision of Services

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State’s monitoring, describe the procedures used to collect these data. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

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

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

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs’ (OSEP’s) response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 1 - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 99.17% |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner** | **Total number of infants and toddlers with IFSPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 423 | 463 | 99.17% | 100% | 99.14% | 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.***

36

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

During this reporting period, the 30-day timeline criteria was missed 36 times due to exceptional family circumstances. Family reasons for delay included illness, family vacations, physician appointments, family schedule and the lingering effects of the COVID 19 virus.  
  
In addition, the state missed the 30-day timeline four additional times that was not due to exceptional family circumstances. The reasons for delay are one school had two children miss the timeline because they did not have a therapist available to start the service within the required timeline. Also, one provider was noted as having two children miss the timeline because the provider was unable to provide appropriate documentation that the timeline was missed due to exceptional family circumstances.

**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).**

South Dakota has defined 'timely' as services beginning within 30 days of the child's IFSP start date, with parental consent.

**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).**

For Indicator C1, one quarter of the fiscal year was used to determine compliance with this indicator. The state selected the 2nd quarter of FFY 2021 (Oct. 1, 2021, to Dec. 31, 2021).

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

For Indicator C1, the State has historically selected the second quarter of the fiscal year to determined compliance with this indicator. This data set has been considered representative of the full reporting year because the same variables are in place for this quarter as for all quarters. For FFY 2021 the state selected the second quarter, (October 1, 2021, through December 31, 2021).

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 2 | 2 | 0 | 0 |

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

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

South Dakota has six regional Part C / Birth to Three programs located across the state, and in two of the regions, the state identified three children that missed the 30-day timeline during this reporting period. Analysis of the regions data determined that three children did not receive their services in a timely manner. Therefore, according to federal requirements the two regions were issued a written finding of noncompliance. Both regions were required to review and update their procedures on timely services to ensure future compliance. The state reviewed and accepted each region’s updated procedures. A few months after the procedures were accepted, the state analyzed a random sample of subsequent data collected through the state's Part C system and both regions achieved 100% compliance on the data reviewed. Based upon this review of subsequent data and the regions updated procedures, the state determined the regions were now correctly implementing the requirements for this indicator as required. Through the state's Part C data base and provider log notes, the state also reviewed each individual case of noncompliance and verified that each child, although late, did receive their required services. Therefore, the state sent both regions a letter, closing the finding, within the one-year requirement.

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

Through the state's Part C data base and provider log notes, the state reviewed each individual case of noncompliance and verified that each child, although late, did receive their required services.

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

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

## 1 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

South Dakota has six regional Part C / Birth to Three programs located across the state, and in two of the regions, the state identified three children that missed the 30-day timeline during this reporting period.  
  
Analysis of the regions data determined that the three children did not receive their services in a timely manner. Therefore, according to federal requirements these two regions were issued a written finding of noncompliance. Both regions were required to review and update their procedures on timely services to ensure future compliance. The state reviewed and accepted each region’s updated procedures. A few months after the procedures were accepted, the state analyzed a random sample of subsequent data collected through the states Birth to Three data system and both regions achieved 100% compliance on the data reviewed. Based upon this review of subsequent data and the regions updated procedures, the state determined the regions were now correctly implementing the requirements for this indicator as required. Through the states Birth to Three data base and provider log notes, the state also reviewed each individual case of noncompliance and verified that each child, although late, did receive their required services. Therefore, the state sent both regions a letter, closing the finding, within the one-year requirement.

## 1 - OSEP Response

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

## 1 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 2: Services in Natural Environments

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 96.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= | 96.80% | 96.80% | 97.00% | 97.00% | 97.00% |
| Data | 100.00% | 99.92% | 99.76% | 99.63% | 99.89% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 97.00% | 97.00% | 97.25% | 97.25% | 97.50% |

**Targets: Description of Stakeholder Input**

The South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

During the SICC November 2022 meeting, stakeholders reviewed the FFY 2021 indicator C2 data and compared that data to the target. SICC members discussed the state's performance in relation to the indicator target and recommended the state not make changes to the FFY 2020 through FFY 2025 targets.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 1,014 |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Total number of infants and toddlers with IFSPs | 1,018 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings** | **Total number of Infants and toddlers with IFSPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,014 | 1,018 | 99.89% | 97.00% | 99.61% | Met target | No Slippage |

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

## 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 South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

During the January 2023 SICC meeting, stakeholders gathered to analyze Indicator C3 data in relation to established targets. While the state did demonstrate a slight decrease in performance, stakeholders were in unanimous agreement leaving the targets as established. They expressed caution making any changes to the targets given the data highly represented children who were entering the Part C program during the height of the COVID-19 pandemic. Stakeholders representing providers expressed their experiences of how families have significantly more health concerns compared to pre-covid, and that had led to increased cancelations. SICC Part B 619 member stated similar trends in the data with preschool age special education students.   
  
Stakeholders held to the belief as families and early intervention partners continue to find the new post-pandemic norm, there will be a leveling out. The decrease in scores could not be predicted and as such recommend the state leave targets as established but will re-visit during the FFY 2022 year.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A1** | 2019 | Target>= | 50.48% | 50.48% | 51.00% | 51.00% | 41.00% |
| **A1** | 42.80% | Data | 51.32% | 52.34% | 37.83% | 42.80% | 41.00% |
| **A2** | 2019 | Target>= | 85.37% | 85.37% | 85.50% | 85.50% | 72.40% |
| **A2** | 73.40% | Data | 79.62% | 80.67% | 75.77% | 73.40% | 72.45% |
| **B1** | 2019 | Target>= | 58.82% | 58.82% | 60.00% | 60.00% | 75.00% |
| **B1** | 74.36% | Data | 73.43% | 75.95% | 74.91% | 74.36% | 75.00% |
| **B2** | 2019 | Target>= | 69.51% | 69.51% | 70.00% | 70.00% | 54.76% |
| **B2** | 53.20% | Data | 59.54% | 61.04% | 57.92% | 53.20% | 54.76% |
| **C1** | 2019 | Target>= | 57.26% | 57.26% | 57.76% | 60.00% | 91.20% |
| **C1** | 91.03% | Data | 88.78% | 93.20% | 90.93% | 91.03% | 91.21% |
| **C2** | 2019 | Target>= | 84.63% | 84.63% | 85.00% | 85.00% | 81.80% |
| **C2** | 80.13% | Data | 82.95% | 83.41% | 80.29% | 80.13% | 81.80% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1>= | 41.50% | 42.00% | 42.50% | 43.00% | 43.50% |
| Target A2>= | 72.50% | 72.75% | 73.00% | 73.50% | 74.00% |
| Target B1>= | 75.00% | 75.50% | 76.00% | 76.50% | 77.00% |
| Target B2>= | 53.40% | 53.60% | 53.80% | 54.00% | 54.20% |
| Target C1>= | 91.25% | 91.50% | 91.75% | 92.00% | 92.25% |
| Target C2>= | 81.90% | 82.00% | 82.10% | 82.20% | 82.30% |

**FFY 2021 SPP/APR Data**

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

541

**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 | 5 | 0.92% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 138 | 25.51% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 12 | 2.22% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 78 | 14.42% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 308 | 56.93% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 90 | 233 | 41.00% | 41.50% | 38.63% | Did not meet target | 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 | 386 | 541 | 72.45% | 72.50% | 71.35% | Did not meet target | Slippage |

**Provide reasons for A1 slippage, if applicable**

South Dakota continues to focus on the quality of Indicator C3 in accurately measuring child outcomes. The state noted slippage in four outcome areas: Child Outcome A: Summery Statement 1 and 2, and Child Outcome C Summery Statement 1 and 2. Using the OSEP Meaningful Difference Calculator Child Outcome C: Use of appropriate behaviors to meet their needs, Summery Statement 2 was noted as the only outcome with a statistical meaningful difference.   
  
Seeking assistance from the Early Childhood Technical Assistance center, DaSY BDI User group and private consultant with expertise in child outcome data, stakeholders and the state Part B 619 coordinator, the state team formed several hypotheses that could have led to slippage in the FFY 2021 child outcome data. The reader should note, the hypotheses focus on FFY 2021 as the state’s first year transitioning from the BDI-2 to the BDI-3 to measure child outcomes.   
  
In communicating with the Part B 619 coordinator it was noted, Part B Indicator 7 data had similar dips in child outcomes given both programs use the BDI-2 and BDI-3 tools and the same evaluators. The state noted possible contribution to the slippage was the misunderstanding among evaluators on completing the BDI-2 or BDI-3 when a child exits the program. Given the BDI-2 and BDI-3 are norm-referenced differently, protocol was established stating children who entered the Part C program using the BDI-2 must receive a BDI-2 when exiting the program. Several instances were discovered of children who received a BDI-2 upon entry yet were evaluated using the BDI-3 upon exit. Those results are not considered valid and had to be discarded which led to a significant decrease in the overall percent of children exiting with a qualifying score. Further analysis of those children’s performance led the state to believe had those children been tested using the correct evaluation tool they would have, in fact, assisted the state in meeting the established targets.  
  
The second contributing factor towards slippage is the publishers’ noted differences between the BDI-2 and BDI-3 tools with regard to the demographic characteristics of the standardization samples as well as the test blueprint, test content and item scoring criteria. The BDI-2 and BDI-3 standardization samples are composed of different examinees, tested approximately 15 years apart. The BDI-3 standardization sample reflects recent US census estimates and 2020 US population projections and the continued shift of populations toward other racial/ethnic groups. The BDI-3 includes a greater balance of items oriented towards younger children and expansion of domains to reflect current literature. Revisions to the BDI-3 add greater objectivity and precision to the tool. The state believes this will lend to more accurate reporting reflected in the a through e developmental trajectories and as the state moves further from the pandemic and transitions away from the BDI-2 tool, scores will begin to reflect child progress more accurately. In addition, the reader will note Data Quality is one strand within the state’s SSIP. The state continues to focus on implementation of the BDI. Over the coming year the state will continue to promote virtual BDI-3 training options. In addition, the state Part C program, in collaboration with Part B 619, will be hosting a statewide, in-person, Early Intervention Conference August 1, 2023. This conference will have one strand focusing on implementation of the BDI. Several speakers will be presenting including experts from BDI publisher and other content experts from across the nation.   
  
These theories are supported by SICC members with knowledge of the evaluation process and the BDI tools. SICC provider members stated there was considerable confusion as to which tool was to be used and noted having the BDI-3 norm-referenced during COVID would better reflect those children served in the Part C program now.   
  
The state also notes, nationally, Part C programs have experienced a dip in performance in recent years, particularly in Outcome A Progress Category. It is unclear if this is due to lingering effects of the COVID-19 pandemic. However, the Part C and Part B 619 program believe as the state moves further from the pandemic and transition away from the BDI-2 tool, scores will begin to reflect child progress more accurately.

**Provide reasons for A2 slippage, if applicable**

South Dakota continues to focus on the quality of Indicator C3 in accurately measuring child outcomes. The state noted slippage in four outcome areas: Child Outcome A: Summery Statement 1 and 2, and Child Outcome C Summery Statement 1 and 2. Using the OSEP Meaningful Difference Calculator Child Outcome C: Use of appropriate behaviors to meet their needs, Summery Statement 2 was noted as the only outcome with a statistical meaningful difference.   
  
Seeking assistance from the Early Childhood Technical Assistance center, DaSY BDI User group and private consultant with expertise in child outcome data, stakeholders and the state Part B 619 coordinator, the state team formed several hypotheses that could have led to slippage in the FFY 2021 child outcome data. The reader should note, the hypotheses focus on FFY 2021 as the state’s first year transitioning from the BDI-2 to the BDI-3 to measure child outcomes.   
  
In communicating with the Part B 619 coordinator it was noted, Part B Indicator 7 data had similar dips in child outcomes given both programs use the BDI-2 and BDI-3 tools and the same evaluators. The state noted possible contribution to the slippage was the misunderstanding among evaluators on completing the BDI-2 or BDI-3 when a child exits the program. Given the BDI-2 and BDI-3 are norm-referenced differently, protocol was established stating children who entered the Part C program using the BDI-2 must receive a BDI-2 when exiting the program. Several instances were discovered of children who received a BDI-2 upon entry yet were evaluated using the BDI-3 upon exit. Those results are not considered valid and had to be discarded which led to a significant decrease in the overall percent of children exiting with a qualifying score. Further analysis of those children’s performance led the state to believe had those children been tested using the correct evaluation tool they would have, in fact, assisted the state in meeting the established targets.  
  
The second contributing factor towards slippage is the publishers’ noted differences between the BDI-2 and BDI-3 tools with regard to the demographic characteristics of the standardization samples as well as the test blueprint, test content and item scoring criteria. The BDI-2 and BDI-3 standardization samples are composed of different examinees, tested approximately 15 years apart. The BDI-3 standardization sample reflects recent US census estimates and 2020 US population projections and the continued shift of populations toward other racial/ethnic groups. The BDI-3 includes a greater balance of items oriented towards younger children and expansion of domains to reflect current literature. Revisions to the BDI-3 add greater objectivity and precision to the tool. The state believes this will lend to more accurate reporting reflected in the a through e developmental trajectories and as the state moves further from the pandemic and transitions away from the BDI-2 tool, scores will begin to reflect child progress more accurately. In addition, the reader will note Data Quality is one strand within the state’s SSIP. The state continues to focus on implementation of the BDI. Over the coming year the state will continue to promote virtual BDI-3 training options. In addition, the state Part C program, in collaboration with Part B 619, will be hosting a statewide, in-person, Early Intervention Conference August 1, 2023. This conference will have one strand focusing on implementation of the BDI. Several speakers will be presenting including experts from BDI publisher and other content experts from across the nation.   
  
These theories are supported by SICC members with knowledge of the evaluation process and the BDI tools. SICC provider members stated there was considerable confusion as to which tool was to be used and noted having the BDI-3 norm-referenced during COVID would better reflect those children served in the Part C program now.   
  
The state also notes, nationally, Part C programs have experienced a dip in performance in recent years, particularly in Outcome A Progress Category. It is unclear if this is due to lingering effects of the COVID-19 pandemic. However, the Part C and Part B 619 program believe as the state moves further from the pandemic and transition away from the BDI-2 tool, scores will begin to reflect child progress more accurately.

**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 | 1 | 0.18% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 107 | 19.78% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 123 | 22.74% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 187 | 34.57% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 123 | 22.74% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 310 | 418 | 75.00% | 75.00% | 74.16% | 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 | 310 | 541 | 54.76% | 53.40% | 57.30% | Met target | No Slippage |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Total** |
| --- | --- | --- |
| a. Infants and toddlers who did not improve functioning | 1 | 0.18% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 29 | 5.36% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 90 | 16.64% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 147 | 27.17% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 274 | 50.65% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program | 237 | 267 | 91.21% | 91.25% | 88.76% | Did not meet target | 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 | 421 | 541 | 81.80% | 81.90% | 77.82% | Did not meet target | Slippage |

**Provide reasons for C1 slippage, if applicable**

South Dakota continues to focus on the quality of Indicator C3 in accurately measuring child outcomes. The state noted slippage in four outcome areas: Child Outcome A: Summery Statement 1 and 2, and Child Outcome C Summery Statement 1 and 2. Using the OSEP Meaningful Difference Calculator Child Outcome C: Use of appropriate behaviors to meet their needs, Summery Statement 2 was noted as the only outcome with a statistical meaningful difference.   
  
Seeking assistance from the Early Childhood Technical Assistance center, DaSY BDI User group and private consultant with expertise in child outcome data, stakeholders and the state Part B 619 coordinator, the state team formed several hypotheses that led to slippage in child outcome data. The reader should note, the hypotheses focus on FFY 2021 as the state’s first year transitioning from the BDI-2 to the BDI-3 to measure child outcomes.   
  
In communicating with the Part B 619 coordinator it was noted, Part B Indicator 7 data had similar dips in child outcomes given both programs use the BDI-2 and BDI-3 tools and the same evaluators. The state noted possible contribution to the slippage was the misunderstanding among evaluators on completing the BDI-2 or BDI-3 when a child exits the program. Given the BDI-2 and BDI-3 are norm-referenced differently, protocol was established stating children who entered the Part C program using the BDI-2 must receive a BDI-2 when exiting the program. Several instances were discovered of children who received a BDI-2 upon entry yet were evaluated using the BDI-3 upon exit. Those results are not considered valid and had to be discarded which led to a significant decrease in the overall percent of children exiting with a qualifying score. Further analysis of those children’s performance led the state to believe had those children been tested using the correct evaluation tool they would have, in fact, assisted the state in meeting the established targets.  
  
The second contributing factor towards slippage is the publishers’ noted differences between the BDI-2 and BDI-3 tools with regard to the demographic characteristics of the standardization samples as well as the test blueprint, test content and item scoring criteria. The BDI-3 and BDI-2 standardization samples are composed of different examinees, tested approximately 15 years apart. The BDI-3 standardization sample reflects recent US census estimates and 2020 US population projections and the continued shift of populations toward other racial/ethnic groups. The BDI-3 includes a greater balance of items oriented towards younger children and expansion of domains to reflect current literature. Revisions to the BDI-3 add greater objectivity and precision to the tool. The state believes this will lend to more accurate reporting reflected in the a through e developmental trajectories and as the state moves further from the pandemic and transitions away from the BDI-2 tool, scores will begin to reflect child progress more accurately. In addition, the reader will note Data Quality is one strand within the state’s SSIP. The state continues to focus on implementation of the BDI. Over the coming year the state will continue to promote virtual BDI-3 training options. In addition, the state Part C program, in collaboration with Part B 619, will be hosting a statewide, in-person, Early Intervention Conference for August 1, 2023. This conference will have one strand focusing solely on implementation of the BDI. Several speakers will be presenting including experts from Riverside Publishing and other content experts from across the nation.   
  
These theories are supported by SICC members with knowledge of the evaluation process and the BDI tools. SICC provider members stated there was considerable confusion as to which tool was to be used and noted having the BDI-3 norm-referenced during COVID would better reflect those children served in the Part C program now.

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

South Dakota continues to focus on the quality of Indicator C3 in accurately measuring child outcomes. The state noted slippage in four outcome areas: Child Outcome A: Summery Statement 1 and 2, and Child Outcome C Summery Statement 1 and 2. Using the OSEP Meaningful Difference Calculator Child Outcome C: Use of appropriate behaviors to meet their needs, Summery Statement 2 was noted as the only outcome with a statistical meaningful difference. The state believes, while Child Outcome C was noted with a statistical meaningful difference, the same theories apply.   
  
Seeking assistance from the Early Childhood Technical Assistance center, DaSY BDI User group and private consultant with expertise in child outcome data, stakeholders and the state Part B 619 coordinator, the state team formed several hypotheses that led to slippage in child outcome data. The reader should note, the hypotheses focus on FFY 2021 as the state’s first year transitioning from the BDI-2 to the BDI-3 to measure child outcomes.   
  
In communicating with the Part B 619 coordinator it was noted, Part B Indicator 7 data had similar dips in child outcomes given both programs use the BDI-2 and BDI-3 tools and the same evaluators. The state noted possible contribution to the slippage was the misunderstanding among evaluators on completing the BDI-2 or BDI-3 when a child exits the program. Given the BDI-2 and BDI-3 are norm-referenced differently, protocol was established stating children who entered the Part C program using the BDI-2 must receive a BDI-2 when exiting the program. Several instances were discovered of children who received a BDI-2 upon entry yet were evaluated using the BDI-3 upon exit. Those results are not considered valid and had to be discarded which led to a significant decrease in the overall percent of children exiting with a qualifying score. Further analysis of those children’s performance led the state to believe had those children been tested using the correct evaluation tool they would have, in fact, assisted the state in meeting the established targets.  
  
The second contributing factor towards slippage is the publishers’ noted differences between the BDI-2 and BDI-3 tools with regard to the demographic characteristics of the standardization samples as well as the test blueprint, test content and item scoring criteria. The BDI-3 and BDI-2 standardization samples are composed of different examinees, tested approximately 15 years apart. The BDI-3 standardization sample reflects recent US census estimates and 2020 US population projections and the continued shift of populations toward other racial/ethnic groups. The BDI-3 includes a greater balance of items oriented towards younger children and expansion of domains to reflect current literature. Revisions to the BDI-3 add greater objectivity and precision to the tool. The state believes this will lend to more accurate reporting reflected in the a through e developmental trajectories and as the state moves further from the pandemic and transitions away from the BDI-2 tool, scores will begin to reflect child progress more accurately. In addition, the reader will note Data Quality is one strand within the state’s SSIP. The state continues to focus on implementation of the BDI. Over the coming year the state will continue to promote virtual BDI-3 training options. In addition, the state Part C program, in collaboration with Part B 619, will be hosting a statewide, in-person, Early Intervention Conference for August 1, 2023. This conference will have one strand focusing solely on implementation of the BDI. Several speakers will be presenting including experts from Riverside Publishing and other content experts from across the nation.   
  
These theories are supported by SICC members with knowledge of the evaluation process and the BDI tools. SICC provider members stated there was considerable confusion as to which tool was to be used and noted having the BDI-3 norm-referenced during COVID would better reflect those children served in the Part C program now.

**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 | 963 |
| 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. | 241 |

| **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)**

NO

**Provide the criteria for defining “comparable to same-aged peers.”**

South Dakota’s business rules define comparable to same-aged peers using a Standard Score of 78. South Dakota rules include five developmental areas and 13 sub-domains. A child's Standard Score on the Personal-Social Domain is used to answer Indicator 3A. The Cognitive and Communication Domains are used to indicate a child's progress in Indicator 3B and the Adaptive and Motor Domains indicate a child's progress for Indicator 3C.

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

In South Dakota, local education agencies (LEA) are required by administrative rule to conduct the evaluation to determine an infant or toddlers’ eligibility for Part C services. The state is transitioning from the Battelle Developmental Inventory Second Edition (BDI-2) to the Battelle Developmental Inventory Third Edition (BDI-3). These tools are utilized by Part B 619 and Part C programs for reporting child outcomes. Children are evaluated using this consistent method which enhances the validity of the data. The entry scores are determined by the standard deviation scores from each outcome area for each child. An “exit” BDI assessment is given to infants and toddlers who have been in the Part C program for at least six months are exiting. This exit assessment serves two purposes, one for the Part C program to determine child’s developmental status and second for children transition at age three to determine eligibility for Part B 619 programs.   
  
Entry and exit BDI scores are stored in the respective BDI databases. From these databases, state Part C staff retrieve scores of children who have exited the Part C program during the reporting period. Part C state staff collaborate with evaluators and the Part B 619 coordinator to ensure all appropriate testing was completed and scores reported. BDI entry and exit scores are then compared for those exiting children and formulated according to the state’s BDI business rules to determine the child’s progress in the three outcome areas.  
  
During FFY 2021 (July 1, 2021, to June 30, 2022), 963 children exited the Birth to Three program of which 541 children had qualifying entry and exit BDI-2 or BDI-3 scores. Entry scores for the 541 exiting children were compared to their exit scores using the defined state business rules. Resulting data were entered into the EMaps Indicator C3 table and reported accordingly. The 541 exiting children computes to a 56.2% completion rate when using the full exit data as the denominator. The state recognizes this is a decrease from FFY 2020 completion rate.   
  
Additional data analysis of FFY 2021 exit data indicates of the 422 children who exited the Birth to Three program but did not receive a qualifying exit score, 241 or 57.1% were in the Birth to Three program less than 6 months. If the 241 children exiting before 6 months are subtracted from the denominator of the exit data, the completion rate increases to 74.93%.

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

South Dakota is transition from the Battelle Developmental Inventory Second Edition (BDI-2) to the Battelle Developmental Inventory Third Edition (BDI-3). Effective 7/1/2021 all infants and toddlers entering the Part C program must be evaluated using the BDI-3 and receive an BDI-3 upon exit. However, for those infants and toddlers who entered the program prior to 7/1/2021 and a BDI-2 evaluation was conducted, those children must receive a BDI-2 at exit. The state anticipates BDI-2 and BDI-3 data will be reported through the FFY 2023 reporting year.

## 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 and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

States will be required to compare the current year’s response rate to the previous year(s) response rate(s), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of families that received Part C services.

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

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

If the analysis shows that the demographics of the infants or toddlers for whom families responded are not representative of the demographics of infants and toddlers receiving services in the Part C program, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to families (e.g., by mail, by e-mail, on-line, by telephone, in-person), if a survey was used, and how responses were collected.

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

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

## 4 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2006 | Target>= | 93.90% | 94.00% | 94.10% | 94.10% | 94.10% |
| A | 93.90% | Data | 98.97% | 98.78% | 99.44% | 98.95% | 97.98% |
| B | 2006 | Target>= | 89.40% | 89.50% | 90.00% | 90.00% | 90.00% |
| B | ###C04BBASEDATA### | Data | 98.27% | 98.79% | 98.60% | 96.50% | 97.96% |
| C | 2006 | Target>= | 89.30% | 89.50% | 90.00% | 90.00% | 90.00% |
| C | 89.30% | Data | 98.96% | 99.09% | 99.16% | 98.25% | 99.19% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A>= | 94.10% | 94.20% | 94.30% | 94.40% | 94.50% |
| Target B>= | 90.20% | 90.40% | 90.60% | 90.80% | 91.00% |
| Target C>= | 90.10% | 90.20% | 90.30% | 90.40% | 90.50% |

**Targets: Description of Stakeholder Input**

The South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

Stakeholders are intricately involved in all aspects of the South Dakota Part C program. Indicator C4, Family Outcomes, however, is one where stakeholders have been heavily involved. Beginning in February 2021, State team met with a small stakeholder workgroup representing parents, providers, PTI center, school districts, program prep, service coordinators and childcare services. Led by DaSy content expert stakeholders analyzed state and federal data. Additional factors that effected the state’s ability to collect C4 data from families was discussed, including COVID-19 and the impact on service coordinators’ ability to meet with families due to travel restrictions in certain parts of the state and families reluctance to have outsiders in their home. Mail delivery and the delays incurred were also discussed as hindering service coordinators' ability to reach families in a timely manner.   
  
Stakeholders recommended the state use a new tool to gather C4 data and a new method to distribute the survey to families. It was recommended South Dakota use an electronic version of the ECO Family Outcomes Survey – Revised. Given the increased comfort and increased access to technology the State supported stakeholder recommendation to move to an electronic collection tool to increase response rate over time. The State also recognized the ECO Family Outcomes Survey – Revised tool will provide better analysis of family’s responses of early intervention services. Recommendations from stakeholders were presented to the full SICC in April 2021 and were approved.   
  
Beginning July 1, 2021, South Dakota began using the ECO Family Outcomes Survey – Revised to collect Indicator C4 data, and it was made available for distribution electronically, with hard copy available if requested. Each service coordinator receives a survey link that is unique to them and contains an electronic version of the ECO Family Outcomes Survey – Revised and other demographic information. In turn those links are forwarded to families via text, email, or hard copy, based on the family’s preference. Responses remain anonymous; however, coding allows the state to identify early intervention regions and service coordinator. To ensure data quality, the link provided is set so each parent can only complete one survey.   
  
During the November 2022 and January 2023 SICC meetings and the monthly service coordinator meeting, the state presented stakeholders with the FFY 2021 Indicator C4 data. It was noted, the state did experience a decline in overall response rate and for the first time, a decline in performance measure A and C. After further analysis stakeholders held firm to the belief that while there was a slight dip in response and in performance in two areas, there was no support for re-establishing targets. It is believed, given the dramatic changes to the survey tool for this indicator there is no compatibility to previous years’ data for this indicator. Additional two to three years of data are needed to effectively analyze the data and determine if an adjustment to targets is warranted.

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| The number of families to whom surveys were distributed | 919 |
| Number of respondent families participating in Part C | 244 |
| Survey Response Rate | 26.55% |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 215 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 244 |
| 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 | 222 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 244 |
| 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 | 213 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 244 |

| **Measure** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- |
| A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2) | 97.98% | 94.10% | 88.11% | Did not meet target | 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) | 97.96% | 90.20% | 90.98% | Met target | No Slippage |
| C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2) | 99.19% | 90.10% | 87.30% | Did not meet target | Slippage |

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

FFY 2021 noted the first year of the state’s transition from a state developed tool to the ECO Family Outcomes Survey – Revised which includes a new scoring process and delivery method. Overall, results were very positive. Over 85% of families expressed a positive attitude in all 17 survey items. In eight of the 17 survey items, 95% or more of families expressed a positive attitude. Measurement A Know Their Rights, four of the five questions families expressed between 93-98% positive attitude. One area “giving your child useful information about available options when your child leaves the program” was noted at 88%. The state conducted additional analysis of the response examining by the child’s length of time in the program, child’s age when exiting the program and self-identified racial group. This revealed to the state families whose children exited the program under the age of one and whose children had been in the program less than one year rated less favorable than those whose children exited at age three and had been in the program more than one year. The state also noted, those families identifying as multi-racial also scored lower for this particular question.   
  
The state recognizes opportunities for improvement in this area and is working with service coordination regions to determine next steps to ensure all families, regardless of their child’s age upon exit, amount of time in the program or racial group are provided with necessary information related to information and supports throughout program enrollment and upon exiting the program.

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

FFY 2021 noted the first year of the state’s transition from a state developed tool to the ECO Family Outcomes Survey – Revised which includes a new scoring process and delivery method. Overall, results were very positive. Over 85% of families expressed a positive attitude in all 17 survey items. In eight of the 17 survey items, 95% or more of families expressed a positive attitude. Measurement C Help Their Children Develop and Learn, five of the six families expressed between 90-05% positive attitude. One area “giving you useful information about how to help your children get along with others was noted at 87&. The state conducted additional analysis of the response examining by the child’s length of time in the program, child’s age when exiting the program and self-identified racial group. This analysis revealed of families whose children exited the program under the age of one rated 67% favorable in this area.   
  
The state hypotheses, given the age of the child upon exit, and the developmental level, this area is one that could be overlooked. However, the state recognizes the opportunities for improvement in this area and is working with service coordination regions to determine next steps to ensure all families, regardless of their child’s age upon exit, address families concern and are provided with developmentally appropriate information and resources related to how to help their child get along with others.

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

| **Question** | **Yes / No** |
| --- | --- |
| Was a collection tool used? | YES |
| If yes, is it a new or revised collection tool? | YES |
| If your collection tool has changed, upload it here. | SDC4FOS |
| The demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. | NO |

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

The state notes, the responses are not representative of the demographics of infants and toddlers enrolled in the Part C program. Using the ECTA Response Rate and Representativeness calculator which applies proportional testing was utilized to determine if the surveys received were representative of the target population the state found those families of Hispanic origin were not representative in the C4 data. To address this the state is has established meetings with all six service coordination regions and will begin delving into each regional data performance to establish a plan by which to ensure better representativeness of Hispanic families.   
  
Other steps the state will take to promote response from a broad cross-section of families are:   
1. Training of service coordinators on how to encourage families to complete the ECO Family Outcome Survey.   
2. Increase promotion of the electronic delivery method to reach families with the ECO Family Outcome tool.  
3. In addition, South Dakota will continue to analyze data and collect regional program input as to why the response rate of parents of infants and toddlers with response rates below the state average is low.   
4. The state will work with stakeholders to identify additional communication and/or dissemination strategies for increasing the response rate of all parents – particularly parents of infants and toddlers with response rates below the state average.   
5. The state will continue to encourage parents of infants and toddlers of all race/ethnicities to complete the survey.

**Survey Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Survey Response Rate | 28.92% | 26.55% |

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

Beginning July 1, 2021, South Dakota began using the ECO Family Outcomes Survey – Revised to collect indicator C4 data, and it was made available for distribution electronically, with hard copy available if requested. Each service coordinator receives a survey link that is unique to them and contains an electronic version of the ECO Family Outcomes Survey – Revised and other demographic information. In turn those links are forwarded to families via text, email, or hard copy, based on the family’s preference. Responses remain anonymous; however, coding allows the state to identify early intervention regions. To ensure data quality, the link provided is set so each parent can only complete one survey.   
  
South Dakota recognized a decrease in the state’s overall response rate and a decrease in Hispanic families responses. Steps the state will take to promote response from families are:   
1. Continue to analyze data and collect regional program input as to why the response rate for Hispanic parents of infants and toddlers with response rates below state average.   
2. Training of service coordinators on how to encourage families to complete the ECO Family Outcome Survey.   
3. Increase promotion of the electronic delivery method to reach families with the ECO Family Outcome too.   
4. Ensure service coordinators are utilizing the ECO Family Outcome Survey Spanish version  
5. Promote service coordinators to utilize interpreter for completion of surveys.   
  
South Dakota believes the new survey tool and distribution method have affected the state’s performance and overall response rates. The state will continue to examine response rates quarterly by regions and strategize with regions identifying approaches to encourage a higher percentage of parents of infants and toddlers of all race/ethnicities to complete the survey. Results of this will be provided in the FFY 2022 submission.   
  
Stakeholders will be updated on progress during regularly scheduled SICC meetings.

**Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of families that received Part C services.**

The statewide response rate for this year’s family outcomes survey is 26.55%. The state analyzed response rate by comparing the number of families sent a survey compared to the number of families who responded. Families of More than One Race had the highest response rate (31%), followed by White families (30%), African American or Black (26%) American Indian or Alaska Native (21%), Asian (21%), Hispanic (4%) and Native Hawaiian/Pacific Islander (0%). More than One Race and White family response rates are above the statewide percent while African American or Black, American Indian, or Alaska Native, Asian, Hispanic, and Native Hawaiian/Pacific Islander are below the statewide percent.   
  
While overall the state had a decrease in response rate, the state is pleased with the increase in FFY 2021 response rates from African American or Black families (+9%), Asian (+6%), and More than One Race (+8%). The state notes Hispanic origin families are the only to have a decreased response rate during FFY 2021. The state conducted a comparison of scores on the three scales to determine if any particular group of families was significantly more positive or negative than other groups of families. No significant differences by race/ethnicity were evident. However, the state does recognize there is indication of nonresponse bias since American Indian or Alaska Native, Asian, and Hispanic are below the statewide percent.   
  
The steps the state will take to reduce identified bias and promote response from a broad cross section of families are the following:  
1. Increased use of Spanish ECO Family Outcome Survey – Revised, including offering interpretation services.   
2. Use of both the electronic and hard-copy survey to reach families based on their preference.   
3. Continued analysis of data including regional service coordinator input as to why the response rate of parents of infants and toddlers is below the state average.  
4. The state will work with stakeholders to identify additional communication and/or dissemination strategies for increasing the response rate of all parents – particularly parents of infants and toddlers with response rates below the state average.   
5. The state will continue to encourage parents of infants and toddlers of all race/ethnicities to complete the survey.   
6. The state will be implementing a new comprehensive data system in late 2024, from which surveys will be launched. This new data system will allow the state to track the disposition (result) of the attempts and in turn determine reasons why completed surveys are not being returned.

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

South Dakota collects data for indicator C4 by surveying families who exit the Part C program in the reporting period. Representativeness was analyzed by comparing the percentage of surveys received by race and ethnicity (within each subgroup) by the percentage of families who exited the Part C program in the reporting period by race and ethnicity. The data show the following: White families had the highest percentage exiting the program (73%), followed by Native American Indian or Alaska Native (12%), Hispanic (9%), More than One Race (8%), African American or Black (4%), Asian (2%) and Native Hawaiian or Pacific Islander (0%).   
  
White families had the highest representation in surveys received (84%), followed by More than One Race (10%) and Native American Indian or Alaska Native (10%), African American or Black (4%), Asian (2%), Hispanic (1%) and Native Hawaiian or Pacific Islander (0%).   
  
The ECTA Response Rate and Representativeness calculator which applies proportional testing was utilized to determine if the surveys received were representative of the target population. The results show that American Indian or Alaska Native (-3% difference), African American or Black (0% difference), Asian (0% difference), Native Hawaiian or Pacific Islander (0% difference) and More than One Race (+2% difference) were all representative. Hispanic families (-7% difference) were not representative. The statewide response rate for this year’s family outcomes survey is 26.55%. The state analyzed response rate by comparing the number of families sent a survey compared to the number of families who responded. Families of More than One Race had the highest response rate (31%), followed by White families (30%), African American or Black (26%) American Indian or Alaska Native (21%), Asian (21%), Hispanic (4%) and Native Hawaiian/Pacific Islander (0%). More than One Race and White family response rates are above the statewide percent while African American or Black, American Indian, or Alaska Native, Asian, Hispanic, and Native Hawaiian/Pacific Islander are below the statewide percent. White families had a higher response rate (12% difference) which indicates more likely to respond.

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

The metric varied due to using a statistical formula (i.e., proportional testing) to determine if two percentages are considered different from each other. The ECTA Response Rate and Representativeness calculator which applies proportional testing was utilized to determine if the surveys received were representative of the target population (i.e., Child Exit). The results show that African American or Black (0% difference), American Indian or Alaska Native (-3% difference), Asian (0% difference), Native Hawaiian or Pacific Islander (0% difference), and More than One Race (2% difference), were all representative. Hispanic families had a -7% difference and were not representative.

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

## 4 - Prior FFY Required Actions

None

## 4 - OSEP Response

## 4 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

# Indicator 5: Child Find (Birth to One)

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 5 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 0.82% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 0.82% | 0.85% | 0.86% | 0.88% | 0.88% |
| Data | 1.63% | 1.76% | 1.40% | 1.27% | 0.97% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 0.88% | 0.89% | 0.89% | 0.89% | 0.90% |

Targets: Description of Stakeholder Input

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As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

During the November 2022 and January 2023 SICC meetings, stakeholders reviewed and analyzed FFY 2021 C5 data to the established target. Stakeholders discussed the performance for the indicator and recommended the state not make changes to the FFY 2020 - FFY 2025 target package at this time.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 1 with IFSPs | 135 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 1 | 10,917 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 1 with IFSPs** | **Population of infants and toddlers birth to 1** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 135 | 10,917 | 0.97% | 0.88% | 1.24% | Met target | No Slippage |

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Child Find (Birth to Three)

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

## 6 - Indicator Data

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 2.81% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 2.81% | 2.82% | 2.83% | 2.85% | 2.56% |
| Data | 3.25% | 3.29% | 3.31% | 3.00% | 2.56% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 2.81% | 2.83% | 2.83% | 2.84% | 2.85% |

Targets: Description of Stakeholder Input

The South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

During the November 2022 and January 2023 SICC meetings, stakeholders reviewed and analyzed FFY 2021 C6 data to the established target. Stakeholders discussed the performance for the indicator and recommended the state not make changes to the FFY 2020 - FFY 2025 target package at this time.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age | 07/06/2022 | Number of infants and toddlers birth to 3 with IFSPs | 1,018 |
| Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021 | 06/28/2022 | Population of infants and toddlers birth to 3 | 34,317 |

**FFY 2021 SPP/APR Data**

| **Number of infants and toddlers birth to 3 with IFSPs** | **Population of infants and toddlers birth to 3** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,018 | 34,317 | 2.56% | 2.81% | 2.97% | Met target | No Slippage |

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

South Dakota’s zero to age three child count increased nearly a half of a percent over last year. Possible reasons for this increase less disruptions to routine health care as was experienced during the pandemic, and families more receptive to accessing routine health care (i.e. well-baby checks). Also more child care and other group settings were returning to regular operations where children's developmental progress is more obvious. These factors seem to have led to an increase in referrals to the Part C program.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 6 - Required Actions

# Indicator 7: 45-Day Timeline

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

Targets must be 100%.

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 7 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 97.30% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 100.00% | 92.07% |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline** | **Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 199 | 255 | 92.07% | 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 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.**

56

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

During this reporting period, the 45-day timeline criteria was missed 56 times due to exceptional family circumstances. Family reasons for delay include, family rescheduling evaluations, family illness, physician appointments, families work schedule and the lingering effects of the COVID-19 virus.

**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).**

The State selected the second quarter of FFY 2021 (October 1, 2021, through December 31, 2021).

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

For Indicator C7, the State has historically selected the second quarter of the fiscal year to determined compliance with this indicator. This data set has been considered representative of the full reporting year because the same variables are in place for this quarter as for all quarters. For FFY 2021 the state again selected the second quarter, (October 1, 2021, through December 31, 2021).

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

SD Part C is pleased in the progress made over the last year in reaching 100% for Indicator C7. Throughout the year, the Part C program showed great progress on indicator C7. The state provided TA to all service coordinators on how to correctly document reasons for delay, emphasizing that service coordinator documentation must clearly determine if the reason for delay is due to exceptional family circumstances or due to systems reasons for delay.   
  
The state team reviewed the service coordinators’ documentation on all 56 children who had missed the 45-day timeline and verified that all delays were due to exceptional family circumstances.

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

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

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

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

South Dakota has six regional Part C programs located across state, and in three of those regions, the state identified 18 children that missed the 45-day timeline during this reporting period.  
  
An analysis of the first region’s data showed that 12 children did not receive their IFSP meeting in a timely manner. Therefore, according to federal requirements, this region was issued a written finding of noncompliance and according to state procedures, the region was required to complete a Corrective Action Plan. The region reviewed and updated their policies and procedures, made changes to the region’s infrastructure, collected their own data for self-assessment, provided training to regional service coordinators, and determined who would be responsible for supervising the region’s compliance of the 45-day timeline. This region also completed the Local Contributing Factors Tool, developed by OSEP sponsored ECTA Center, which assisted the region determine underlying factors impacting local performance and assisted the region develop a meaningful Corrective Action Plan. The state reviewed and accepted the region's Corrective Action Plan. A few months after the Corrective Action Plan was accepted, the state analyzed a random sample of subsequent data from the region, collected through the States Part C data system. The region achieved 100% compliance on this sample of data. Based upon this data, verification that the 12 children had an IFSP meeting although delayed, and the completion of the region's Corrective Action Plan, the state determined the region was now correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding within the one-year requirement.   
  
An analysis of the second region’s data revealed five children had missed the 45-day timeline, not due to exceptional family circumstances. According to federal requirements, this region was issued a written finding of noncompliance. The region was required to make changes to their procedures that would ensure every eligible child would have an IFSP meeting within the 45-day timeline. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data from the region collected through the Part C data system. The region achieved 100% compliance on this sample of data . Based upon this data and verification that the five children had an IFSP meeting although delayed, the state determined the region is now correctly implementing the requirements of the 45-day timeline. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.   
  
According to an analysis of the third region, the data discovered one child had missed the 45-day timeline, not due to exceptional family circumstances. According to federal requirements, this region was also issued a written finding of noncompliance. The region was required to make changes to their procedures that would ensure every eligible child would receive their IFSP meeting within the 45-day timeline. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data from the region collected through the Part C data system. The region achieved 100% compliance on this sample of data . Based upon this data, and verification that the one child had an IFSP meeting, although delayed, the state determined the region was now correctly implementing the requirements of the 45-day timeline. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.

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

Through the state's Part C data base, the state reviewed and verified that in all 18 instances of noncompliance, although late, each child did have an IFSP meeting.

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

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

## 7 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

South Dakota has six regional Part C programs located across state, and in three of those regions, the state identified 18 children that missed the 45-day timeline during this reporting period.  
  
An analysis of the first region’s data showed that 12 children did not receive their IFSP meeting in a timely manner. Therefore, according to federal requirements, this region was issued a written finding of noncompliance and according to state procedures, the region was required to complete a Corrective Action Plan. The region reviewed and updated their policies and procedures, made changes to the region’s infrastructure, collected their own data for self-assessment, provided training to regional service coordinators, and determined who would be responsible for supervising the region’s compliance of the 45-day timeline. This region also completed the Local Contributing Factors Tool, developed by OSEP sponsored ECTA Center, which assisted the region determine underlying factors impacting local performance and assisted the region develop a meaningful Corrective Action Plan. The state reviewed and accepted the region's Corrective Action Plan. A few months after the Corrective Action Plan was accepted, the state analyzed a random sample of subsequent data from the region, collected through the States Part C data system. The region achieved 100% compliance on this sample of data. Based upon this data, verification that the 12 children had an IFSP meeting although delayed, and the completion of the region's Corrective Action Plan, the state determined the region was now correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding within the one-year requirement.   
  
An analysis of the second region’s data revealed five children had missed the 45-day timeline, not due to exceptional family circumstances. According to federal requirements, this region was issued a written finding of noncompliance. The region was required to make changes to their procedures that would ensure every eligible child would have an IFSP meeting within the 45-day timeline. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data from the region collected through the Part C data system. The region achieved 100% compliance on this sample of data . Based upon this data and verification that the five children had an IFSP meeting although delayed, the state determined the region is now correctly implementing the requirements of the 45-day timeline. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.   
  
According to an analysis of the third region, the data discovered one child had missed the 45-day timeline, not due to exceptional family circumstances. According to federal requirements, this region was also issued a written finding of noncompliance. The region was required to make changes to their procedures that would ensure every eligible child would receive their IFSP meeting within the 45-day timeline. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data from the region collected through the Part C data system. The region achieved 100% compliance on this sample of data . Based upon this data, and verification that the one child had an IFSP meeting, although delayed, the state determined the region was now correctly implementing the requirements of the 45-day timeline. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.

## 7 - OSEP Response

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

## 7 - Required Actions

# Indicator 8A: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8A - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 98.86% | 94.74% |

**Targets**

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

**FFY 2021 SPP/APR Data**

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

YES

| **Number of children exiting Part C who have an IFSP with transition steps and services** | **Number of toddlers with disabilities exiting Part C** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 163 | 166 | 94.74% | 100% | 99.40% | Did not meet 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.**

2

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

During this reporting period, the IFSP meeting with transition steps and services timeline criteria was missed two times due to exceptional family circumstances. Reasons for the delay were, in both cases, the service coordinators were unable to locate the families and the system later found out the families had moved to another region.   
  
In addition, the state missed the IFSP meeting transition steps and services timeline criteria one time for a reason other than exceptional family circumstances due to service coordinator calculated the timeline in error.

**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).**

For Indicator C8A, one quarter of the fiscal year was used to determine compliance with this indicator. The state selected the 2nd quarter of FFY 2021 (Oct. 1, 2021, to Dec. 31, 2021).

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

For Indicator C8A, the state has historically selected the second quarter of the fiscal year to determined compliance with this indicator. This data set has been considered representative of the full reporting year because the same variables are in place for this quarter as for all quarters. For FFY 2021 the state again selected the second quarter, (October 1, 2021, through December 31, 2021).

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 4 | 4 |  | 0 |

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

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

South Dakota has six regional Birth to Three programs located across state, and in four of those regions, the state identified seven children that missed the IFSP meeting with transition steps and services timeline criteria during this reporting period.  
  
An analysis of the first region’s data showed that four children did not receive their IFSP meeting with transition steps and services in a timely manner. Therefore, according to federal requirements, this region was issued a written finding of noncompliance and according to state procedures, the region was required to complete a Corrective Action Plan. The region reviewed and updated their policies and procedures, made changes to the regions infrastructure, collected their own data for self-assessment, provided training to regional service coordinators, and determined who would be responsible for supervising the regions compliance of Indicator C8A. This region also completed the Local Contributing Factors Tool, developed by OSEP sponsored ECTA Center, which assisted the region in determining underlying factors that impacted local performance and helped the region develop a meaningful Corrective Action Plan. The state reviewed and accepted the regions Corrective Action Plan. A few months after the Corrective Action Plan was accepted, the state analyzed a random sample of subsequent regional data collected through the state's Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the four children had an IFSP meeting with transition steps and services although delayed, and the completion of the region’s Corrective Action Plan, the state determined the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding within the one-year requirement.   
  
An analysis of the second region determined the data revealed one child had missed the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, this region was issued a written finding of noncompliance. Unfortunately, this region had one service coordinator who had planned to retire and was not going to provide service coordination as of July 1, 2021. As a result, the region would dissolve. The counties in this region were combined into two other regions and subsequent service coordinators. However, before the region dissolved, the state reviewed a random sample of subsequent data collect through the Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the one child had an IFSP meeting with transition steps and services, although delayed, the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.   
  
The third and fourth regional data analysis discovered each region had one child miss the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, both regions were issued a written finding of noncompliance. The state requested these regions conduct a root cause analysis to determine the causes of noncompliance and develop policies and/or procedures to ensure continued compliance with indicator C8A. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data collected through the Part C data system and both regions achieved 100% compliance on this sample of new data. Based upon this data, and verification that the two children had an IFSP meeting with transition steps and services, although delayed, both regions were correctly implementing the requirements for this indicator. Therefore, the state sent both regions a letter, closing the findings, within the one-year requirement.

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

Through the state's Part C data base, the state verified that in all seven instances of noncompliance, although late, each child did receive an IFSP meeting with transition steps and services.

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

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

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

South Dakota has six regional Birth to Three programs located across state, and in four of those regions, the state identified seven children that missed the IFSP meeting with transition steps and services timeline criteria during this reporting period.  
  
An analysis of the first region’s data showed that four children did not receive their IFSP meeting with transition steps and services in a timely manner. Therefore, according to federal requirements, this region was issued a written finding of noncompliance and according to state procedures, the region was required to complete a Corrective Action Plan. The region reviewed and updated their policies and procedures, made changes to the regions infrastructure, collected their own data for self-assessment, provided training to regional service coordinators, and determined who would be responsible for supervising the regions compliance of Indicator C8A. This region also completed the Local Contributing Factors Tool, developed by OSEP sponsored ECTA Center, which assisted the region in determining underlying factors that impacted local performance and helped the region develop a meaningful Corrective Action Plan. The state reviewed and accepted the regions Corrective Action Plan. A few months after the Corrective Action Plan was accepted, the state analyzed a random sample of subsequent regional data collected through the state's Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the 4 children had an IFSP meeting with transition steps and services although delayed, and the completion of the region’s Corrective Action Plan, the state determined the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding within the one-year requirement.   
  
An analysis of the second region determined the data revealed one child had missed the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, this region was issued a written finding of noncompliance. Unfortunately, this region had one service coordinator who had planned to retire and was not going to provide service coordination as of July 1, 2021. As a result, the region would dissolve. The counties in this region were combined into two other regions and subsequent service coordinators. However, before the region dissolved, the state reviewed a random sample of subsequent data collect through the Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the one child had an IFSP meeting with transition steps and services, although delayed, the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.   
  
The third and fourth regional data analysis discovered each region had one child miss the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, both regions were issued a written finding of noncompliance. The state requested these regions conduct a root cause analysis to determine the causes of noncompliance and develop policies and/or procedures to ensure continued compliance with indicator C8A. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data collected through the Part C data system and both regions achieved 100% compliance on this sample of new data. Based upon this data, and verification that the two children had an IFSP meeting with transition steps and services, although delayed, both regions were correctly implementing the requirements for this indicator. Therefore, the state sent both regions a letter, closing the findings, within the one-year requirement.

## 8A - OSEP Response

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

## 8A - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 8B: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8B - Indicator Data

**Historical Data**

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

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

**Targets**

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

**FFY 2021 SPP/APR Data**

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

YES

| **Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 166 | 166 | 100.00% | 100% | 100.00% | Met target | No Slippage |

**Number of parents who opted out**

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

0

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

N/A

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

In South Dakota, all children are potentially eligible for Part B. One-hundred and ten days prior to child turning three years old the state data system automatically generates an email to notify the SEA and the Special Education Director of the LEA. In addition, service coordinators send the LEA a notification prior to the child turning three years of age according to federal requirements.

**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).**

For Indicator C8B, one quarter of the fiscal year was used to determine compliance with this indicator. The state selected the 2nd quarter of FFY 2021 (Oct. 1, 2021, to Dec. 31, 2021).

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

For Indicator C8B, one quarter of the fiscal year was used to determine compliance with the indicator. The state selected the second quarter of FFY 2021 (October 1, 2021, through December 31, 2021). This data set is considered representative of the full reporting year because the same variables are in place for this quarter of the fiscal year as in all quarters. The South Dakota Part C program is confident that the chosen reporting period accurately reflects data for infants and toddlers with IFSPs for FF Y2021

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

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

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

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

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

None

## 8B - OSEP Response

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

## 8B - Required Actions

# Indicator 8C: Early Childhood Transition

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

Data to be taken from monitoring or State data system.

**Measurement**

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

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

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

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

**Instructions**

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

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

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

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

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

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

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

Indicators 8A, 8B, and 8C: Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 8C - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 94.60% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 98.86% | 94.74% |

**Targets**

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

**FFY 2021 SPP/APR Data**

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

YES

| **Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B** | **Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 163 | 166 | 94.74% | 100% | 99.40% | Did not meet target | No Slippage |

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

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

0

**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.**

2

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

During this reporting period, the IFSP meeting criteria was missed two times due to exceptional family circumstances. Reasons for the delay were, in both cases, the service coordinators were unable to locate the families and the system later found out the families had moved to another region.   
  
In addition, the state missed the IFSP meeting timeline criteria one time for a reason other than exceptional family circumstance, due to service coordinator calculated the timeline in error.

**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).**

For Indicator C8C, one quarter of the fiscal year was used to determine compliance with this indicator. The state selected the 2nd quarter of FFY 2021 (Oct. 1, 2021, to Dec. 31, 2021).

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

For Indicator C8C, the state has historically selected the second quarter of the fiscal year to determined compliance with this indicator. This data set has been considered representative of the full reporting year because the same variables are in place for this quarter as for all quarters. For FFY 2021 the state again selected the second quarter, (October 1, 2021, through December 31, 2021).

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 4 | 4 |  | 0 |

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

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

South Dakota has six regional Birth to Three programs located across state, and in four of those regions, the state identified seven children that missed the IFSP meeting with transition steps and services timeline criteria during this reporting period.  
  
An analysis of the first region’s data showed that four children did not receive their IFSP meeting with transition steps and services in a timely manner. Therefore, according to federal requirements, this region was issued a written finding of noncompliance and according to state procedures, the region was required to complete a Corrective Action Plan. The region reviewed and updated their policies and procedures, made changes to the regions infrastructure, collected their own data for self-assessment, provided training to regional service coordinators, and determined who would be responsible for supervising the regions compliance of Indicator C8C. This region also completed the Local Contributing Factors Tool, developed by OSEP sponsored ECTA Center, which assisted the region in determining underlying factors that impacted local performance and helped the region develop a meaningful Corrective Action Plan. The state reviewed and accepted the regions Corrective Action Plan. A few months after the Corrective Action Plan was accepted, the state analyzed a random sample of subsequent regional data collected through the state's Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the four children had an IFSP meeting with transition steps and services although delayed, and the completion of the region’s Corrective Action Plan, the state determined the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding within the one-year requirement.   
  
An analysis of the second region determined the data revealed one child had missed the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, this region was issued a written finding of noncompliance. Unfortunately, this region had one service coordinator who had planned to retire and was not going to provide service coordination as of July 1, 2021. As a result, the region would dissolve. The counties in this region were combined into two other regions and subsequent service coordinators. However, before the region dissolved, the state reviewed a random sample of subsequent data collect through the Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the one child had an IFSP meeting with transition steps and services, although delayed, the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.   
  
The third and fourth regional data analysis discovered each region had one child miss the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, both regions were issued a written finding of noncompliance. The state requested these regions conduct a root cause analysis to determine the causes of noncompliance and develop policies and/or procedures to ensure continued compliance with indicator C8C. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data collected through the Part C data system and both regions achieved 100% compliance on this sample of new data. Based upon this data, and verification that the two children had an IFSP meeting with transition steps and services, although delayed, both regions were correctly implementing the requirements for this indicator. Therefore, the state sent both regions a letter, closing the findings, within the one-year requirement.

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

Through the state's Part C Three data base, the state verified that in all seven instances of noncompliance, although late, each child did receive an IFSP meeting.

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

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

## 8C - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

South Dakota has six regional Birth to Three programs located across state, and in four of those regions, the state identified seven children that missed the IFSP meeting with transition steps and services timeline criteria during this reporting period.  
  
An analysis of the first region’s data showed that four children did not receive their IFSP meeting with transition steps and services in a timely manner. Therefore, according to federal requirements, this region was issued a written finding of noncompliance and according to state procedures, the region was required to complete a Corrective Action Plan. The region reviewed and updated their policies and procedures, made changes to the regions infrastructure, collected their own data for self-assessment, provided training to regional service coordinators, and determined who would be responsible for supervising the regions compliance of Indicator C8C. This region also completed the Local Contributing Factors Tool, developed by OSEP sponsored ECTA Center, which assisted the region in determining underlying factors that impacted local performance and helped the region develop a meaningful Corrective Action Plan. The state reviewed and accepted the regions Corrective Action Plan. A few months after the Corrective Action Plan was accepted, the state analyzed a random sample of subsequent regional data collected through the state's Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the four children had an IFSP meeting with transition steps and services although delayed, and the completion of the region’s Corrective Action Plan, the state determined the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding within the one-year requirement.   
  
An analysis of the second region determined the data revealed one child had missed the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, this region was issued a written finding of noncompliance. Unfortunately, this region had one service coordinator who had planned to retire and was not going to provide service coordination as of July 1, 2021. As a result, the region would dissolve. The counties in this region were combined into two other regions and subsequent service coordinators. However, before the region dissolved, the state reviewed a random sample of subsequent data collect through the Birth to Three data system and the region achieved 100% compliance on this new sample of data. Based upon this data, and verification that the one child had an IFSP meeting with transition steps and services, although delayed, the region was correctly implementing the requirements for this indicator. Therefore, the state sent the region a letter, closing the finding, within the one-year requirement.   
  
The third and fourth regional data analysis discovered each region had one child miss the IFSP meeting with transition steps and services timeline criteria, that were not due to exceptional family circumstances. As per federal regulation, both regions were issued a written finding of noncompliance. The state requested these regions conduct a root cause analysis to determine the causes of noncompliance and develop policies and/or procedures to ensure continued compliance with indicator C8C. A few months after the finding letter was issued, the state reviewed a random sample of subsequent data collected through the Part C data system and both regions achieved 100% compliance on this sample of new data. Based upon this data, and verification that the two children had an IFSP meeting with transition steps and services, although delayed, both regions were correctly implementing the requirements for this indicator. Therefore, the state sent both regions a letter, closing the findings, within the one-year requirement.

## 8C - OSEP Response

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

## 8C - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 9: Resolution Sessions

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

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

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

## 9 - Indicator Data

**Not Applicable**

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

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 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 0 |

**Targets: Description of Stakeholder Input**

The South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

South Dakota had less than ten resolution sessions during the FFY 2021 reporting year. As such, the state is not required to enter baseline and/or target data if the number of resolution sessions is less than 10.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 |  |  |  | N/A | N/A |

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10, and the South Dakota Part C program did not have 10 or more resolution sessions during this reporting period.

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

## 9 - Required Actions

# Indicator 10: Mediation

**Instructions and Measurement**

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, the State must develop baseline and targets and report them in the corresponding SPP/APR.

The consensus among mediation practitioners is that 75-85% is a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data. States may express their targets in a range (e.g., 75-85%).

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

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

## 10 - Indicator Data

**Select yes to use target ranges**

Target Range not used

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

NO

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2021-22 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 0 |

Targets: Description of Stakeholder Input

The South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target>= |  |  |  |  |  |
| Data |  |  |  |  |  |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0 |  |  |  | N/A | N/A |

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

South Dakota had less than ten mediation sessions during the FFY 2021 reporting year. As such, the state is not required to enter baseline and/or target data if the number of resolution sessions is less than 10.

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

The State reported fewer than ten mediations held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 10 - Required Actions

# Indicator 11: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

The State’s SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

**Measurement**

The State’s SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for infants and toddlers with disabilities and their families. The SSIP includes each of the components described below.

**Instructions**

***Baseline Data:*** The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

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

***Updated Data:*** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for infants and toddlers with disabilities and their families by improving early intervention services. Stakeholders, including parents of infants and toddlers with disabilities, early intervention service (EIS) programs and providers, the State Interagency Coordinating Council, and others, are critical participants in improving results for infants and toddlers with disabilities and their families and must be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State’s targets under Indicator 11. The SSIP should include information about stakeholder involvement in all three phases.

*Phase I: Analysis*:

- Data Analysis;

- Analysis of State Infrastructure to Support Improvement and Build Capacity;

- State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

*Phase II: Plan* (which is in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;

- Support for EIS Program and/or EIS Provider Implementation of Evidence-Based Practices; and

- Evaluation.

*Phase III: Implementation and Evaluation* (which is in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

**Specific Content of Each Phase of the SSIP**

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

***Phase III: Implementation and Evaluation***

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result for Infants and Toddlers with Disabilities and Their Families (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., February 1, 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 11 - Indicator Data

**Section A: Data Analysis**

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

To substantially increase the rate of children’s growth in their acquisition and use of knowledge and skills, including early language/communication, by the time they exit the program, as defined by the targets established for Indicator 3B, Summary Statement 1.

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

NO

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

NO

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

YES

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

The state has used the SSIP process as an opportunity to re-define and enhance early intervention in South Dakota. Throughout the FFY 2021 year, stakeholders were kept informed of activities and provided opportunities to share input in relation towards the state’s efforts meeting the SiMR. During the November 2022 SICC meeting, stakeholders participated in an exercise outlining and discussing recommendations for the state to consider in the coming year. During the activity stakeholders recommended leaving Data Quality, Accountability and Professional Development as they were. However, stakeholders continued to express desire for the state to focus on child find activities to ensure all families from across the state were able to participate and also for the state to continue to explore opportunities to increase community-based providers. With the emphasis on these items, the action strand was renamed Child Find and Workforce to better represent the activities in the evaluation plan.

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

https://doe.sd.gov/birthto3/FFY2021.aspx

Progress toward the SiMR

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

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 74.36% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 75.00% | 75.50% | 76.00% | 76.50% | 77.00% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Numerator represents Indicator C3B progress categories c+d | Denominator represents Indicator C3B progress categories a+b+c+d | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 310 | 418 | 75.00% | 75.00% | 74.16% | Did not meet target | No Slippage |

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

South Dakota SiMR is Indicator 3B, Summary Statement 1. South Dakota utilizes Battelle Developmental Inventory (BDI) tools. Part C staff analyze the entry and exit BDI scores of children who have exited the Part C program during the reporting period. Scores are gathered from the respective BDI databases and formulated according to the state’s business rules to determine the child’s progress in a through e categories. Using the ECO Summary Statement Calculator state staff analyze data and report SiMR data for Indicator C3 Summary Statement 1.

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

In South Dakota, local education agencies (LEA) are required by administrative rule to conduct the evaluation to determine an infant or toddlers’ eligibility for Part C services. South Dakota is transitioning from the Battelle Developmental Inventory Second Edition (BDI-2) to the Battelle Developmental Inventory Third Edition (BDI3). These tools are utilized by Part B 619 and Part C programs for reporting child outcomes. Children are evaluated using this consistent method which enhances the validity of the data. The entry scores are determined by the standard deviation scores from each outcome area for each child. An "exit" BDI assessment is given to children who have been in the Part C program for at least 6 months and are exiting. This exit assessment serves two purposes, one for children transitioning at age three to determine eligibility for Part B 619 programs and secondly for the Part C program to determine child's developmental status at exit.  
  
Entry and exit BDI scores are stored in the respective BDI databases. From these databases, state Part C staff retrieve scores of children who have exited the Part C program during the reporting period. Part C state staff collaborate with evaluators and the Part B 619 coordinator to ensure all appropriate testing was completed and scores reported. BDI entry and exit scores are then compared for those exiting children and formulated according to the state’s BDI business rules to determine the child’s progress in the three outcome areas.

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

NO

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

YES

**Describe any data quality issues, unrelated to COVID-19**, **specific to the SiMR data and include actions taken to address data quality concerns.**

South Dakota Part C and Part B 619 programs measure child progress using the Battelle Development Inventory evaluation tool. During the FFY 2021 reporting year, both programs began transition from the Battelle Developmental Inventory – Second Edition (BDI-2) to the Battelle Developmental Inventory – Third Edition (BDI-3). Evaluators were instructed to use the BDI-3 for any child entering after 7/1/2022 but to use the BDI-2 for any child exiting who had an entry score with the BDI-2. During this transition phase the state noted a decline in the completion rate, or percentage of children who had a qualifying entry and exit score. Further investigation, and stakeholder input, led the state to hypothesis this drop was due to confusion on the evaluators’ part on which tool to use at time of exit. Children who enter with a BDI-2 must be evaluated with a BDI-2 upon exit. The state notes, with a lower completion rate, this did impact the states progress towards the SiMR and is taking action, along with the Part B 619 program to educate and ensure protocols are followed upon completion of exit evaluations. The state estimates as progress is made towards all children receiving a BDI-3 upon entry and exit the quality concerns will dissipate.

**Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)**

NO

Section B: Implementation, Analysis and Evaluation

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

https://doe.sd.gov/birthto3/FFY2021.aspx

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

YES

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

Revisions to the evaluation plan include:   
  
Data Quality  
The state identified a short-term outcome to support the training opportunities for evaluators who implement the Battelle Developmental Inventory – Third edition. The state will be hosting an in-person Early Intervention Conference summer 2023 with one strand dedicated to administration of the BDI.   
  
Accountability  
Revision to the plan revolves around the state’s decision to move forward with a new comprehensive data system that will have enhanced ability to provide data for the general supervision of the Part C program. It is the goal of the state to have this new system up and functioning by fall 2024. Projected timelines were adjusted accordingly.   
  
Professional Development  
The following activities were completed during the performance year and are now routine and ongoing practices:  
- Present a consistent statewide message about early intervention service delivery and EBP.  
- Revise and implement existing PD schedule to be consistent with university semesters.   
- Revise coaching schedule to accommodate increased training participants.   
- Make available graduate credit for Bright Beginnings professional development.   
  
The following activities were added to the Professional Development plan:  
- Establish and implement interrator reliability training for initial and sustained fidelity for coaches of evidence-based practices.   
- Implement a rotation of professional development offerings to complement Bright Beginnings and prevent learning loss.  
- Increase collaboration with university/higher-ed programs for internships, pilot programs, and research.   
  
Child Find and Workforce  
This strand was renamed to better represent the activities and outcomes of the strand.

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

With stakeholder input, South Dakota’s evaluation plan has been revised to reflect the significant progress the state has made during the last year in the SSIP, and new activities planned with stakeholder input. The readers should note South Dakota’s evaluation plan is aligned to each Action Strand within the TOA stating the Improvement strategies for that strand and clearly identifying the activities, short and intermediate outcomes, projected timelines/status, and next steps. South Dakota’s Evaluation Plan can be found at https://doe.sd.gov/birthto3/FFY2021.aspx.  
  
Revisions to the evaluation plan include:  
Data Quality  
The state determined an increased need for training of the BDI-3 given the decrease in completion rate and decrease in performance in both Part C and Part B 619 child outcomes.   
  
Accountability  
South Dakota continues to collaborate with OSEP funded TA centers to refine monitoring protocols to measure the quality of the IFSP process. The state determined to purchase a new comprehensive data system that will allow the state to maximize data for the state’s general supervision of Part C program, include a parent portal, increase availability of quality data and allow for a more robust monitoring protocol. This system will allow the state to interface with the new Department of Education Learning Management System and Longitudinal Data System which will offer significant new opportunities for program quality.   
  
Professional Development  
Leveraging the ARP dollars, the state made significant progress in this action strand during the FFY 2021 reporting year. Several short and intermediate outcomes were met during FFY 2021, including the state’s branding of Bright Beginnings and ensuring a consistent statewide message about early intervention service delivery in all PD materials. The state moved training cohorts to traditional semesters, whereby participant numbers increased by 70% for the cohorts, resulting in the state reaching over 90% of direct service providers trained and having reached initial fidelity in use of the evidence-based practice. While the state will continue to gather and analyze data related to participant reaching initial and sustained fidelity, revisions to the evaluation plan includes new activities identified by stakeholders that support sustained fidelity of practice. The state has a well-established coaching protocol and with stakeholders input identified a best practice to annually hold an interrator reliability for all master and peer coaches. Stakeholders also recognized the need to implement a rotation of professional development offerings to complement Bright Beginnings and family engagement. All professional development will be moved to the Department of Education’s new Learning Management System scheduled to begin in 2024. Last, stakeholders recognized the impact the state could have on new or soon to be graduates. The state was encouraged to make connections with higher education entities throughout the state, including Tribal Colleges to promote early intervention careers.   
  
Child Find and Workforce  
The Child Find and Workforce strand of action, was renamed to better represent activities noted. During the November 2022 regular ICC meeting, stakeholders again emphasized the desire for the state to continue with the activities outlined the previous year to support child find for all children throughout the state and increase community-based providers.

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

Below responses are aligned to the Action Strands outlined on the state’s Theory of Action and represent the strategies continued to improve child and family outcomes through routines-based home visiting.   
  
Data Quality  
• Both SD Part C and Part B 619 use the Battelle Developmental Inventory evaluation tools to measure progress towards child outcome. During FFY 2021, both programs began the transition from the Battelle Developmental Inventory (BDI-   
 2) to the Battelle Developmental Inventory (BDI-3). While protocols were established, some confusion was apparent among evaluators. Children who received a BDI-2 for eligibility are required to have a BDI-2 upon exit. Multiple occasions   
 were noted when the incorrect tool was used upon exit. This resulted in the tests being invalid and unusable. As a result, the completion rate for FFY 2021 was 56.19%.   
• The state continues to make available through the BDI publisher, Riverside, online training modules for all evaluators, one specific for infants and toddlers from birth to age three. SD Part C in collaboration with Part B 619 is tracking the   
 number of LEA personnel who have completed the training.   
  
Accountability  
• The state continues to collaborate with OSEP sponsored TA to develop and implement a monitoring protocol to identify quality IFSP decisions. During FFY 2021 the state determined to leverage ARP dollars and pursue a new   
 comprehensive data system. This new system will be more robust and allow more rigorous monitoring ability. The system will include many new data elements, functionality and reporting features, including a parent portal. Once the new   
 data system is functioning, the state will have the ability to monitor appropriateness of services based on the individual family priorities. The state will also be able to evaluate the effectiveness of the EBP in relation to services and child   
 outcomes. The new system will have additional features encompassing increased fiscal monitoring capabilities. Over the coming year the state will work with OSEP sponsored TA centers as new data system is implemented.   
• Through involvement with the Johns Hopkins RBI Academy, the state collaborated with multiple states and foreign countries to develop plans for enhancing quality IFSPs. SD is currently reviewing material and determining how to   
 incorporate these plans into the new data system.   
  
Professional Development  
• The state rebranded their training programs under one title, Bright Beginnings, for a more cohesive approach. The direct service provider training and service coordinator training components have been combined to ensure all early   
 intervention providers can learn and understand the full breadth and depth of the evidence-based practices being implemented in the state.   
• Through careful evaluation of participant and stakeholder feedback the state revised and enhanced direct service providers PD training of the EBP. Taking effect in January 2022, the revisions and enhancements have resulted for trainees   
 1) incorporation of more practice of the EBP during the training portion, 2) alignment with traditional college semester courses and 3) condensed time commitment of direct service providers. The restructure increased the number of DSP   
 in each training cohort by 70% and shorten the timeframe to reach statewide implementation of EBP by the end of 2023.   
• Creating a new coaching schedule was critical to the success of larger training cohorts. Allowing coaching to happen for one calendar year after coursework is successfully completed was desired from trainees and coaches alike to better   
 accommodate their own and their Part C families’ schedules. The state also needed to find a coaching system to support the increased trainee load. A year-round coaching model was implemented. Coaching now, is limited five two-month pods (no coaching in July and December as a natural break for coaches and state program staff time to review data and make programmatic changes). Coaches and trainees have enjoyed the increased flexibility and results   
 are showing that the new rotation has not impeded fidelity achievement.   
• New technology platforms were implemented in training including a more powerful video evaluation tool (GoReact) and on demand professional development for already vetted Tier 1 providers (Articulate 360). GoReact has rich feedback   
 options where coach and trainee can have ongoing conversations about their fidelity video while the system records their conversations and allows for video, audio, and typed feedback, calculated where and when videos are tagged for   
 evidence and allows for back-and-forth evaluation of the EBP rubric for fidelity. Articulate 360 allows for Tier 1 providers to access refreshers and on demand training at their fingertips via a phone or iPad app and website links.   
• The State has partnered with South Dakota State University to allow for graduate credit, at the reduced tuition rate, for trainees in the Bright Beginnings course. Numbers of trainees opting for the university credit continue to grow as it is   
 desirable for credential renewal in all disciplines.   
• Sustained fidelity reviews occurred during the most recent reporting period for providers who reached fidelity two years prior. Once notified, providers are paired with a state contracted content expert who facilitates an on-line refresher   
 of the EBP followed by submission of a practice video with coaching support and a final video for sustained fidelity review. If practice video is determined to meet sustained fidelity criteria a second video is not required.   
• Service coordinators (SC), new to the state Part C program, take part in an online training in the EBP Routines Based Interview (RBI) facilitated by a veteran SC who has meet initial and sustained fidelity. Upon completion of online portion   
 new SC have a practice period and then proceed with fidelity review. The veteran SC also serves as a coach during this period.   
• The state continued to support the service coordinators’ RBI Mentoring Group at the local and state level to ensure fidelity of implementing the RBI with families of infants and toddlers.  
  
Child Find and Workforce (Renamed)  
• The state completed the Johns Hopkins RBM Academy which resulted in an established mentoring program for service coordinators. This program results in a new mentoring group of service coordinators each year. These small groups,   
 led by the state PD member, will establish their priorities and goals focusing on enhancements to existing practices and materials which will assist all families to engage in the EI process.   
• The Part C director continues to participate in the state’s Health Resources and Services Administration(HRSA) Early Childhood Comprehensive System work as it relates to EI services and families disproportionately served.   
• A pilot program, to study the impact of community play groups as a child find activity began in spring of 2022, in a rural native community. The pilot met with much success, resulting in a 50% increase in child find for that geographic   
 location in the state. The state will continue to monitor progress and collect data on this effort. With stakeholder input the state is reviewing an expansion of the pilot in other areas of the state with the greatest needs.

**Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.**

Below responses are aligned to the Action Strands outlined on the state’s Theory of Action and Evaluation Plans.   
  
Data Quality  
Regarding the strategies described in the Data Quality Action Strand, the following outcomes were achieved during this reporting period:  
1. South Dakota has a completion rate of 56.2% in FFY 2021, this is a 8.7% decrease from FFY 2020.  
2. 185 individuals completed the BDI-3 full training as of 6/30/2022  
3. 75% of LEA’s have at least one evaluator who completed the training.   
The strategies designed to meet these short-term and intermediate outcomes in turn work towards increasing the percentage of usable child outcome data. This also contributes to scaling up and maintaining the fidelity of evaluators. This will ensure high quality data for child outcomes towards achieving the SiMR and sustaining systems improvement efforts.   
  
Accountability  
Regarding the strategies described in the Accountability Action Strand, the following outcomes were achieved during this reporting period:   
• Beginning in August 2021, South Dakota joined a multi-state, international work group, led by Johns Hopkins University staff and Dr. Robin McWilliams. Known as the RBM Academy this group collaborated on existing policies, practices, data and beliefs. From this work the state established a mentoring protocol for service coordinators who will focus on quality of IFSP processes and family engagement.   
• The state continues to develop the activities surrounding these implementation strategies. Once identified, the quality indicators of IFSPs processes will assist the state in evaluation of professional development and technical assistance needs. Activities to enhance the quality of IFSP decisions are designed to contribute to improved performance in the SiMR.   
  
Professional Development  
Regarding the strategies described in the Professional Development Action Strand, the following outcomes were achieved during this reporting period:  
• Part C EBP training was re-branded as “Bright Beginnings” inclusive of both evidence-based practices implemented by direct service providers and service coordinators.   
• Eight South Dakota specific videos featuring Part C providers, families, service coordinators and professional leaders in early childhood development were created and made available. The videos are available for service coordinators to share with families and for state staff to use during presentations. The videos are all included in the Bright Beginnings training for all new providers to view. The videos are the epitome of how South Dakota Part C early intervention should be.   
• A fall/spring semester training rotation was created using the SD Regental University System calendar.  
• A complimentary coaching rotation was created to support the new semester-based training. Coaching occurs year-round in two-month “coaching pods”.   
• The State increased statewide percentage of SC & DSP meeting initial fidelity  
 \*100% of SC met initial fidelity  
 \*100% of DSP met initial fidelity  
 \*Expanded fidelity methods and more in-depth coaching helps to increase the pass rate. Those who meet fidelity in alternative methods have to do sustained fidelity within the following year (not the two-year grace as allowed with others).  
• 100% of service coordinators in the state are trained and implementing the EBP as intended.  
• The state is over 90% towards statewide implementation of all direct service providers being trained and implementing as intended.   
• Sustained fidelity cohorts began with trainees that met initial fidelity in the pilot and year one groups.  
 \*100% of SC met sustained fidelity through the mentor group  
 \*100% DSP met fidelity through sustained fidelity coaching  
• The State selected and secured a technology platform compatible with smart phones from which to offer in-the-moment training opportunities for direct service providers. Articulate 360 was purchased in Summer 2022.  
• Creation and dissemination of topical learning pods began in spring 2022. As of fall 2022, three of five classes on Infant/Toddler and Provider mental health have been created for release to all Tier 1 providers.   
• The state has increased the number of trainees enrolling for university graduate credit during training. Fifteen trainees in spring 2022 and nine trainees in fall 2022 enrolled for university credit.   
  
Child Find & Workforce (Renamed)   
Regarding the strategies described in the Child Find and Workforce Action Strand, the following outcomes were achieved during this reporting period.   
• State work team consisting of the state PD representative and service coordinators from across the state completed the Johns Hopkins RBM Academy.   
• A pilot program was implemented Spring of 2022, in a rural Native American community, to study the impact of community play groups as a child find activity. The pilot met with much success, resulting in a 50% increase in child find for that geographic location in the state.   
• State Part C professional development representative presented to multiple university programs across the state that prepare direct service providers and other early intervention professionals.

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

NO

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

The follow steps will be taken for each improvement strategy outlined by Action Strands on the Theory of Action and Evaluation Plans.  
  
Data Quality Improvement Strategies:  
1. South Dakota will monitor for continuous improvement in obtaining, analyzing, and reporting BDI scores for children in Part C.   
2. South Dakota will continue to provide BDI training in collaboration with 619.  
Next Steps:  
• Part C will continue to analyze data and ensure quality in collecting analyzing and reporting child outcome data from the BDI data.   
• In collaboration with Part B 619, Part C will continue to train on BDI implementation and data quality protocols.  
  
Accountability Improvement Strategy:  
1.South Dakota will develop and implement a monitoring protocol to address results and compliance.  
Next Steps:   
• Part C will determine a set of indicators that will reflect quality of IFSP processes.   
• The state will develop a set of protocol for collection, analysis, and evaluation of data to reflect quality of IFSP process.  
• The state will select a monitoring team to train and pilot the protocol.   
• The state will finalize and post Request for Proposal and award contract for a new comprehensive data system.   
  
Professional Development Improvement Strategies:   
1. South Dakota will continue to provide relevant and rigorous training under the State’s Bright Beginnings PD program.   
2. South Dakota continue to design, enhance, and deliver training and TA opportunities as identified for service coordinators, direct service providers and families.   
Next Steps:   
• Adapt existing sustained fidelity coursework to reflect state SIMR  
• Create systematic offerings of initial and sustained fidelity along with other supplemental, topical PD opportunities  
• Continue rotation of coaching to compliment the rotation of professional development courses  
• Hold a rubric calibration meeting for all coaches who work with direct service providers  
• Continue to increase statewide percentage of SC & DSP meeting initial fidelity  
• Continue to increase the percentage of SC and DSP, two years from initial fidelity, that meet sustained fidelity.  
• Continue with RBI mentor group.  
• Establish a mentor program for new providers.  
• Transition training materials to Department of Education new learning management system  
• Establish internship placements for service coordination, provider, and community engagement activities and/or pre-prep program experiences  
• Create agreements establishing the offering of Bright Beginnings as an elective course for professional preparation programs.  
• Develop data driven professional development offerings.  
• Plan and implement, in collaboration with Part B 619, a statewide early intervention conference for all private providers, school district personnel and service coordinators. This in-person conference is scheduled for August 1, 2023, in Mitchell, SD.   
  
Child Find and Workforce Improvement Strategies (Renamed):  
1. South Dakota will increase awareness of EI routines-based family engagement services to all South Dakota Families.   
2. South Dakota will attract, recruit, and retain qualified personnel to meet EI needs statewide.   
Next Steps:  
• Continue to analyze resources to assist all families to engage in EI process.   
• Finalize and post Request for Proposal and award contract for new comprehensive data system that includes a Parent Portal.   
• Develop multi-lingual materials for families including development and implementation of training regarding contextual factors for early intervention in Spanish speaking homes and for deaf and hard of hearing populations.  
• Review other state’s implementation of special instruction and/or developmental specialist.  
• Increase in Part C professionals who reside within identified communities who are disproportionately represented and explore opportunities for delivery of regional child find activities  
• Continue to explore feasibility of a new discipline for the provision of special instruction in Part C.   
• The state will begin to establish connections to higher education program prep programs to increase candidates for new discipline. Including the option for undergraduate students to complete the state DSP professional development training, Bright Beginnings, while an undergrad.   
• Explore avenues a new discipline creates with tribal colleges located across the state and opportunities for Native American graduates to enter the work force as a fully trained early intervention provider in the Part C program meeting the new discipline criteria.

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

SD will continue to implement two EBPs to improve child and family outcomes through routines-based home visiting to increase family engagement and build families confidence and competence in supporting their child’s acquisition of knowledge and skills including early language/communication.   
Those evidence-based practices include:  
1. Routines Based Interview (RBI), and  
2. Getting Ready (referred to in South Dakota as Bright Beginnings).

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

With Stakeholder input, the state selected the following two evidence-based practices:   
1. Routines Based Interview (RBI) for family assessment, implemented by SC. The RBI is conducted with each family found eligible for Part C. Family priorities, identified from the RBI, lead to functional outcomes on the IFSP.   
  
2. Getting Ready, University of Nebraska - Lincoln Center for Research on Children, Youth, Families and Schools, is implemented by direct service providers (DSP) during early intervention sessions. This EBP provides a framework to help guide exchanges, building on culturally relevant family and child strengths. It is not a curriculum or a packaged, stand-alone program, but an ecologically sound, intentional approach for infusing meaningful family engagement into all aspects of the natural early childhood environment. Getting Ready EBP strengthens relationships between DSP and families and helps DSP build parent competencies for interacting with their children, skills necessary for DSP to cultivate family and caregiver engagement as noted in the TOA.

**Provide a summary of how each evidence-based practices and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child/outcomes.**

The Routines-Based Interview is a semi-structured interview about the family's day-to-day life, focusing on the child's engagement, independence, and social relationships. Its purposes are to create a strong relationship with the family, to obtain a rich and thick description of child and family functioning, to determining the family’s ecology and the family’s needs and writing child-level functional goals and family goals. Service coordinators facilitate the three components of this evidence-based practice with all families of infants and toddlers who are found eligible for Part C program. The first component, the Ecomap, is developed to determine and depict the family’s informal, intermediate, and formal supports. The Routines-Based Interview is the second component through which service coordinators establish positive relationships with families and provides a rich and deep description of child and family functioning. The third component consists of the functional outcomes which are family chosen, child-level and family level.   
  
The Getting Ready model of early childhood intervention (Sheridan, Edwards, & Knoche, 2003) recognizes the transactional nature of young children’s development and the important role parents play in their success. In the Getting Ready model, collaborative partnerships between parents and DSP are encouraged to promote parent’s competence and confidence in maximizing children’s natural learning opportunities and preparing both parents and children for long-term success. Parent-child interactions in everyday experiences, mutual observations and goal-directed problem solving, and young children’s successful development constitute the input, processes, and outcomes of the Getting Ready model.   
The combining of these two evidence-based practices results in greater family engagement and increased child and family outcomes. Early intervention, when done as intended result in:   
• Enhanced ability for DSP to implement individualized and culturally sensitive early intervention home visits that emphasize parent child interactions during typical routines in children’s homes and early care settings  
• Greater ability to promote families’ understanding of and ability to positively support, young children’s physical, social, emotional, cognitive and language development  
• Promote family awareness of strategies to increase language and literacy rich learning experiences for their children.

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

1. Routines Based Interview – service coordinators are assessed through the initial fidelity review process using RBI criteria checklist by their assigned peer coach and second reviewer. Those who meet the criteria receive a “Certificate of Recognition” from state office.   
• During this reporting period three service coordinators took part in the initial fidelity process. 100% of service coordinators met initial fidelity. Four service coordinators took part in the sustained fidelity; 100% of service coordinators met sustained fidelity.   
  
As part of the state data system, service coordinators will enter RBI information into the online IFSP system. From here state team members will be able to do spot checks to determine if RBIs are being done consistently. Service Coordinators will also be required to make note in the data system if an RBI has been completed for an IFSP.   
  
Having gained significant knowledge about RBI sustained fidelity from participation in the John’s Hopkins RBM Academy, the state will continue the virtual RBI Mentor Group. The next RBI mentor group will meet four times a year, with each meeting focusing on reflexive and reflective practice of one piece of the RBI at a time and culminating in a fidelity review.   
  
2. Getting Ready – DSP are assessed through the initial fidelity review process using the evidence-based practice checklist by their assigned peer and master coach. Those who meet the criteria in implementing the evidence-based practice receive a “Certificate of Recognition” from South Dakota Department of Education. The certificate indicates they are “Recognized” as proficient in the EBP having met the established criteria and are a Tier 1 DSP.   
• 100% of direct service providers who participated in an initial fidelity review met the criteria during this reporting period.   
  
During the reporting period of the state conducted sustained fidelity reviews for eight DSP who met initial fidelity 2 years prior. 100% of the providers met sustained fidelity. Over 80% met fidelity with one video submission, the remaining met with additional coaching and a second video submission. Family surveys are also collected as part of the sustained fidelity review process. These surveys are aligned to the EBP fidelity criteria and indicate overwhelming agreement with the impact the EBP has had on their family.   
  
The state is currently developing an RFP to purchase a new data system. The existing data system was deemed obsolete by the state’s technology agency, in late 2022. The legacy system was created by the State’s technology agency and has outlived its capacity and capabilities. To assist in more seamless data collection, reduction of repetitive work, connection between families, providers, and service coordinators, a new data system is necessary. Stakeholders have been engaged in the process from early conception to ensure the best product available to meet the state’s current and future needs. The state is utilizing the OSEP sponsored DaSy technical assistance throughout these activities.

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

The state gathers feedback from direct service providers throughout the professional development. This reporting period survey responses on the influence this model has had on providers relationships with families include:   
Question: This training influences my thinking about…  
Examples of responses:   
• It takes everyone to work with the child and not just 30 minutes 1 time a week to make success happen and the process takes time.  
• How to use my skills and knowledge as a SLP to educate rather than treat, treat, treat.  
• How to make the parents confident and capable of becoming their child's first teacher!  
• Empowering parents, caregivers, and families to take the lead in helping their children progress in all areas of concern.  
  
Question: The most critical thing I have learned is…   
Examples of responses:  
• How I can empower parents and families.   
• How to take a step back from the traditional medical model of just plain “providing services” and to help facilitate the family’s role in their child’s growth and development.   
  
Question: Was learning this model of family centered early intervention useful?  
99% indicated strongly agree or agree  
  
The state uses the ECO Family Outcome Survey to provide data for indicator C4. The survey supports the state’s efforts to engage families by building confidence and competence in supporting their infant or toddler with developmental delays or disabilities. One portion of the survey asks families a series of question related to communicating their child(s) needs.   
The survey asks families “How helpful has early intervention been in….. listening to you and respecting your choices"  
• 98% of families responded the Part C program was very helpful or extremely helpful.   
• Notably 100% of Native American families responded as very helpful or extremely helpful.   
• Talking with you about your child and family’s strengths and needs.  
• 96% families responded the Part C program was very helpful or extremely helpful.

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

South Dakota will continue to implement training on the selected evidence-based practices.   
  
Routines Based Interview: Service coordinator training on the RBI evidence-based practice will continue as new service coordinators come on board. Participants of the next RBI Mentoring Group will begin their sustained fidelity reviews in the coming reporting period.   
  
Getting Ready: With restructuring DSP EBP professional development training and coaching calendars each cohort increased participants by more than 70%. During the FFY2022 reporting period, the state anticipates completing two additional training cohorts. Due to these significant increases, the state anticipates statewide implementation by 2023.

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

NO

**If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.**

The reader will note throughout this FFY 2021SSIP report, the state has described completed activities, outcomes achieved, and next steps. Any adjustments, or modifications were discussed in detail based on the evaluation data provided, including stakeholder input.  
  
Getting Ready: Having restructured the EBP professional development training and coaching schedule, each cohort is now able to accommodate 70% more participants. This has resulted in the state moving closer to statewide implementation in December 2023.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

The South Dakota Part C Birth to Three program has a strong relationship with the State Interagency Coordinating Council (SICC). Through regularly scheduled quarterly meetings, members are kept abreast of program development and data trends. The majority of SICC meetings are held virtually to accommodate members significant travel distances. To ensure transparency, State ICC meeting dates, times, agendas, and meeting minutes are posted on the South Dakota Boards and Commissions website https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=57. These meetings are open to the public. Meeting announcements are posted a minimum of 72 hours before the meeting is scheduled, not including weekends and holidays. Information on how to join the meeting either virtually or in person are also made available at the time agendas are posted. Accommodations are made available with adequate notice. Each meeting of the SICC contains a Public Comment period, during this time the SICC Chair asks for any public comment. This is reflected in the presentation and minutes of each meeting. A final copy of the SPP/APR is provided to the Secretary of Education who is a member of the Governor's cabinet.   
  
Members of the stakeholder group represent a wide spectrum of South Dakota and are located throughout the state. To ensure a broad overview of the state early intervention and demographics, SICC members represent a wide variety of programs and agencies such as Head Start / Early Head Start, the Division of Insurance, early intervention providers, parents, South Dakota’s Parent Training and Information Center (PTI) Parent Connection, South Dakota Department of Health/Maternal, Infant and Early Childhood Home Visiting (MIECHV) Bright Start, South Dakota State University Early Childhood Personnel Preparation, South Dakota Medical Service/Medicaid, South Dakota Office of Coordination of Homeless Children, South Dakota Foster Care/Child Protection Services/Auxiliary Placement, South Dakota Department of Human Services/Developmental Disabilities, South Dakota Child Care Services, Birth to Three regional program contractors, South Dakota education cooperative, Part B, Part B 619, school district special education administration, Tribal Head Start, South Dakota Head Start, South Dakota State Legislator and Part C staff.   
  
As was described last year, the SICC was heavily involved in the planning and writing of the FFY 2020 - FFY 2025 Birth to Three SPP/APR and SSIP plan. During FFY 2021, SICC members continued to meet through regularly scheduled SICC meetings, stakeholder meetings and working sessions providing the state with feedback on indicator performance, data analysis in relation to targets, SSIP implementation and other communications.   
  
To ensure broad representation, the stakeholders represent a variety of factors including demographics such as county residence, city vs. rural, geographic location within the state, race/ethnicity of self and of household, current employer, previous employment as relates to children and families, civic or community organization affiliation. Stakeholders indicate representing state’s geographic lay out, including those residing on tribal lands. Stakeholders identify themselves or their household as 21% Native American, 4% Black or African American, 9% Hispanic, 4% Native Hawaiian, 4% 2 or more races and 58% white. Stakeholder group consisted of 10 parents who self-reported employment, both present and past increased the representation to include childcare provider, small business owner, tribal school district, educator, Indian Health Services, researcher with Indigenous communities, school board member, elementary educator, foster parents, residential treatment center aid. Civic entities represented youth sporting, 4H, religious entities, child protection councils, domestic abuse shelter, developmental disabilities, Boys and Girls club, residential centers, tribal school district, professional association, social worker, residential counselor and United Way. The diversity of the stakeholder membership and the broad reach of their work outside of the Part C stakeholder group and experience working with families leads to valuable discussions of resources, challenges, initiative, and recommendations.   
  
As described in the FFY 2020 SPP/APR submission, small topical workgroups met multiple times to analyze data, methodologies, and proposed targets. These small workgroup findings were presented to the full SICC during the November 2021 meeting and formally adopted for the SPP/APR FFY 2020 - 2025 package.   
  
Beginning in July 2021, the SICC convened to review Birth to Three 2021 Determinations in relation to state performance and progress towards SSIP implementation. At each SICC meeting, during FFY 2021, state team members shared State Systemic Improvement Plan activities and updates, recent COVID-19 data, and preliminary data for the FFY 2021 SPP/APR.   
  
In November 2022, SICC members met for a day-long retreat, led by a content expert from the Early Childhood Technical Assistance Center (ECTA), to begin analyzing state and regional FFY 2021 data in conjunction with targets and progress towards the State Systemic Improvement Plan. This work was finalized during the January 2023 meeting. The SICC unanimously determined to leave targets as presented, with no changes.   
  
Other Stakeholders, providing feedback in the state’s SPP/APR include monthly communication with all service coordinators, including the service coordinator mentoring group, and quarterly meetings with direct service providers who have reached Tier 1 status (Tier 1 status are those direct service providers who have successfully completed all mandatory professional development and fidelity criteria and are implementing the state evidence-based practice as intended).   
  
The reader will note throughout the SPP/APR, additional stakeholder input will be described within respective indicators.

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

South Dakota greatly values the input stakeholders have provided throughout the SSIP process and continues to seek input for continuous program improvement. Over this reporting year, the Part C program professional development staff met regularly with the service coordinator group as well as the RBI Mentor group. Both groups meet monthly to provide input and suggestions to the state.   
  
The professional development staff meet regularly with contracted content experts, instructors, peer coaches and master coaches to evaluate progress and determine any needs for improvement. Through pre and post surveys, the state gathers valuable input from direct service providers and service coordinators who are participating in their respective professional development trainings. Survey responses measure if training was useful and if participants believe it will improve child and family outcomes. Participants also share the impact of implementing the new EBP has on their professional interactions with families.   
  
In spring 2022 the state established a Tier 1 direct service provider listening group. This group, led by an existing Tier 1 service provider who had also served as a Peer and Master coach met quarterly to discuss implementation of EBP. Participants were able to share and learn from each other and also provide feedback to the state through the Tier 1 leader.   
  
Throughout the year the state met with small workgroups and large stakeholder groups to review the state’s performance and provide feedback on implementation of the SSIP. If was through a large stakeholder group meeting in the spring of 2021 the state determined to move forward with the creation of quality videos starring direct service providers, service coordinators, families, and experts in early childhood development. The goal was to provide powerful images and messages, in the words of those who are directly involved in implementing the evidence-based practices. The State contracted with a video production company, Overneath Creative, who produced eight heart pulling videos that are available for new families to demonstrate what to expect from the South Dakota Part C program and what their role is in their child’s experiences. These videos are also used to support the learning of trainees as they progress in their knowledge of the EBP known as Bright Beginnings. The reader can view these videos here: https://drive.google.com/drive/folders/1HzCQ0jUCvgUsa5THrwpzZCkR1124IWTG?usp=sharing.  
  
Direct service providers stakeholder groups were instrumental in the state’s pursual of university credit for the Bright Beginnings training. The state PD specialist restructured the training to ensure alignment of graduate credit expectations in turn it was approved by the South Dakota Board of Regents and South Dakota State University. Enrollment in these graduate credit bearing courses is equal to and sometimes surpass average SDSU graduate course enrollment.   
  
Throughout the year the state has met with small work groups and large stakeholder groups to discuss the state’s performance. A culmination of these meeting occurred in November 2022. Here stakeholders took a full day to review the state’s SSIP and subsequently brought forward recommendations for activities which led to the revision of the exiting evaluation plan. This meeting is described in greater detail in the SPP/APR Introduction and throughout the SSIP.   
  
The state firmly believes it is through broad, continuous stakeholder input progress towards the SiMR and statewide implementation of EBP have occurred. Directly involving parent and early intervention providers have improved the state’s ability to continually improve efforts, with no delays in implementation.

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

NO

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

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

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

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

As the state moves to training saturation, the lines between the Theory of Action Strands are becoming more symbiotic, it is becoming increasingly difficult to disaggregate according to individual strands. We have moved beyond the confines of simple strands and leveraging the power of sustainable practice with reciprocal partnerships to what is often referred to in education as “Dual Capacity Building”. We have built and continue to enhance the capacity of direct service providers, service coordinators and families in their respective roles to be capable and connected, while increasing their cognition and confidence. Providers feel empowered by the evidence-based practice to allow all families to engage in a variety of roles such as co-creators, encouragers, monitors, and advocates for early intervention. This has promoted a higher understanding of and purposeful implementation of the State’s Theory of Action.

## 11 - Prior FFY Required Actions

The State must provide the required numerator and denominator descriptions within the data table in the FFY 2021 SPP/APR.

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

The State provided the required numerator and denominator descriptions within the data table in the FFY 2021 SPP/APR. Numerator represents Indicator C3B progress categories c+d. Denominator represents Indicator C3B progress categories a+b+c+d.

## 11 - OSEP Response

## 11 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role**

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:**

Sarah Carter

**Title:**

Part C Coordinator

**Email:**

sarah.carter@state.sd.us

**Phone:**

605-773-4478

**Submitted on:**

04/17/23 6:02:03 PM

# Determination Enclosures

## RDA Matrix

**South Dakota**

2023 Part C Results-Driven Accountability Matrix

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

| **Percentage (%)** | **Determination** |
| --- | --- |
| 87.50% | Meets Requirements |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 8 | 6 | 75.00% |
| **Compliance** | 14 | 14 | 100.00% |

**2023 Part C Results Matrix**

**I. Data Quality**

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

|  |  |
| --- | --- |
| Number of Children Reported in Indicator C3 (i.e., outcome data) | 541 |
| Number of Children Reported Exiting in 618 Data (i.e., 618 exiting data) | 963 |
| Percentage of Children Exiting who are Included in Outcome Data (%) | 56.18 |
| **Data Completeness Score[[2]](#footnote-3)** | 1 |

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

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

**II. Child Performance**

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

|  |  |
| --- | --- |
| **Data Comparison Score[[4]](#footnote-5)** | 2 |

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

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

| **Summary Statement Performance** | **Outcome A: Positive Social Relationships SS1 (%)** | **Outcome A: Positive Social Relationships SS2 (%)** | **Outcome B: Knowledge  and Skills SS1 (%)** | **Outcome B: Knowledge and Skills SS2 (%)** | **Outcome C: Actions to Meet Needs  SS1 (%)** | **Outcome C: Actions to Meet Needs SS2 (%)** |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY 2021** | 38.63% | 71.35% | 74.16% | 57.30% | 88.76% | 77.82% |
| **FFY 2020** | 41.00% | 72.45% | 75.00% | 54.76% | 91.21% | 81.80% |

**2023 Part C Compliance Matrix**

| **Part C Compliance Indicator[[6]](#footnote-7)** | **Performance (%)** | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 1: Timely service provision** | 99.14% | YES | 2 |
| **Indicator 7: 45-day timeline** | 100.00% | YES | 2 |
| **Indicator 8A: Timely transition plan** | 99.40% | YES | 2 |
| **Indicator 8B: Transition notification** | 100.00% | N/A | 2 |
| **Indicator 8C: Timely transition conference** | 99.40% | YES | 2 |
| **Timely and Accurate State-Reported Data** | 100.00% |  | 2 |
| **Timely State Complaint Decisions** | N/A |  | N/A |
| **Timely Due Process Hearing Decisions** | N/A |  | N/A |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

**Appendix A**

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

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

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

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

**Appendix B**

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

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

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

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

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

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

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

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

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

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

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

|  |  |
| --- | --- |
| **Number of Infants and Toddlers with IFSP’s Assessed in your State** | **541** |

| **Outcome A — Positive Social Relationships** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 5 | 138 | 12 | 78 | 308 |
| **Performance (%)** | 0.92% | 25.51% | 2.22% | 14.42% | 56.93% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome B — Knowledge and Skills** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 1 | 107 | 123 | 187 | 123 |
| **Performance (%)** | 0.18% | 19.78% | 22.74% | 34.57% | 22.74% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

| **Outcome C — Actions to Meet Needs** | **Category a** | **Category b** | **Category c** | **Category d** | **Category e** |
| --- | --- | --- | --- | --- | --- |
| **State Performance** | 1 | 29 | 90 | 147 | 274 |
| **Performance (%)** | 0.18% | 5.36% | 16.64% | 27.17% | 50.65% |
| **Scores** | 1 | 1 | 1 | 1 | 1 |

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

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

**Appendix C**

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

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

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

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

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

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

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

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

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

| **Summary Statement (SS)** | **Outcome A: Positive Social Relationships SS1** | **Outcome A: Positive Social Relationships SS2** | **Outcome B: Knowledge and Skills SS1** | **Outcome B: Knowledge and Skills SS2** | **Outcome C: Actions to meet needs SS1** | **Outcome C: Actions to meet needs SS2** |
| --- | --- | --- | --- | --- | --- | --- |
| **Performance (%)** | 38.63% | 71.35% | 74.16% | 57.30% | 88.76% | 77.82% |
| **Points** | 0 | 2 | 1 | 2 | 2 | 2 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2(\*)** | 9 |

|  |  |
| --- | --- |
| **Your State’s Data Comparison Score** | 2 |

**Appendix D**

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

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

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

**Test of Proportional Difference Calculation Overview**

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

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

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

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

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

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

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

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

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

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

0 = statistically significant decrease from FFY 2020 to FFY 2021

1 = No statistically significant change

2= statistically significant increase from FFY 2020 to FFY 2021

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

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

| **Summary Statement/ Child Outcome** | **FFY 2020 N** | **FFY 2020 Summary Statement (%)** | **FFY 2021 N** | **FFY 2021 Summary Statement (%)** | **Difference between Percentages (%)** | **Std Error** | **z value** | **p-value** | **p<=.05** | **Score: 0 = significant decrease; 1 = no significant change; 2 = significant increase** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SS1/Outcome A: Positive Social Relationships** | 239 | 41.00% | 233 | 38.63% | -2.38 | 0.0451 | -0.5277 | 0.5977 | NO | 1 |
| **SS1/Outcome B: Knowledge and Skills** | 452 | 75.00% | 418 | 74.16% | -0.84 | 0.0296 | -0.2834 | 0.7769 | NO | 1 |
| **SS1/Outcome C: Actions to meet needs** | 307 | 91.21% | 267 | 88.76% | -2.44 | 0.0252 | -0.9689 | 0.3326 | NO | 1 |
| **SS2/Outcome A: Positive Social Relationships** | 588 | 72.45% | 541 | 71.35% | -1.10 | 0.0268 | -0.4106 | 0.6814 | NO | 1 |
| **SS2/Outcome B: Knowledge and Skills** | 588 | 54.76% | 541 | 57.30% | 2.54 | 0.0296 | 0.8592 | 0.3902 | NO | 1 |
| **SS2/Outcome C: Actions to meet needs** | 588 | 81.80% | 541 | 77.82% | -3.98 | 0.0239 | -1.6654 | 0.0958 | NO | 1 |

|  |  |
| --- | --- |
| **Total Points Across SS1 and SS2** | **6** |

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

## Data Rubric

**South Dakota**

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

|  | **Part C Timely and Accurate Data -- SPP/APR Data** |  |
| --- | --- | --- |
| **APR Indicator** | **Valid and Reliable** | **Total** |
| **1** | 1 | 1 |
| **2** | 1 | 1 |
| **3** | 1 | 1 |
| **4** | 1 | 1 |
| **5** | 1 | 1 |
| **6** | 1 | 1 |
| **7** | 1 | 1 |
| **8A** | 1 | 1 |
| **8B** | 1 | 1 |
| **8C** | 1 | 1 |
| **9** | 1 | 1 |
| **10** | 1 | 1 |
| **11** | 1 | 1 |
|  | **Subtotal** | 13 |
| **APR Score Calculation** | **Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right. | 5 |
|  | **Grand Total** - (Sum of Subtotal and Timely Submission Points) = | 18 |

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

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 18 |
| B. 618 Grand Total | 18.00 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 36.00 |
| Total N/A Points in APR Data Table Subtracted from Denominator | 0 |
| Total N/A Points in 618 Data Table Subtracted from Denominator | 0.00 |
| **Denominator** | 36.00 |
| D. Subtotal (C divided by Denominator\*) = | 1.0000 |
| E. Indicator Score (Subtotal D x 100) = | 100.00 |

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

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

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

**DATE: February 2023 Submission**

**SPP/APR Data**

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

**Part C 618 Data**

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

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

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

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

## Dispute Resolution



## How the Department Made Determinations

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

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

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