STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on
FFY 2022

South Carolina

PART B DUE February 1, 2024

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary

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

The Office of Special Education Services' (OSES) strategic vision includes a goal that by 2030, every student served under IDEA will be academically

and functionally prepared for adult living. Among other things, this will be evidenced by the State increasing the percentage of students with IEPs who graduate with a diploma or complete the employability credential to 75%.

OSES is currently organized into 5 teams (3 program, fiscal, and data). The priorities of the Office of Special Education Services (OSES) are to: (1) develop and maintaining an effective and comprehensive system of general supervision; (2) provide timely and meaningful technical assistance and support to LEAs; and (3) develop and maintain programs and initiatives to address critical areas of need for the State. The critical areas of need for serving students with disabilities include early childhood literacy, graduation/drop-out rates, mental health and student behavior, and addressing the teacher/service provider shortage.

Additional information related to data collection and reporting

The SCDE completed the procurement process and has selected a new vendor (Public Consulting Group or PCG) to provide the statewide IEP data and management system. Throughout this reporting period the OSES has been working on configurations and data reports with the vendor to customize the product for our state and federal data collection requirements. Hard stop validations were incorporated into the system to ensure valid and reliable data (e.g., the system would not validate if basic demographics were missing). For the FFY24 SPP/APR OSES will be using new IEP data system (EdPlan SC) for reporting (FFY 2023 will continue to use the legacy system, SC Enrich, for reporting purposes).

Number of Districts in your State/Territory during reporting year

82

General Supervision System:

The systems that are in place to ensure that the IDEA Part B requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions).

The SCDE has a system of general supervision in place to ensure that the Individuals with Disabilities Education Act (IDEA) Part B requirements are met. This system is designed to ensure that students with disabilities receive a free and appropriate public education (FAPE). The system is described in the OSES General Supervision Guide https://ed.sc.gov/districts-schools/special-education-services/integrated-monitoring/general-supervision-guide/general-supervision-guide/ and in the links embedded in the Guide. Currently, the OSES is working on revisions to the General Supervision Guide to align and incorporate the guidance (23-01) issued by OSEP in July of 2023, and in anticipation of the DMS report from OSEP.

Under new leadership, the OSES has been organized into 5 teams.

The Review and Analysis Team conducts cyclic program monitoring of our Leas. Leas are divided into a six-year cycle. LEAs are reviewed at least once within that 6-year period. The team monitors approximately 15 LEAs per year. During the monitoring process each LEA is required to turn in their policies and procedures for review, related service provider logs, and caseloads for review to determine if teachers are appropriately certified for the classroom they are teaching and if caseload numbers are appropriate. Surveys are also sent to parents, special education teachers and general education teachers for additional information. As part of the monitoring process each LEA is required to submit a variety of individual student files for a desk audit in various disability areas, initial evaluations, part B to C transitions, revocations, dismissals, and discipline. The number of individual files reviewed can vary by LEA size and data from other sources such as indicator data, complaints, and determinations. The team can review 20-40 files. Following the desk audit the team conducts an on-site visit. During the visit the team conducts in-person interviews with administrators and parents. They also conduct implementation of IEPs reviewed in the desk audit by visiting student classrooms for a subset of reviewed files to ensure students are receiving the services in their IEPs. Upon completion of the program monitoring LEAs receive a findings letter indicating any non-compliance that was found during the monitoring that will need corrections, the timeline for completion of those corrections, and the contact information for the correction specialist who will be working with the LEA until corrections are completed.

The corrections specialists are on the Improvement and Support Team. Corrections specialists work closely with LEAs who receive findings letters to align them with targeted technical assistance, review individual student corrections, and verify and collect any other documentation related to the program monitoring process, noncompliant indicators, and complaints. LEAs with indicator noncompliance work with the corrections specialist to ensure accurate corrections have taken place. To ensure that the LEA has sustained compliance the following year's data set is analyzed to determine if the LEA has continued to meet or exceed the threshold. If the LEA continues to meet the threshold the following year, OSES staff will take over the file review piece instead of self-reviews. Corrections specialists also work individually with LEAs with State complaint findings to ensure accurate corrections in a timely manner, as early as possible but no later than one year.

The Implementation Support Team provides assistance to LEAs on identified areas of need (based on SPP profiles and LEA determinations) and supports the implementation of programs and activities to address critical areas for IDEA implementation in the State (early childhood literacy, graduation/drop-out rates, mental health and student behavior, and addressing the teacher/service provider shortage). The Implementation Support Team works closely with our technical assistance agencies to provide LEAs with access to universal supports and targeted intervention. During this

reporting period, the OSES has worked with the National Implementation Research Network (NIRN) to strengthen our technical assistance network, which is SC TEAMS. Using implementation science principles, the OSES worked to create a new website platform and formed a united system of supports with input from all four TA centers. The unified alliance of our TA centers will be able to triage requests for assistance from LEAs and offer universal supports and targeted intervention collaboratively.

The Policy, Guidance and Community Engagement Team provides guidance on IDEA policies to LEAs, stakeholders, staff, parents, and the community regarding policies, procedures and implementation of IDEA, community outreach input and training. Parent training modules were developed in partnership with Disability Rights South Carolina and our Parent Training and Information Center, Family Connection of South Carolina, during this reporting period, and will be launched during FFY23.

The Data Collection and Verification Team supplies timely and accurate data to all program teams. Specifically, they collect, verify, and deliver data for: SPP/APR, the SSIP, Section 619 reports, LEA determinations, program evaluations, project data collections, and data requests by staff.

The Fiscal and Grants Management (FGM) team manages State IDEA funds which includes IDEA grant applications, LEA fiscal reviews, OSES budget and expenditures, OSES contract management, MOE compliance, excess cost compliance, and MSFS compliance. Fiscal and Grants Management utilizes a three-tier model to ensure LEAs are appropriately allocating and expending funds and resources received under the grant provisions of the IDEA with the purpose of improving outcomes. This process is separate from program monitoring. Fiscal monitoring is conducted annually using self-assessment. These results are then included in a risk assessment that guides additional, more targeted and intensive monitoring activities such as desk audits and file reviews. Data from the fiscal monitoring process is integrated with data from other components of the system in the LEA Determinations. The FGM Team utilizes a risk-based tiered model to ensure LEAs are appropriately allocating and expending funds and resources they receive under the grant provisions. The tiered monitoring system includes increasing levels of scrutiny of processes and documentation through a tiered progression.

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 LEAs.

The OSES provides high quality, evidence-based technical assistance (TA) and support to LEAs. Technical assistance is provided through a tiered system of supports. All LEAs can request TA from the OSES and SC TEAMS at any time to support their needs. Topics requested include compliance, fiscal support, instructional support, and interpreting data. There are a variety of evidence-based resources on the OSES website as well as our SC TEAMS technical assistance website https://scteams.org/.

The OSES has contracts with four technical assistance centers housed in two institutes of higher education which include, the Transition Alliance of South Carolina (TASC), the South Carolina Partnership for Inclusion (SCPI), the Academic Alliance of South Carolina (AASC), and the Behavior Alliance of South Carolina (BASC). In addition, the OSES has contracts with the state's parent and training and information center, Family Connection of SC, and SC ABLE, a nonprofit organization representing individuals with disabilities. This past year, LEAs were able to request support from these TA centers as needed. The four OSES funded TA centers form a single TA network that is called SC TEAMS.

SC TEAMS, in collaboration with OSES, worked to build a website that launched in January 2024. The site combines all four technical assistance centers and provides evidence-based resources for LEAs as well as training modules and other resources. SC TEAMS and OSES also collaborated to plan a four-day Summer University event held in July of 2023 that focused on evidence-based resources for educators. This will become an annual event.

OSES worked in collaboration with SC TEAMS to provide universal supports focused on most common needs. Technical assistance continued for LEAs who were previously partnered with TA centers for support. The OSES and SC TEAMS provided professional development and targeted technical assistance based on specific LEA requests.

In the 2022-2023 school year, many schools were identified for designations for Every Student Succeeds Act's Additional Targeted Support and Improvement (ATSI), based on performance of students with disabilities. The OSES collaborates with the Office of School Transformation (OST) to ensure that ATSI plans for these schools include evidence-based practices aligned to identified needs for students with disabilities.

New Director's Leadership Academy (NDLA) continued this year to provide quarterly support to LEA administrators in their first few years in their position and continues to be based on the Council for Exceptional Children (CEC) Advanced Administrator Special Education Professional Leadership Standards and consists of a combination of virtual and face-to-face sessions. OSES works with SC CEC's Council for Administrators for Special Education (SC CASE) to provide mentors for our new directors. Veteran directors are matched with a new director to offer support.

District data managers are offered a combination of face-to-face and virtual professional development sessions. Each month, data managers are provided with support for the upcoming reports that are due to the OSES. The OSES data team also receives guidance and attends sessions with IDC, Westat, and Wested on strategies to improve data collections and reporting. The OSES data team has implemented the use of the SEA Edit Check Tools.

District special education directors and chief financial officers are offered TA in areas such as maintenance of effort (MOE) calculations, excess cost calculations, allowable cost, proportionate share, IDEA fiscal responsibilities, EDGAR regulations and Uniform Grant Guidance requirements. Districts are offered more intensive TA based on their fiscal data and by request.

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.

SC TEAMS is made up of a combination of experienced educators, researchers, and institutions of higher education (IHEs) who are highly knowledgeable in the areas of best practices for students with disabilities. OSES meets with these TA centers at least monthly to ensure accuracy and alignment with OSES policies and practices.

The OSES utilizes SC TEAMS to provide high quality, evidence-based technical assistance (TA) and support to LEAs. Technical assistance is provided through a tiered system of supports. Universal support is provided to all LEAs to improve instructional practices. LEAs can also request individualized professional development from the OSES and SC TEAMS at any time to support their needs. There are a variety of evidence-based professional

development opportunities including communities of practice (i.e., autism, inclusion, DEC recommended practices, graduation team), webinars (i.e., transition series, dropout prevention series), and conferences (i.e., Early Childhood Inclusion Institute).

Stakeholder Engagement:

The mechanisms for broad stakeholder engagement, including activities carried out to obtain input from, and build the capacity of, a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting and any subsequent revisions to targets, analyzing data, developing improvement strategies, and evaluating progress.

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

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

YES

Number of Parent Members:

26

Parent Members Engagement:

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

During the current reporting period, the OSES gave updates on our current data regarding state performance on SPP/APR targets. Input was solicited from our state advisory council (ACESD) on maintaining targets, providing additional support to LEAs, and other suggestions for improvement. ACESD is comprised of representatives including 26 parents of students with disabilities. OSES revised its SSIP and gathered feedback on baseline data and targets for Indicator 17.

Activities to Improve Outcomes for Children with Disabilities:

The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.

Among other things, the OSES provided professional development to diverse groups of parents, students, and other community stakeholders. This included the following activities and trainings:

Federation of Families Conference – IEPs 101 which educated parents on how to read their child's IEP and better advocate for their child.

Hopes and Dreams Conference – Presented to parents and community stakeholders on part C to B transition

South Carolina Council for Exceptional Children Conference - Presented to parents, educators, and community stakeholders on Literacy and the Science of Reading, Part C to B transition, Recruitment and retention collaboration session, Post Secondary Transition, Early Literacy, and Victory SC.

Soliciting Public Input:

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

Originally the SPP/APR was discussed in the summer of 2022 with new special education directors. In the Fall of 2022 at the Special Education Leadership Meeting, over 200 stakeholders received information and updates about the SPP/APR progress. The leadership meeting offered an opportunity to solicit input from stakeholders about the indicators. The stakeholders in attendance represented administrators from every LEA in the state. These administrators included local special education directors, coordinators, school psychologists, speech-language pathologists, and other LEA-level administrators.

The SCDE also shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). The South Carolina ACESD partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR are shared at the quarterly meeting with this group. The targets were shared with our Joint Citizens and Legislative Committee on Children, and feedback was solicited from this group.

During this reporting period, input on evaluation and improvement strategies was gathered on our progress for all the indicators. OSES also gathered public input for setting baseline data and targets for our SSIP through our LEA administrators bi-monthly meeting on June 18, 2023, and other SCDE office collaborative meetings in May of 2023, and June of 2023. Input was also collected after June 30th from our advisory council that will be reported in next year's SPP/APR.

OSES is revising the State's eligibility criteria for entry into special education programs. During this reporting period a stakeholder group worked on the revisions and made those draft revisions public on the OSES website with a link provided to allow for comments, concerns, and questions. The stakeholder group then incorporated that feedback into a revised draft that was ready to go through the regulation process. That process will be reported on the next SPP/APR.

Making Results Available to the Public:

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

The OSES shared the completed FFY 2022 SPP/APR with special education directors, and the ACESD. The SCDE also posts a link to the State's SPP/APR on the SCDE website every July.

Reporting to the Public

How and where the State reported to the public on the FFY 2021 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2021 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, is available.

The LEA profiles, which include the performance of each LEA on the targets in the SPP/APR are located at https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/data-collection-and-reporting/state-performance-plan-and-state-determinations/

The State provided a link on its website to its FFY 2021 APR at https://www.ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/state-performance-plan-and-state-determinations/

A State Performance Plan webpage is located at https://www.ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/state-performance-plan-and-state-determinations/

A stakeholder input page for the SPP/APR is located at https://www.ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/data-collection-and-reporting/state-performance-plan-and-state-determinations/spp-apr-stakeholder-input/

Following final submission to OSEP, the OSES will post a complete copy of the FFY 2022 SPP/APR for South Carolina.

Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2021 SPP/APR

Consistent with the determination of Needs Assistance, South Carolina has accessed technical assistance from various sources including OSEP-funded centers during FFY22. The various forms of support have included conference calls, use of materials and fact sheets, on-site and virtual consultation and training, webinars, monthly state TA meetings (Results Based Accountability Support Group (RBAS), Evidence Based Practices (EBP), Significant Disproportionality, Early Childhood Technical Assistance Center (ECTA), E-newsletters, video conferencing, modules, and social media.

The National Center for Systemic Improvement (NCSI), the IDEA Data Center (IDC), National Center for Education Outcomes (NCEO), Early Childhood Technical Assistance Center (ECTA), IDEA Early Childhood Data Systems (DaSy), National Implementation Research Network (NIRN) and the Center for IDEA Fiscal Reporting (CIFR) have been the TA centers providing the majority of support for the SPP/APR process, the review and revision of the state's general supervision system, and the development, review, and revision of fiscal policies, procedures, and practices. ECTA and DaSy facilitated the discussion around indicator 6 and 7 and getting stakeholder input. IDC and NCEO have assisted with the revisions of the SSIP. South Carolina has continued to work with IDC on data quality peer groups.

NCEO has worked consistently with the OSES SSIP team during bi-monthly meetings for the SSIP, reviewing draft language for the Theory of Action and Evaluation Plan. As a result of the technical assistance provided by NCEO the OSES has revised its SiMR and theory of action and updated its evaluation plan to be more concise and incorporate the collaboration of other offices within the South Carolina Department of Education and align our SSIP to other state initiatives by providing additional specific professional development, support and technical assistance for special education teachers. They have been instrumental in helping us move forward with the SSIP process including revising the Theory of Action and Evaluation Plan.

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

NCSI and its various monthly state TA meetings have been influential in helping the OSES revise and update our system of general supervision. In addition, in June of 2023, representatives from NCSI and IDC came to South Carolina and provided intensive technical assistance to assist in analyzing the strengths and weaknesses of the system of general supervision and in mapping out the steps to improve the system.

Collaboration with NIRN has included Implementation Science training for all OSES staff and our SCTEAMS technical assistance providers. This training allowed us to be more effective in development and implementation of technical assistance and professional development which will result in improved outcomes.

The USED, Office of Special Education and Rehabilitative Services, Office of Special Education Programs (OSEP) continues to provide ongoing guidance with respect to both programmatic and fiscal areas. That support has included routine, monthly conference calls with the state liaison; periodic calls with respect to fiscal questions; email correspondence; technical assistance; national conference presentations attended by OSES staff.

Intro - OSEP Response

The State's determinations for both 2022 and 2023 were Needs Assistance. Pursuant to Section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 23, 2023 determination letter informed the State that it must report with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

Intro - Required Actions

The State's IDEA Part B determination for both 2023 and 2024 is Needs Assistance. In the State's 2024 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2023 SPP/APR submission, due February 1, 2025, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* file specification FS009.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma in the numerator and the number of all youth with IEPs who exited high school (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma. If the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma are different, please explain.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	60.13%

FFY	2017	2018	2019	2020	2021
Target >=	48.30%	50.30%	54.40%	60.13%	60.39%
Data	53.54%	52.10%	54.38%	60.13%	51.63%

Targets

FFY	2022	2023	2024	2025
Target >=	63.38%	66.38%	69.38%	72.37%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,360

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	537
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	247
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	1,905

FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
3,360	6,049	51.63%	63.38%	55.55%	Did not meet target	No Slippage

Graduation Conditions

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

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

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

South Carolina high school graduation requirements can be found at https://ed.sc.gov/districts-schools/state-accountability/high-school-courses-and-requirements/.

Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? (yes/no)

NO

Provide additional information about this indicator (optional)

The SCDE has a contract with the Transition Alliance of South Carolina (TASC) to help LEAs set up early warning systems and establish Graduation Teams to work towards improved graduation rates.

In addition, the South Carolina Department of Education was selected to receive funding under the Disability Innovation Fund (DIF)/Model Demonstration Projects Pathways to Partnerships Program (84.421E). This grant provides $9,992,013.00 for a total of 5 year(s) to develop and implement the South Carolina Pathways Project (SCPP): Disability-Led Collaborative Model for Student Success. The purpose of the SCPP is to develop an innovative, collaborative model to prepare students with disabilities to exit high school with a diploma, independent living skills, paid employment experience, an industry credential, and the means to step into their communities prepared for successful futures. The SCPP project will involve designing, implementing, and refining a multi-component collaborative model within the state of South Carolina to enhance transition services and improve post-secondary outcomes for persons with disabilities (PWDs). To develop and implement the model, the Office of Special Education Services (OSES), Able SC, South Carolina Vocation Rehabilitation (SCVR) and the University of South Carolina (USC) will partner with Local Education Agencies (LEAs) to enhance pre-employment transition services to students with disabilities and connect them with innovative services and work-based learning opportunities including paid apprenticeships.

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs who exited special education due to dropping out. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* file specification FS009.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a

state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Provide a narrative that describes what counts as dropping out for all youth. Please explain if there is a difference between what counts as dropping out for all students and what counts as dropping out for students with IEPs.

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	25.00%

FFY	2017	2018	2019	2020	2021
Target <=	3.80%	3.60%	3.40%	25.00%	23.73%
Data	4.20%	4.03%	6.02%	25.00%	31.61%

Targets

FFY	2022	2023	2024	2025
Target <=	22.46%	21.19%	19.92%	18.65%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,360
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	537
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	247
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	1,905

FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,905	6,049	31.61%	22.46%	31.49%	Did not meet target	No Slippage

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

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

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

YES

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

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

Provide additional information about this indicator (optional)

The SCDE has contracted with the Transition Alliance of South Carolina to help LEAs establish early warning systems and Graduation Teams in LEAs with low graduation rates for students with disabilities and/or high dropout rates.

In addition, the South Carolina Department of Education was selected to receive funding under the Disability Innovation Fund (DIF)/Model Demonstration Projects Pathways to Partnerships Program (84.421E). This grant provides $9,992,013.00 for a total of 5 year(s) to develop and implement the South Carolina Pathways Project (SCPP): Disability-Led Collaborative Model for Student Success. The purpose of the SCPP is to develop an innovative, collaborative model to prepare students with disabilities to exit high school with a diploma, independent living skills, paid employment experience, an industry credential, and the means to step into their communities prepared for successful futures. The SCPP project will involve designing, implementing, and refining a multi-component collaborative model within the state of South Carolina to enhance transition services and improve post-secondary outcomes for persons with disabilities (PWDs). To develop and implement the model, the Office of Special Education Services (OSES), Able SC, South Carolina Vocation Rehabilitation (SCVR) and the University of South Carolina (USC) will partner with Local Education Agencies (LEAs) to enhance pre-employment transition services to students with disabilities and connect them with innovative services and work-based learning opportunities including paid apprenticeships.

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS185 and 188.

Measurement

A. Participation rate percent = [(# of children with IEPs participating in an assessment) divided by the (total # of children with IEPs enrolled during the testing window)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3A: Provide separate reading/language arts and mathematics participation rates for children with IEPs for each of the following grades: 4, 8, & high school. Account for ALL children with IEPs, in grades 4, 8, and high school, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	89.79%
Reading	B	Grade 8	2020	79.73%
Reading	C	Grade HS	2020	82.09%
Math	A	Grade 4	2020	90.12%
Math	B	Grade 8	2020	80.36%
Math	C	Grade HS	2020	75.16%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

The South Carolina Department of Education's OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. Progress on the SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children, and feedback was solicited from this group.

During ACESD stakeholder session OSES staff highlighted how the SSIP ties to improved reading outcomes for indicator 3 and stakeholders were prompted to provide feedback. Stakeholders from within the SCDE in the office of Early Learning and Literacy and the Office of Assessment each met with the SSIP team to discuss the current initiatives between offices and how our collaboration can lead to improved outcomes for our students with disabilities in both areas of literacy and math. Members of OSES were asked to be stakeholders in developing new ELA and math standards. Our involvement as stakeholders in that process was groundbreaking for the SCDE and will only have a positive impact on improving academic outcomes for students with disabilities.

Finally, twice monthly updates are consistently provided to LEA special education administrators and technical assistance providers that include information on improving academic outcomes as well as engaging district special education leadership in helping the OSES in identifying district level needs for students with disabilities.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

01/10/2024

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	9,621	8,669	8,158
b. Children with IEPs in regular assessment with no accommodations (3)	3,570	3,414	4,895
c. Children with IEPs in regular assessment with accommodations (3)	5,438	4,462	2,290
d. Children with IEPs in alternate assessment against alternate standards	532	559	553

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

01/10/2024

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	9,619	8,667	9,149
b. Children with IEPs in regular assessment with no accommodations (3)	2,775	3,032	5,483
c. Children with IEPs in regular assessment with accommodations (3)	6,230	4,850	2,397
d. Children with IEPs in alternate assessment against alternate standards	536	568	552

(1) The children with IEPs who are English learners and took the ELP in lieu of the regular reading/language arts assessment are not included in the prefilled data in this indicator.

(2) The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the prefilled data in this indicator.

(3) The term “regular assessment” is an aggregation of the following types of assessments, as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	9,540	9,621	98.63%	95.00%	99.16%	Met target	No Slippage
B	Grade 8	8,435	8,669	96.26%	95.00%	97.30%	Met target	No Slippage
C	Grade HS	7,738	8,158	94.53%	95.00%	94.85%	Did not meet target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	9,541	9,619	98.73%	95.00%	99.19%	Met target	No Slippage
B	Grade 8	8,450	8,667	96.40%	95.00%	97.50%	Met target	No Slippage
C	Grade HS	8,432	9,149	93.03%	95.00%	92.16%	Did not meet target	No Slippage

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

The link to the assessment results is https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/statewide-data-collection-history/.

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response

3A - Required Actions

Indicator 3B: Proficiency for Children with IEPs (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3B. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS175 and 178.

Measurement

B. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3B: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the regular assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	16.51%
Reading	B	Grade 8	2020	7.14%
Reading	C	Grade HS	2020	43.81%
Math	A	Grade 4	2020	16.69%
Math	B	Grade 8	2020	4.98%
Math	C	Grade HS	2020	22.57%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	20.91%	23.11%	25.31%	27.51%
Reading	B >=	Grade 8	11.54%	13.74%	15.94%	18.14%
Reading	C >=	Grade HS	45.81%	46.81%	47.81%	48.81%
Math	A >=	Grade 4	19.78%	21.18%	22.57%	23.97%
Math	B >=	Grade 8	7.78%	9.18%	10.58%	11.98%
Math	C >=	Grade HS	26.57%	28.57%	30.57%	32.57%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

The South Carolina Department of Education's OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. Progress on the SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children, and feedback was solicited from this group.

During ACESD stakeholder session OSES staff highlighted how the SSIP ties to improved reading outcomes for indicator 3 and stakeholders were prompted to provide feedback. Stakeholders from within the SCDE in the office of Early Learning and Literacy and the Office of Assessment each met with the SSIP team to discuss the current initiatives between offices and how our collaboration can lead to improved outcomes for our students with disabilities in both areas of literacy and math. Members of OSES were asked to be stakeholders in developing new ELA and math standards. Our involvement as stakeholders in that process was groundbreaking for the SCDE and will only have a positive impact on improving academic outcomes for students with disabilities.

Finally, twice monthly updates are consistently provided to LEA special education administrators and technical assistance providers that include information on improving academic outcomes as well as engaging district special education leadership in helping the OSES in identifying district level needs for students with disabilities.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	9,008	7,876	7,185
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,384	641	2,428
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	563	351	1,055

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	9,005	7,882	7,880
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,127	266	1,829
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	522	143	743

(1)The term "regular assessment" is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot

assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	1,947	9,008	18.16%	20.91%	21.61%	Met target	No Slippage
B	Grade 8	992	7,876	7.90%	11.54%	12.60%	Met target	No Slippage
C	Grade HS	3,483	7,185	47.18%	45.81%	48.48%	Met target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	1,649	9,005	17.31%	19.78%	18.31%	Did not meet target	No Slippage
B	Grade 8	409	7,882	4.43%	7.78%	5.19%	Did not meet target	No Slippage
C	Grade HS	2,572	7,880	29.51%	26.57%	32.64%	Met target	No Slippage

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

The link to the assessment results is https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/statewide-data-collection-history/.

Provide additional information about this indicator (optional)

The SCDE recognized that a variety of flexible scheduling and calendars of instruction existed across the state as well. These changes impacted instructional opportunities for all students, including students with disabilities. The scores have not yet returned to pre-pandemic levels. The State has implemented multi-tiered systems of support to assist LEAs with meeting the unique needs of all students, including students with disabilities.

The data shows that the students with disabilities mean scores are starting to trend upwards even though scores have not returned to pre-pandemic levels. The state is utilizing multiple district avenues for assisting LEAs in improving achievement. There have been more ATSI schools identified for students with disabilities. The SCDE is providing technical assistance to districts in understanding the data, and in making data-informed decisions to improve outcomes for students with disabilities. In addition, the SCDE has launched programs and professional learning opportunities based on the Science of Reading, which have been supported by OSES staff.

3B - Prior FFY Required Actions

None

3B - OSEP Response

3B - Required Actions

Indicator 3C: Proficiency for Children with IEPs (Alternate Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3C. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS175 and 178.

Measurement

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the alternate assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the alternate assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	53.46%
Reading	B	Grade 8	2020	36.26%
Reading	C	Grade HS	2020	47.53%
Math	A	Grade 4	2020	41.70%
Math	B	Grade 8	2020	36.98%
Math	C	Grade HS	2020	38.16%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	55.46%	56.46%	57.46%	58.46%
Reading	B >=	Grade 8	38.26%	39.26%	40.26%	41.26%
Reading	C >=	Grade HS	49.53%	50.53%	51.53%	52.53%
Math	A >=	Grade 4	43.70%	44.70%	45.70%	46.70%
Math	B >=	Grade 8	38.98%	39.98%	40.98%	41.98%
Math	C >=	Grade HS	40.16%	41.16%	42.16%	43.16%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

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During ACESD stakeholder session OSES staff highlighted how the SSIP ties to improved reading outcomes for indicator 3 and stakeholders were prompted to provide feedback. Stakeholders from within the SCDE in the office of Early Learning and Literacy and the Office of Assessment each met with the SSIP team to discuss the current initiatives between offices and how our collaboration can lead to improved outcomes for our students with disabilities in both areas of literacy and math. Members of OSES were asked to be stakeholders in developing new ELA and math standards. Our involvement as stakeholders in that process was groundbreaking for the SCDE and will only have a positive impact on improving academic outcomes for students with disabilities.

Finally, twice monthly updates are consistently provided to LEA special education administrators and technical assistance providers that include information on improving academic outcomes as well as engaging district special education leadership in helping the OSES in identifying district level needs for students with disabilities.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	532	559	553
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	220	182	230

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	536	568	552
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	196	216	191

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	220	532	39.03%	55.46%	41.35%	Did not meet target	No Slippage
B	Grade 8	182	559	32.66%	38.26%	32.56%	Did not meet target	No Slippage
C	Grade HS	230	553	34.65%	49.53%	41.59%	Did not meet target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	196	536	36.58%	43.70%	36.57%	Did not meet target	No Slippage
B	Grade 8	216	568	35.68%	38.98%	38.03%	Did not meet target	No Slippage
C	Grade HS	191	552	35.18%	40.16%	34.60%	Did not meet target	No Slippage

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

The link to the assessment results is https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/statewide-data-collection-history/.

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3D. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS175 and 178.

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2022-2023 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2022-2023 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2022-2023 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2022-2023 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	29.53
Reading	B	Grade 8	2020	34.81
Reading	C	Grade HS	2020	39.68
Math	A	Grade 4	2020	25.26
Math	B	Grade 8	2020	25.77
Math	C	Grade HS	2020	26.68

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A <=	Grade 4	27.53	26.53	25.53	24.53
Reading	B <=	Grade 8	32.81	31.81	30.81	29.81
Reading	C <=	Grade HS	35.68	33.68	31.68	29.68
Math	A <=	Grade 4	23.26	22.26	21.26	20.26
Math	B <=	Grade 8	23.77	22.77	21.77	20.77
Math	C <=	Grade HS	24.68	23.68	22.68	21.68

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

The South Carolina Department of Education's OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. Progress on the SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children, and feedback was solicited from this group.

During ACESD stakeholder session OSES staff highlighted how the SSIP ties to improved reading outcomes for indicator 3 and stakeholders were prompted to provide feedback. Stakeholders from within the SCDE in the office of Early Learning and Literacy and the Office of Assessment each met with the SSIP team to discuss the current initiatives between offices and how our collaboration can lead to improved outcomes for our students with disabilities in both areas of literacy and math. Members of OSES were asked to be stakeholders in developing new ELA and math standards. Our involvement as stakeholders in that process was groundbreaking for the SCDE and will only have a positive impact on improving academic outcomes for students with disabilities.

Finally, twice monthly updates are consistently provided to LEA special education administrators and technical assistance providers that include information on improving academic outcomes as well as engaging district special education leadership in helping the OSES in identifying district level needs for students with disabilities.

FFY 2022 Data Disaggregation from ED*Facts*

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	56,537	60,743	62,390
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	9,008	7,876	7,185
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	31,135	31,481	51,200
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,168	758	1,552
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,384	641	2,428
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	563	351	1,055

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	56,538	60,740	49,373
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	9,005	7,882	7,880

c. All students in regular assessment with no accommodations scored at or above proficient against grade level	25,473	18,819	28,827
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,099	387	1,032
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,127	266	1,829
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	522	143	743

(1)The term "regular assessment" is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	21.61%	57.14%	32.22	27.53	35.52	Did not meet target	Slippage
B	Grade 8	12.60%	53.07%	38.01	32.81	40.48	Did not meet target	Slippage
C	Grade HS	48.48%	84.55%	37.59	35.68	36.08	Did not meet target	No Slippage

Provide reasons for slippage for Group A, if applicable

A review of our data over the past three years shows a consistent and significant increase in reading scores for all students including special education students. Although all students have made gains, special education students have not made gains at the same rate as general education students. For fourth grade, factors that have contributed to this gap include science of reading training being rolled out to primarily general education first, followed by special education teachers. Therefore, special education teachers are slightly behind. Solid evidence-based reading curriculum is being rolled out to schools but has not been fully incorporated into supplemental specialized instruction. In our LEAs where our special education teachers have received science of reading training and training on the new ELA standards, reading scores for students with disabilities have improved at a higher rate than their general education peers. OSES is seeing through our program review process for 4th-8th grade students, reading goals that do not always align with student needs and goals that are not rigorous enough to help students bridge that gap. This will be an emphasis in professional learning opportunities going forward.

Provide reasons for slippage for Group B, if applicable

A review of our data over the past three years shows a consistent and significant increase in reading scores for all students including special education students. Although all students have made gains, special education students have not made gains at the same rate as general education students. For fourth grade, factors that have contributed to this gap include science of reading training being rolled out to primarily general education first, followed by special education teachers. Therefore, special education teachers are slightly behind. Solid evidence-based reading curriculum is being rolled out to schools but has not been fully incorporated into supplemental specialized instruction. In our LEAs where our special education teachers have received science of reading training and training on the new ELA standards, reading scores for students with disabilities have improved at a higher rate than their general education peers. OSES is seeing through our program review process for 4th-8th grade students, reading goals that do not always align with student needs and goals that are not rigorous enough to help students bridge that gap. This will be an emphasis in professional learning opportunities going forward.

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	18.31%	47.00%	26.07	23.26	28.69	Did not meet target	Slippage

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B	Grade 8	5.19%	31.62%	25.76	23.77	26.43	Did not meet target	No Slippage
C	Grade HS	32.64%	60.48%	27.76	24.68	27.84	Did not meet target	No Slippage

Provide reasons for slippage for Group A, if applicable

For both 4th and 8th grade, a review of our data over the past three years shows a consistent increase in math scores for all students including special education students. Although all students have made gains, special education students have not made gains at the same rate as their general education peers. Factors that have contributed to this gap include a statewide focus on reading scores, the science of reading, core curriculum in reading, and new ELA standards. Going forward, new math standards will be launched as well as new math curriculum that will focus on increasing math scores and supporting LEAs in improving math outcomes.

Provide additional information about this indicator (optional)

The data shows that the students with disabilities mean scores are starting to trend upwards but scores have not returned to pre-pandemic levels. The state is utilizing multiple district avenues for assisting LEAs in improving achievement. There have been more ATSI schools identified for students with disabilities. The SCDE is providing technical assistance to districts in understanding the data and in making data-informed decisions to improve outcomes for students with disabilities.

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) that have a significant discrepancy, as defined by the State, in the rates of suspensions and expulsions for more than 10 days during the school year of children with IEPs) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable))] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

--The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

--The rates of suspensions and expulsions for children with IEPs to rates of suspensions and expulsions for nondisabled children within the LEAs.

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon LEAs that met the minimum n and/or cell size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	5.86%

FFY	2017	2018	2019	2020	2021
Target <=	4.54%	3.40%	3.40%	3.57%	3.47%
Data	0.00%	Not Valid and Reliable	0.00%	9.30%	12.79%

Targets

FFY	2022	2023	2024	2025
Target <=	3.37%	3.27%	3.17%	3.07%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

SC OSES continuously engages stakeholders to develop targets and set priorities regarding each of the indicators reported in the SPP/APR. The South Carolina Advisory Council on the Education of Students with Disabilities (ACESD) is comprised of parents, individuals with disabilities, educators, administrators, and representatives from other state agencies meets quarterly to review data and gather input. Input is also received in reports from the South Carolina Joint Citizens and Legislative Committee on Children. OSES has also gathered input from within the South Carolina Department of Education's Office of Student Intervention Services and through our special education administrators twice monthly virtual meetings.

FFY 2022 SPP/APR Data

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

NO

Number of LEAs that have a significant discrepancy	Number of LEAs in the State	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
4	85	12.79%	3.37%	4.71%	Did not meet target	No Slippage

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

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

State's definition of "significant discrepancy" and methodology

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

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

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

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

The SC OSES uses a two-part process for LEAs meeting the trigger (rate ratio greater than 2.50) for Indicators 4A and 4B.

Part One: Review of Policies, Procedures, and Practices

The SC OSES uses the same methodology for reviewing policies, procedures, and practices (PPPs) for LEAs identified as meeting the trigger (rate ratio greater than 2.50) for Indicators 4A and 4B.

OSES assesses the appropriateness of the PPPs regarding the development and implementation of IEPs, the use of positive behavioral and instructional interventions and supports, and procedural safeguards through a collaborative process among several teams within the OSES. The program review team verifies compliance of LEAs PPPs through its monitoring review process which includes the focus areas for Indicators 4a and 4b. The OSES indicator review team also requires LEAs to complete a self-review of their PPPs and all corrections of non-compliance must be corrected one year from the date of notification and the LEA must submit evidence to OSES for verification.

Part Two: File Reviews

The LEAs meeting the trigger (rate ratio greater than 2.50) completed a self-assessment file review that included a records review for an LEA-selected sample of appropriate student files during the impacted school year (July 1, 2021– June 30, 2022).Up to 5 files for each race/ethnicity that met the trigger to determine if the trigger was met as a result of noncompliance in the development and implementation of IEPs and/or the use of positive behavioral supports and procedural safeguards. When individual instances of noncompliance was found, LEAs were required to complete corrective actions.

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

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

The LEAs submitted the completed file reviews to the OSES. OSES staff knowledgeable in these areas reviewed the LEA's responses and along with the results of part one, issued findings letters of compliance or noncompliance based on the LEA responses to the self-assessments and results of PPPs review. If the LEA was noncompliant in any area, a letter with specific corrective activities was also issued.

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

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

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

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

Upon completion of both reviews, the LEAs submitted the completed self-assessment and results of the file reviews to the OSES. OSES staff knowledgeable in these areas reviewed the LEA's responses and issued findings letters of compliance or noncompliance.

In review of LEAs of policies, procedures, and practices revealed noncompliance. The LEAs have been notified in writing of the findings of noncompliance and of the actions/revisions necessary for correction.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
11	10	0	1

FFY 2021 Findings of Noncompliance Verified as Corrected

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

To determine whether LEAs had complied with regulatory requirements after a finding of noncompliance in FFY 2021 the OSES reviewed the data for FFY 2022. Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to discipline in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated suspension and expulsion data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

The LEAs with individual cases of noncompliance verified by the OSES, were required to correct those cases and determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district. Evidence to be submitted included IEPs, PWNs, MDRs, FBA/BIPs and any other relevant documentation. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator. A subset of data was then used to verify an LEAs ability to sustain regulatory compliance.

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

This district's LEA determination will reflect the untimely correction, the district will be required to engage in addition corrective activities and additional support will be provided to the district to ensure timely completion of corrections in the future. However, it should be noted that this district and the other ten districts demonstrated compliance for FY22 with respec to Indicator 4.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	5	5	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*

To determine whether LEAs had complied with regulatory requirements in FFY 2020 the OSES reviewed the data for FFY 2021. Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator for FFY 2021. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to discipline in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

The LEAs with individual cases of noncompliance verified by the OSES, were required to correct those cases and determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district. Evidence to be submitted included IEPs, PWNs, MDRs, FBA/BIPs and any other relevant documentation. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator. A subset of data was then used to verify an LEAs ability to sustain regulatory compliance.

4A - Prior FFY Required Actions

The State must report, in the FFY 2022 SPP/APR, on the correction of noncompliance that the State identified in FFY 2021and FFY 2020 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Response to actions required in FFY 2021 SPP/APR

FY21 was used to determine if FY20 LEAs with noncompliance were sustaining compliance. None of the FY20 LEAs that had noncompliance met the trigger for FY21 and therefore demonstrated sustained compliance for a full school year. FY22 was used to determine if FY21 LEAs with noncompliance were sustaining compliance. None of the FY21 LEAs that had noncompliance met the trigger for FY22 and therefore demonstrated sustained compliance for a full school year.

4A - OSEP Response

4A - Required Actions

The State reported that noncompliance identified in FFY 2021 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was partially corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2023 SPP/APR, that it has verified that the district with remaining noncompliance identified in FFY 2021: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

The State must report, in the FFY 2023 SPP/APR, on the correction of noncompliance that the State identified in FFY 2022 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

--The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

--The rates of suspensions and expulsions for children with IEPs to the rates of suspensions and expulsions for nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

Indicator 4B: Provide the following: (a) the number of LEAs that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of long-term suspensions and expulsions (more than 10 days during the school year) for children with IEPs; and (b) the number of those LEAs in which policies, procedures or practices contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2009	2.30%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	Not Valid and Reliable	0.00%	14.29%	11.90%

Targets

FFY	2022	2023	2024	2025
Target	0%	0%	0%	0%

FFY 2022 SPP/APR Data

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

YES

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.

4

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
21	1	81	11.90%	0%	1.23%	Did not meet target	No Slippage

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

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

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

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

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

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

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

The SC OSES uses a two-part process for LEAs meeting the trigger (rate ratio greater than 2.50) for Indicators 4A and 4B.

Part One: Review of Policies, Procedures, and Practices
The SC OSES uses the same methodology for reviewing policies, procedures, and practices (PPPs) for LEAs identified as meeting the trigger (rate ratio greater than 2.50) for Indicators 4A and 4B.

OSES assesses the appropriateness of the PPPs regarding the development and implementation of IEPs, the use of positive behavioral and instructional interventions and supports, and procedural safeguards through a collaborative process among several teams within the OSES. The program review team verifies compliance of LEAs PPPs through its monitoring review process which includes the focus areas for Indicators 4a and 4b. The OSES indicator review team also requires LEAs to complete a self-review of their PPPs and all corrections of non-compliance must be corrected one year from the date of notification and the LEA must submit evidence to OSES for verification.

Part Two: File Reviews
The LEAs meeting the trigger (rate ratio greater than 2.50) completed a self-assessment file review that included a records review for an LEA-selected sample of appropriate student files during the impacted school year (July 1, 2021– June 30, 2022).Up to 5 files for each race/ethnicity and disability category that met the trigger to determine if the trigger was met as a result of noncompliance in the development and implementation of IEPs and/or the use of positive behavioral supports and procedural safeguards. If noncompliance was found, corrective actions were imposed on the LEA.

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

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

The LEAs submitted the completed file reviews to the OSES. OSES staff knowledgeable in these areas reviewed the LEA's responses and along with the results of part one, issued findings letters of compliance or noncompliance based on the LEA responses to the self-assessments and results of PPPs review. If the LEA was noncompliant in any area, a letter with specific corrective activities was also issued.

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

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

Upon completion of both reviews, the LEAs submitted the completed self-assessment and results of the file reviews to the OSES. OSES staff knowledgeable in these areas reviewed the LEA's responses and issued findings letters of compliance or noncompliance.

Any LEA with non-compliant policies, procedures, and practices was required to make revisions and turn those changes into OSES for review and verification.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	10		0

FFY 2021 Findings of Noncompliance Verified as Corrected

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

To determine whether LEAs had complied with regulatory requirements after a finding of noncompliance in FFY 2021 the OSES reviewed the data for FFY 2022. Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator for FFY 2022 . The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to discipline in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

The LEAs with individual cases of noncompliance verified by the OSES, were required to correct those cases and determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district. Evidence to be submitted included IEPs, PWNs, MDRs, FBA/BIPs and any other relevant documentation. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator. A subset of data was then used to verify an LEAs ability to sustain regulatory compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	12	12	0

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

FFY 2020

Findings of Noncompliance Verified as Corrected

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

To determine whether LEAs had complied with regulatory requirements after a finding of noncompliance in FFY 2020 the OSES reviewed the data for FFY 2021. Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to discipline in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

The LEAs with individual cases of noncompliance verified by the OSES, were required to correct those cases and determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and provided those services. The OSES verified this information in correspondence with each district. Evidence to be submitted included IEPs, PWNs, MDRs, FBA/BIPs and any other relevant documentation. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator. A subset of data was then used to verify an LEAs ability to sustain regulatory compliance.

4B - Prior FFY Required Actions

The State must report, in the FFY 2022 SPP/APR, on the correction of noncompliance that the State identified in FFY 2021and FFY 2020 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Response to actions required in FFY 2021 SPP/APR

FY21 was used to determine if FY20 LEAs with noncompliance were sustaining compliance. None of the FY20 LEAs that had noncompliance met the trigger for FY21 therefore they sustained compliance. FY22 was used to determine if FY21 LEAs with noncompliance were sustaining compliance. None of the FY21 LEAs that had noncompliance met the trigger for FY22 therefore they sustained compliance.

4B - OSEP Response

4B- Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the districts identified with noncompliance in FFY 2022 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 5: Education Environments (children 5 (Kindergarten) - 21)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served:

A. Inside the regular class 80% or more of the day;

B. Inside the regular class less than 40% of the day; and

C. In separate schools, residential facilities, or homebound/hospital placements.

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specification FS002.

Measurement

A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)]times 100.

Instructions

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

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.

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

If the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA, explain.

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2017	2018	2019	2020	2021
A	2020	Target >=	58.00%	59.00%	63.00%	63.96%	63.61%
A	63.96%	Data	62.17%	62.16%	62.46%	63.96%	64.07%
B	2020	Target <=	17.88%	17.88%	15.50%	15.34%	14.39%
B	15.34%	Data	15.39%	15.15%	15.05%	15.34%	14.85%
C	2020	Target <=	1.70%	1.70%	1.70%	1.19%	1.18%
C	1.19%	Data	1.46%	1.49%	1.49%	1.19%	1.47%

Targets

FFY	2022	2023	2024	2025
Target A >=	64.18%	64.75%	65.33%	65.90%
Target B <=	14.06%	13.73%	13.39%	13.06%
Target C <=	1.17%	1.16%	1.15%	1.14%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	105,519
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	67,575
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	16,006
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	480
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	166
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	846

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

NO

FFY 2022 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	67,575	105,519	64.07%	64.18%	64.04%	Did not meet target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	16,006	105,519	14.85%	14.06%	15.17%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements *[c1+c2+c3]*	1,492	105,519	1.47%	1.17%	1.41%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a:

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

B. Separate special education class, separate school or residential facility.

C. Receiving special education and related services in the home.

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specification FS089.

Measurement

A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

Instructions

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

States must report five-year-old children with disabilities who are enrolled in preschool programs in this indicator. Five-year-old children with disabilities who are enrolled in kindergarten are included in Indicator 5.

States may choose to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age.

For Indicator 6C: States are not required to establish a baseline or targets if the number of children receiving special education and related services in the home is less than 10, regardless of whether the State chooses to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age. In a reporting period during which the number of children receiving special education and related services in the home reaches 10 or greater, States are required to develop baseline and targets and report on them in the corresponding SPP/APR.

For Indicator 6C: States may express their targets in a range (*e.g.*, 75-85%).

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

If the data reported in this indicator are not the same as the State's data reported under IDEA section 618, explain.

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data (Inclusive) – 6A, 6B, 6C

Part	FFY	2017	2018	2019	2020	2021
A	Target >=	48.90%	49.00%	48.90%	34.08%	34.48%
A	Data	48.88%	50.00%	50.69%	34.08%	34.40%
B	Target <=	23.50%	23.00%	22.50%	31.25%	31.05%
B	Data	23.67%	22.73%	22.79%	31.25%	34.14%
C	Target <=				3.47%	3.46%
C	Data				3.47%	1.04%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

Targets

Please select if the State wants to set baseline and targets based on individual age ranges (i.e. separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.

Inclusive Targets

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

Target Range not used

Baselines for Inclusive Targets option (A, B, C)

Part	Baseline Year	Baseline Data
A	2020	34.08%
B	2020	31.25%
C	2020	3.47%

Inclusive Targets – 6A, 6B

FFY	2022	2023	2024	2025
Target A >=	34.88%	35.28%	35.68%	36.08%
Target B <=	30.85%	30.65%	30.45%	30.25%

Inclusive Targets – 6C

FFY	2022	2023	2024	2025
Target C <=	3.45%	3.44%	3.43%	3.42%

Prepopulated Data

Data Source:

SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

08/30/2023

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	2,575	3,400	648	6,623
a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	412	1,412	306	2,130
b1. Number of children attending separate special education class	1,069	848	138	2,055
b2. Number of children attending separate school	52	52	7	111
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	32	30	5	67

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

Provide reasons for slippage for Group A3 age 5, if applicable

Provide reasons for slippage for Group B3 age 5, if applicable

FFY 2022 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	2,130	6,623	34.40%	34.88%	32.16%	Did not meet target	Slippage
B. Separate special education class, separate school or residential facility	2,166	6,623	34.14%	30.85%	32.70%	Did not meet target	No Slippage
C. Home	67	6,623	1.04%	3.45%	1.01%	Met target	No Slippage

Provide reasons for slippage for Group A aged 3 through 5, if applicable

The availability of regular early childhood programs is a key factor in slippage. South Carolina does not have universal preschool for 3- and 4-year-old children. South Carolina does have some state-funded preschool programming for 4-year-old children who are identified as “at-risk”; however, the state is only currently able to serve less than 50% of at-risk preschoolers with the current programming. LEAs are challenged to find regular early childhood programs for preschool aged children, especially those who are age 3. Also, LEAs reported that more children are being identified as having intensive needs as compared to previous years. This increase seems to be related to the Covid-19 pandemic which resulted in children having less opportunities to interact with peers due to closures, lockdowns, family choice, etc. In addition, LEAs report that more parents are now making referrals for preschool aged children as they are more aware of autism and other disabilities and are starting to identify delays more often in their children.

Provide additional information about this indicator (optional)

Training was provided to LEAs regarding how to enter the LRE correctly on the IEP. LEAs claimed that teachers had not been entering the LRE correctly. Changes have now been made, which gives a more accurate representation of the early childhood LRE. South Carolina Partnerships for Inclusion (SCPI), one of the technical assistance centers, has continued to work with districts and community partners to improve inclusive opportunities for preschool children. SCPI also held an inclusion conference to provide professional development on inclusive preschool practices to special and general education professionals across the State.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

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

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

C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

A. Positive social-emotional skills (including social relationships);
B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.
b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.
d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

Summary Statement 1: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 1: Percent = [(# of preschool children reported in progress category (c) plus # of preschool children reported in category (d)) divided by (# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d))] times 100.

Summary Statement 2: The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 2: Percent = [(# of preschool children reported in progress category (d) plus # of preschool children reported in progress category (e)) divided by (the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 3 for additional instructions on sampling.)

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three Outcomes.

In presenting results, provide the criteria for defining “comparable to same-aged peers.” If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining “comparable to same-aged peers” has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2017	2018	2019	2020	2021
A1	2020	Target >=	88.46%	88.47%	88.47%	84.21%	86.45%
A1	84.21%	Data	88.37%	86.60%	85.40%	84.21%	85.94%

A2	2020	Target >=	66.17%	66.18%	66.18%	56.00%	59.48%
A2	56.00%	Data	62.57%	60.74%	58.33%	56.00%	51.59%
B1	2020	Target >=	86.14%	86.15%	86.15%	82.21%	85.35%
B1	82.21%	Data	86.67%	84.21%	84.14%	82.21%	84.35%
B2	2020	Target >=	63.26%	63.27%	63.27%	54.08%	57.40%
B2	54.08%	Data	58.85%	58.45%	55.79%	54.08%	52.63%
C1	2020	Target >=	89.26%	89.27%	89.27%	83.90%	88.44%
C1	83.90%	Data	88.90%	87.54%	87.05%	83.90%	86.12%
C2	2020	Target >=	77.22%	77.23%	77.23%	68.43%	74.08%
C2	68.43%	Data	75.67%	74.25%	73.05%	68.43%	64.88%

Targets

FFY	2022	2023	2024	2025
Target A1 >=	86.98%	87.50%	88.03%	88.55%
Target A2 >=	60.05%	60.62%	61.20%	61.77%
Target B1 >=	85.95%	86.56%	87.16%	87.77%
Target B2 >=	58.20%	59.00%	59.81%	60.61%
Target C1 >=	89.14%	89.84%	90.53%	91.23%
Target C2 >=	74.60%	75.12%	75.64%	76.15%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

FFY 2022 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

4,576

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

Outcome A Progress Category	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	20	0.44%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	543	11.87%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,889	41.28%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,674	36.58%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	450	9.83%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	3,563	4,126	85.94%	86.98%	86.35%	Did not meet target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,124	4,576	51.59%	60.05%	46.42%	Did not meet target	Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	18	0.39%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	565	12.35%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,720	37.59%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,507	32.93%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	766	16.74%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	3,227	3,810	84.35%	85.95%	84.70%	Did not meet target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,273	4,576	52.63%	58.20%	49.67%	Did not meet target	Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	23	0.50%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	521	11.39%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,283	28.04%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,761	38.48%

Outcome C Progress Category	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	988	21.59%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	3,044	3,588	86.12%	89.14%	84.84%	Did not meet target	Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,749	4,576	64.88%	74.60%	60.07%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
A2	Preschool students are making progress as evidenced by meeting the improvement target for A1; however, the level of gain was not equivalent to meeting age expectations upon exit. The state's 2022 child count data shows an increase of 649 preschool aged children with disabilities. The lack of a state-wide preschool program for three- and four-year-olds impacts placement options for LEA's and results in more preschool aged children with disabilities being placed in self-contained settings which means students don't have the exposure to typically developing peer models. Slippage is most likely due to more children being referred and qualifying for special education services. LEAs also report an increase in students with more significant needs such as students who are nonverbal and thus their rate of growth is slower. Specific to A2, LEAs noted that they are seeing students with significant behavior and social-emotional issues thought to be caused by trauma and the Covid-19 pandemic. They also continue to state that due to the Covid-19 pandemic and a lack of consistent face-to-face instruction, progress did not occur at the rate that would typically be expected.
B2	Preschool students are making progress as evidenced by meeting the improvement target for B1; however, the level of gain was not equivalent to meeting age expectations upon exit. The state's 2022 child count data shows an increase of 649 preschool aged children with disabilities. The lack of a state-wide preschool program for three- and four-year-olds impacts placement options for LEA's and results in more preschool aged children with disabilities being placed in self-contained settings which means students don't have the exposure to typically developing peer models. Slippage is most likely due to more children being referred and qualifying for special education services. LEAs also report an increase in students with more significant needs such as students who are nonverbal and thus their rate of growth is slower. They also continue to state that due to the Covid-19 pandemic and a lack of consistent face-to-face instruction, progress did not occur at the rate that would typically be expected.
C1	The state's 2022 child count data shows an increase of 649 preschool aged children with disabilities. The lack of a state-wide preschool program for three- and four-year-olds impacts placement options for LEA's and results in more preschool aged children with disabilities being placed in self-contained settings which means students don't have the exposure to typically developing peer models. Slippage is most likely due to more children being referred and qualifying for special education services. LEAs also report an increase in students with more significant needs such as students who are nonverbal and thus their rate of growth is slower. They also continue to state that due to the Covid-19 pandemic and a lack of consistent face-to-face instruction, progress did not occur at the rate that would typically be expected.
C2	The state's 2022 child count data shows an increase of 649 preschool aged children with disabilities. The lack of a state-wide preschool program for three- and four-year-olds impacts placement options for LEA's and results in more preschool aged children with disabilities being placed in self-contained settings which means students don't have the exposure to typically developing peer models. Slippage is most likely due to more children being referred and qualifying for special education services. LEAs also report an increase in students with more significant needs such as students who are nonverbal and thus their rate of growth is slower. They also continue to state that due to the Covid-19 pandemic and a lack of consistent face-to-face instruction, progress did not occur at the rate that would typically be expected.

Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? (yes/no)

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

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

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

An entry COS is submitted for all applicable preschoolers for data entry within 15 business days of the eligibility determination. If a preschooler transfers in from out of state, the entry COS data provided by the previous district is inputted into Frontline Enrich Central. If COS data is not provided by the previous district, the receiving district completes an entry COS and enters it into the system. An exit COS is required and inputted into the Frontline Enrich Central system if the preschooler exits Part B services because he/she is no longer eligible, moves out of district or moves out of state, is deceased, reaches the maximum age for Part B (6th Birthday), before the preschooler enters Kindergarten, and if the preschooler has been provided services for 6 consecutive months prior to entering kindergarten. This is required of all LEAs. Data are submitted into Enrich from July 1 to mid-June with optional Pre-Checks occurring the third Friday in November, February, and April. All final entry and exit scores are entered into Enrich by the third Friday each June.

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

Provide additional information about this indicator (optional)

In order to ensure data quality, the state has also recognized a need to provide LEAs with additional information regarding the indicator, its importance, and how to effectively use data to accurately complete the outcomes summary. A course in the state's learning management system was created in partnership with ECTA and DaSy and made available to LEAs in Fall 2023. Local program leaders are encouraged to use the new resource with their teams via LEA driven professional development opportunities.

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

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

Data Source

State selected data source.

Measurement

Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100.

Instructions

*Sampling **of parents from whom response is requested** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 3 for additional instructions on sampling.)*

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

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

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

Report the number of parents to whom the surveys were distributed and the number of respondent parents. The survey response rate is automatically calculated using the submitted data.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross-section of parents of children with disabilities.

Include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

If the analysis shows that the demographics of the children for whom parents responding are not representative of the demographics of children receiving special education services in the State, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to parents (e.g., by mail, by e-mail, on-line, by telephone, in-person through school personnel), and how responses were collected.

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

8 - Indicator Data

Question	Yes / No
Do you use a separate data collection methodology for preschool children?	NO

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

Historical Data

Baseline Year	Baseline Data
2013	84.00%

FFY	2017	2018	2019	2020	2021

Target >=	85.00%	85.00%	85.50%	85.50%	86.00%
Data	93.49%	97.46%	89.62%	91.28%	98.40%

Targets

FFY	2022	2023	2024	2025
Target >=	86.00%	86.50%	86.50%	87.00%

FFY 2022 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2,035	2,081	98.40%	86.00%	97.79%	Met target	No Slippage

Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.

To combine data from school-age and preschool surveys in a valid and reliable manner, the following procedures are used:

1. Data Collection Methodology: Surveys are sent to all parents at the conclusion of annual or initial Individualized Education Program (IEP) meetings, regardless of the age of the child. This ensures that parents of both school-age and preschool children with disabilities have the opportunity to provide feedback.

2. Inclusion of Preschool Parents in Survey Distribution: The Office of Special Education Services (OSES) extracts a base file containing names and addresses of parents for all children during the reporting year, including preschool students with disabilities. This ensures that parents of preschoolers are included in the survey distribution process alongside parents of school-age children.

3. Consistent Survey Content: The survey content remains consistent for both school-age and preschool parents, focusing on gathering feedback on various aspects of the Individualized Education Program (IEP) process and services provided.

4. Accounting for Potential Redundancies: Recognizing that some students may have more than one annual review in the year, which could result in redundancies in the number of surveys distributed, the OSES may implement measures to avoid duplicate responses or adjust data analysis accordingly.

5. Data Cleaning and Validation: After survey responses are collected, data cleaning procedures may be employed to ensure accuracy and reliability. This may involve identifying and removing duplicate responses, verifying the completeness of survey responses, and conducting validity checks to ensure the integrity of the data.

6. Analysis and Interpretation: Once the data are collected and cleaned, analysis procedures are applied to examine patterns, trends, and insights across school-age and preschool populations. This may involve comparing response rates, identifying common themes or concerns, and assessing the overall satisfaction levels among parents.

By following these procedures, data from both school-age and preschool surveys can be combined in a manner that is valid and reliable, providing valuable insights into the experiences and perspectives of parents of children with disabilities across different age groups.

The number of parents to whom the surveys were distributed.

138,849

Percentage of respondent parents

1.50%

Response Rate

FFY	2021	2022
Response Rate	2.74%	1.50%

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

The metric used to determine representativeness is a fixed rate of 10%. This means that if the difference between the demographics of respondents and the state demographics is within 10%, the data are considered representative. In other words, if the percentage difference between the proportion of responders and the target group is less than or equal to 10%, the data are deemed to accurately reflect the demographics of children receiving special education services in the state. If the difference exceeds 10%, further action may be needed to address potential biases or disparities in survey responses.

Include the State's analyses of the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must include race/ethnicity in their analysis. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

The South Carolina Department of Education (SCDE) conducted an analysis to assess the representativeness of demographic data collected from parents of children receiving special education services. The analysis focused on the following variables:

1. Race or ethnicity (using federal reporting categories)
2. Primary disability category

SCDE calculated response rates for each variable and compared them to the State's Child Count for the reporting year. The comparison involved reviewing the difference between the percentages of demographic variables of the children for whom parents responded and the Child Count population. A threshold of +/-10 percent difference was used to determine representativeness.

The analysis revealed the following disparities:

1. Over-representation:
- Whites: 11.20%
- Unidentified disability category: 35.52%

2. Under-representation:
- Other disability: -14.23%
- Specific Learning Disability: -19.16%

Based on these findings, SCDE concluded that the data collected were not representative of the State's demographics. This analysis highlights the need for targeted strategies to improve participation rates among underrepresented groups and ensure that survey data accurately reflect the diversity of children receiving special education services in South Carolina.

The demographics of the children for whom parents are responding are representative of the demographics of children receiving special education services. (yes/no)

NO

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics

To ensure that future response data are representative of demographic groups, the South Carolina Department of Education (SCDE) will implement the following strategies:

1. Six-Year Sampling Plan: Transitioning to a six-year sampling plan to replace the existing census methodology. This approach aims to increase the overall response rate year-over-year, particularly among underrepresented groups. By sampling over a longer period, SCDE can gather more comprehensive data while also reducing respondent burden.

2. Collaboration with PTI and OSES Program Review Teams: Working in collaboration with the Parent Training and Information Center (PTI) and Office of Special Education Services (OSES) program review teams to collect data. Leveraging these partnerships allows SCDE to tap into existing networks and expertise to reach a broader range of stakeholders, including those from underrepresented groups.

3. Sharing Demographic Updates with LEAs: Frequently sharing demographic updates for specified districts with Local Education Agencies (LEAs) to demonstrate representativeness or identify areas of improvement. This ongoing communication helps LEAs understand the importance of inclusive survey participation and allows for targeted outreach efforts.

4. Recruitment of LEA Support: Recruiting LEA support in contacting groups that are underrepresented. By engaging LEAs directly, SCDE can leverage their relationships with local communities to facilitate outreach and encourage survey participation among diverse demographic groups.

5. Seeking Stakeholder Input: Soliciting input from stakeholders regarding proposed changes to survey methodologies and outreach strategies. By seeking feedback from parents, educators, advocacy groups, and other relevant stakeholders, SCDE can ensure that its approach is responsive to the needs and preferences of the community.

By implementing these strategies and seeking input from stakeholders, SCDE aims to enhance the representativeness of response data, ensuring that survey results accurately reflect the diversity of the student population and their families across South Carolina.

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

To increase the response rate year over year, particularly among underrepresented groups, the South Carolina Department of Education (SCDE) will implement the following strategies:

1. Continued Encouragement to LEAs: SCDE will persist in encouraging Local Education Agencies (LEAs) to utilize various communication channels such as email reminders, social media blasts, and flyers to appeal to parents for increased survey submissions. This ongoing effort aims to maintain awareness and engagement among parents and caregivers.

2. Implementation of a Six-Year Sampling Plan: SCDE is adopting a six-year sampling plan to replace the current census methodology. We will be aligning the indicator 8 district sampling with program reviews because the program review process includes a process for selecting a representative sample of districts for the state each year. This new approach anticipates increasing the overall response rate year-over-year, especially among underrepresented groups. By spreading out data collection over a longer period, SCDE aims to mitigate survey fatigue and improve participation.

3. Collaboration with PTI and OSES Program Review Teams: Working closely with the Parent Training and Information Center (PTI) and Office of Special Education Services (OSES) program review teams to collect data. By leveraging partnerships with these organizations, SCDE can access specialized knowledge and networks to engage underrepresented groups effectively.

4. Frequent Sharing of Demographic Updates: SCDE will regularly share demographic updates for specified districts with LEAs to illustrate

representativeness or identify areas needing improvement. This proactive approach allows for timely adjustments to outreach strategies and ensures that data collection efforts accurately reflect the diversity of the student population.

5. Recruitment of LEA Support for Underrepresented Groups: Actively recruiting LEA support in contacting and engaging underrepresented groups. By enlisting the assistance of local educational institutions and stakeholders, SCDE can enhance outreach efforts and foster greater participation from traditionally marginalized communities.

6. Seeking Stakeholder Input: SCDE will seek input from stakeholders regarding proposed changes to survey methodologies and outreach strategies. By soliciting feedback from parents, educators, advocacy groups, and other relevant stakeholders, SCDE can ensure that its approach is responsive to the needs and preferences of the community, thereby increasing overall engagement and participation rates.

7. Sharing with LEA: South Carolina Department of Education (SCDE) provides Local Education Agencies (LEAs) with copies of all survey responses collected by Race ethnicity and disability categories. Additionally, SCDE shares this data internally with the program teams to assist in training preparation. This practice allows LEAs to access and analyze the survey data directly, enabling them to gain insights into the needs and preferences of their respective communities. The Program Review requires LEAs to include a representative (other disability and specific leaning disability categories) of the parents of students with a disability to complete the parent survey. By sharing this information, SCDE facilitates informed decision-making and targeted support efforts at the local level, ultimately enhancing the effectiveness of educational programs and services provided to students.

By implementing these multifaceted strategies and seeking input from stakeholders, SCDE aims to not only increase the response rate year over year but also ensure that survey data are more representative of the diverse student population in South Carolina.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

The South Carolina Department of Education (SCDE) conducted an analysis of the response rate for survey submissions from parents of students with disabilities, comparing demographic information provided by respondents with the State's Child Count data for the reporting year.

97.96% of parents with children in the "Other disability" category and 99.72% of parents with children in the "specific learning disability" responded that the schools facilitated parent involvement as a means of improving services and results for children with disabilities.

This comparison aimed to identify any nonresponse bias and ensure that the demographics of the children represented in the survey responses were reflective of those receiving special education services statewide.

To reduce bias and promote responses from a broad cross-section of parents of children with disabilities, SCDE implemented several strategies:

1. Collaborative Efforts with LEAs: Encouraged Local Education Agencies (LEAs) to actively solicit online responses from parents of children with disabilities, fostering cooperative efforts to increase participation.

2. Multilingual Options: Incorporated multi-lingual options for both print and online survey accessibility, recognizing the diverse linguistic backgrounds of families within the state.

3. Administrative Support: Encouraged administrative support within schools to facilitate survey completion, potentially through dedicated staff or resources allocated specifically for this purpose.

Following these efforts, SCDE evaluated the response rates and identified areas of bias. The analysis revealed that respondents identifying as "Other" and "Specific Learning Disability" group were underrepresented, while the white and those with an unidentified disability group were overrepresented.

When demographic data are missing from a significant proportion of survey responses, it becomes challenging to determine whether there is bias present in the data accurately. In this scenario, where 35% of surveys had missing demographic information, it's difficult to draw definitive conclusions about the presence or absence of bias in the survey results.

The absence of demographic data introduces uncertainty into the analysis because it's unclear whether the missing data are randomly distributed across the respondent population or if certain demographic groups are disproportionately represented among the non-respondents. Without this information, it's challenging to assess whether the survey responses accurately reflect the diversity of the population being surveyed.

Therefore, any conclusions about bias in the data should be made cautiously. Without a complete set of demographic information, it's essential to acknowledge the limitations of the analysis and consider alternative methods for validating the representativeness of the survey results. This may involve conducting additional follow-up surveys or employing statistical techniques to estimate the potential impact of missing data on the overall findings. To address this bias, SCDE took proactive steps:

1. Improved Survey Design: Enhanced the survey instrument by adding required demographic and disability category questions directly onto the survey to ensure accurate data collection and representation.

2. Threshold Metric for Representativeness: Implemented a metric of +/-10% to assess the representativeness of response rates across demographic and disability categories, helping to identify areas requiring targeted outreach or intervention.

By implementing these measures, SCDE aimed to mitigate nonresponse bias and foster more inclusive and representative survey responses from parents of children with disabilities, ultimately ensuring that the collected data accurately reflected the diverse needs and perspectives within the special education community.

Sampling Question	Yes / No
Was sampling used?	NO

Survey Question	Yes / No
Was a survey used?	YES

Survey Question	Yes / No
If yes, is it a new or revised survey?	YES
If yes, provide a copy of the survey.	Ind 8 Survey

Provide additional information about this indicator (optional)

Indicator 8 Parent Involvement survey was updated to include gender and race/ethnicity. No questions were changed.

8 - Prior FFY Required Actions

The State reported that the response data for this indicator were representative of the demographics of children receiving special education services in the State using the metric of +/-10%. However, in its narrative, the State reported "The evaluation determined that respondents who identified as African American were over- represented. Additionally, other race/ethnic groups identified as under-represented (irrespective of order) include Asian, Hispanic, and White." In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are from a response group that is representative of the demographics of children receiving special education services in the State, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

Response to actions required in FFY 2021 SPP/APR

Currently, for FFY22, LEAs provide parents with a link to the survey when they receive a copy of their Annual Review or Initial IEP. The South Carolina Department of Education (SCDE) encouraged Local Education Agencies (LEA) to send email reminders, social media blasts, and flyers to appeal to parents to increase survey submissions.

In addition, the SCDE is exploring: using a six (6) year sampling plan to replace the existing census methodology with the expectation of increasing the overall response rate year-over-year, notably among those groups that are under-represented by working in collaboration with the Parent Training and Information Center (PTI) to collect data and with OSES program review teams; frequently sharing demographic updates for specified districts with LEAs to demonstrate representativeness, or lack thereof; and recruiting LEA support in contacting groups that are under-represented. The SCDE will be seeking input from stakeholders regarding the proposed change this calendar year.

8 - OSEP Response

8 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of children receiving special education services.

OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 8 attachment(s) included in the State's FFY 2022 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.

Measurement

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2022 reporting period (i.e., after June 30, 2023).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and 6 through 21 served under IDEA, aggregated across all disability categories. Provide the actual numbers used in the calculation.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in special education and related services and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	Not Valid and Reliable	0.00%	0.00%	Not Valid and Reliable

Targets

FFY	2022	2023	2024	2025
Target	0%	0%	0%	0%

FFY 2022 SPP/APR Data

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

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

4

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
4	0	78	Not Valid and Reliable	0%	0.00%	Met target	N/A

Were all races and ethnicities included in the review?

YES

Define "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

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

Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

The SC OSES uses a two-part process for LEAs meeting the trigger (risk ratio greater than 2.50) for Indicator 9.

Part One: Review of Policies, Procedures, and Practices
OSES assesses the appropriateness of the PPPs regarding initial referral, parent participation, timelines, identification, comprehensive evaluation requirements through a collaborative process among several teams within the OSES. The program review team verifies compliance of LEAs PPPs through its monitoring review process which includes the focus area for Indicator 9. The OSES indicator review team also requires LEAs to complete a self-review of their PPPs and all corrections of non-compliance must be corrected one year from the date of notification and the LEA must submit evidence to OSES for verification.

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

Part Two: File Reviews
The LEAs meeting the trigger (risk ratio greater than 2.50) completed a self-assessment file review that included a records review for an LEA-selected sample of appropriate student files related to initial evaluations, up to 5 files for each race/ethnicity and disability category that met the trigger to determine if it was met as a result of noncompliance due to inappropriate identification. If noncompliance was found, corrective actions based on individual student files were imposed on the LEA.

Potential sources of documentation for review included, but were not limited to, evaluation planning, evaluations, meeting notices, prior written notices, discipline records, manifestation determination reviews, functional behavior assessments, behavior intervention plans, progress reports, services logs, and teacher observations and interviews, attendance records, and IEPs.

The LEAs submitted the completed file reviews to the OSES. OSES staff knowledgeable in these areas reviewed the LEA's responses and along with the results of part one, issued findings letters of compliance or noncompliance based on the LEA responses to the self-assessments and results of PPPs review. If the LEA was noncompliant in any area, a letter with specific corrective actions was also issued.

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

Provide additional information about this indicator (optional)

The state updated its baseline to include all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA but did not update the baseline year in the FY2021 submission and has corrected. The data results include all children aged 5 enrolled in kindergarten and aged 6 through 21 served under IDEA.

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2021. The State must provide valid and reliable data for FFY 2022 in the FFY 2022 SPP/APR.

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

Response to actions required in FFY 2021 SPP/APR

The baseline year and data were updated to reflect FY2020, and the data includes all children aged 5 who are enrolled in kindergarten and age 6 through 21 served under IDEA.

9 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

Measurement

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2022 reporting period (i.e., after June 30, 2023).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA. Provide these data at a minimum for children in the following six disability categories: intellectual disability, specific learning disabilities, emotional disturbance, speech or language impairments, other health impairments, and autism. If a State has identified disproportionate representation of racial and ethnic groups in specific disability categories other than these six disability categories, the State must include these data and report on whether the State determined that the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification. Provide the actual numbers used in the calculation.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in specific disability categories and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	4.82%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	1.16%	0.00%	4.82%	1.22%

Targets

FFY	2022	2023	2024	2025
Target	0%	0%	0%	0%

FFY 2022 SPP/APR Data

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

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

4

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
22	2	78	1.22%	0%	2.56%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

District 1 was disproportionate for emotional disabilities-black students. The OSES reviewed 5 files for this district for black students with emotional disabilities. For one file reviewed, data included in the initial evaluation report noted that the student was progressing and responding appropriately to intervention. Data collection revealed improvement across all behaviors as compared to the baseline data collected previously. The student demonstrated less physical aggression, more adaptive behavior, following directions and his schedule more, remained in his assigned area, completed more work, and did not demonstrate problem behaviors that required continued tier 3 behavioral supports. The team should have considered the improvements in behaviors then collected additional data from the student's participation in the general education environment to determine whether that progress was maintained and based on the new data determined eligibility. The district was required to convene the IEP team to conduct a reevaluation to determine whether or not this student meets the eligibility criteria for an emotional disability. Following the reevaluation, the district is required to send a copy of the PWN and reevaluation to the OSES in order to verify that the non-compliance has been corrected. If this student had not qualified this district would not have met the 2.5 threshold. District 2 was disproportionate due to intellectual disability students black. The OSES reviewed 5 files for initial eligibility of black students with an intellectual disability. For one file the district failed to collect an adaptive behavior measure from the parent that is a required component of South Carolina's criteria for intellectual disability. The district is required to collect that data, hold a reevaluation meeting to determine if the student meets the eligibility requirements and send the OSES documentation to verify that the corrections have been made. In reviewing those files, it was noted by OSES that while the students met the state's current criteria for eligibility in this category, they would not have met eligibility using the revised criteria. This would have impacted district 2 meeting the threshold. (see additional information about this indicator below)

Were all races and ethnicities included in the review?

YES

Define "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

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

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

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

Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

The SC OSES uses a two-part process for LEAs meeting the trigger (risk ratio greater than 2.50) for Indicator 10.

Part One: Review of Policies, Procedures, and Practices
OSES assesses the appropriateness of the PPPs regarding initial referral, parent participation, timelines, identification, comprehensive evaluation requirements through a collaborative process among several teams within the OSES. The program review team verifies compliance of LEAs PPPs through its monitoring review process which includes the focus area for Indicator 10. The OSES indicator review team also requires LEAs to complete a self-review of their PPPs and all corrections of non-compliance must be corrected one year from the date of notification and the LEA must submit evidence to OSES for verification.

When reviewing policies, procedures, and practices, the LEA was encouraged to convene a team of stakeholders to complete the self-review. Appropriate stakeholders could include general and special education teachers, building principals, curriculum and instruction representative, school psychologist, student support services representative, and school improvement representative.

Part Two: File Reviews
The LEAs meeting the trigger (risk ratio greater than 2.50) completed a self-assessment file review that included a records review for an LEA-selected sample of appropriate student files related to initial evaluations, up to 5 files for each race/ethnicity and disability category that met the trigger to determine if it was met as a result of noncompliance due to inappropriate identification. If noncompliance was found, corrective actions based on individual student files were imposed on the LEA.

Potential sources of documentation for review included, but were not limited to, evaluation planning, evaluations, meeting notices, prior written notices, discipline records, manifestation determination reviews, functional behavior assessments, behavior intervention plans, progress reports, services logs, and teacher observations and interviews, attendance records, and IEPs.

The LEAs submitted the completed file reviews to the OSES. OSES staff knowledgeable in these areas reviewed the LEA's responses and along with the results of part one, issued findings letters of compliance or noncompliance based on the LEA responses to the self-assessments and results of PPPs review. If the LEA was noncompliant in any area, a letter with specific corrective actions was also issued.

The OSES then reviewed and verified the LEA's information. 2 LEAs were found to have disproportionate representation due to inappropriate identification.

Provide additional information about this indicator (optional)

The OSES identified disproportionate representation of intellectual disabilities-black students as a systemic issue for the state. While only 2 districts met the trigger due to inappropriate identification, 29 out of 38 districts met the trigger for intellectual disabilities-black students. The OSES along with a specific stakeholder group with extensive knowledge of the identification of students with disabilities has updated the state's criteria for the identification of students with intellectual disabilities to better align with current research in the field. The updated criteria have already been approved by our State Board of Education and are waiting for approval by the state legislation. The OSES and its stakeholder group feel strongly that this will be a much more equitable criteria for identification.

The state updated its baseline to include all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA but did not update the baseline year in the FY2021 submission and has corrected. The data results include all children aged 5 enrolled in kindergarten and aged 6 through 21 served under IDEA.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1	1	0	0

FFY 2021 Findings of Noncompliance Verified as Corrected

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

To determine whether LEAs had complied with regulatory requirements in FFY 2021 the OSES reviewed the data for FFY 2022. Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to appropriate identification for special education in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

The LEAs with individual cases of noncompliance verified by the OSES, were required to correct those cases and determine whether the child had been appropriately identified under the IDEA. If OSES determined that the child had not been appropriately identified, the LEA was required to conduct a reevaluation and determine if the child was eligible using the appropriate identification requirements. The OSES verified this information in correspondence with each district. Evidence to be submitted included reevaluation reports, PWNs and any other relevant documentation. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator. A subset of data was then used to verify an LEAs ability to sustain regulatory compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	4	4	0

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

FFY 2020

Findings of Noncompliance Verified as Corrected

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

To determine whether LEAs had complied with regulatory requirements after a finding of noncompliance in FFY 2020 the OSES reviewed the data for FFY 2021. Upon review by the OSES, no LEAs were found to have continued noncompliance for this Indicator. The noncompliance in each LEA that led to the finding appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to appropriate identification for special education in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level.

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

The LEAs with individual cases of noncompliance verified by the OSES, were required to correct those cases and determine whether the child had been appropriately identified under the IDEA. If OSES determined that the child had not been appropriately identified, the LEA was required to conduct a reevaluation and determine if the child was eligible using the appropriate identification requirements. The OSES verified this information in correspondence with each district. Evidence to be submitted included reevaluation reports, PWNs and any other relevant documentation. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator. A subset of data was then used to verify an LEAs ability to sustain regulatory compliance.

10 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the district identified in FFY 2021 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification is in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 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 (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

FY21 was used to determine if FY20 LEAs with noncompliance were sustaining compliance. None of the FY20 LEAs that had noncompliance met the trigger for FY21 therefore they sustained compliance. FY22 was used to determine if FY21 LEAs with noncompliance were sustaining compliance. None of the FY21 LEAs that had noncompliance met the trigger for FY22 therefore they sustained compliance.

10 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

10 - Required Actions

Because the State reported less than 100% compliance for FFY 2022 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the two districts identified in FFY 2022 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

Compliance indicator: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

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

Data Source

Data to be taken from State monitoring or State data system and must be based on actual, not an average, number of days. Indicate if the State has established a timeline and, if so, what is the State's timeline for initial evaluations.

Measurement

a. # of children for whom parental consent to evaluate was received.
b. # of children whose evaluations were completed within 60 days (or State-established timeline).
Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

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

Note that under 34 CFR §300.301(d), the timeframe set for initial evaluation does not apply to a public agency if: (1) the parent of a child repeatedly fails or refuses to produce the child for the evaluation; or (2) a child enrolls in a school of another public agency after the timeframe for initial evaluations has begun, and prior to a determination by the child's previous public agency as to whether the child is a child with a disability. States should not report these exceptions in either the numerator (b) or denominator (a). If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in b.

Targets must be 100%.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	83.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.94%	99.74%	98.01%	88.05%	99.25%

Targets

FFY	2022	2023	2024	2025
Target	100%	100%	100%	100%

FFY 2022 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
22,069	21,932	99.25%	100%	99.38%	Did not meet target	No Slippage

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

137

Account for children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

The range of days beyond the 60-day timeline was from 1 to 507 days. LEAs reported student and staff absences due to illness, school closures, and protocols. Additional reasons for delays include staffing issues; inability to engage parents in timely input in the evaluation after multiple attempts; scheduling issues, errors, and miscommunication; and staff and student illnesses.

Indicate the evaluation timeline used:

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

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

State database that includes data for the entire reporting year

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

The OSES collects data from the statewide special education database, SC Enrich IEP, for use in the measurement of IDEA Part B Indicator 11. The data are pushed up from the LEA to the state level. The date range for this collection was July 1, 2022 – June 30, 2023. These data were reflective of all students for whom parental consent was received and who received an evaluation consistent with the requirements of IDEA Part B Indicator 11. A team of OSES staff with expertise in data collection, analyses, and reporting reviewed both quantitative and qualitative data from the SC Enrich IEP spreadsheet reports to determine the categorical analysis of each individual student for whom consent to evaluate was received. These staff also conducted follow-up communication with any LEA that exceeded the timeline for one or more children to determine whether there was any noncompliance by LEA. The OSES collected additional data and explanatory documentation to ensure the data and information were valid and reliable.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
157	157	0	0

FFY 2021 Findings of Noncompliance Verified as Corrected

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

To determine whether LEAs had complied with regulatory requirements after a finding on noncompliance in FFY 2021 the OSES reviewed the data for FFY 2022. Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to evaluation for initial eligibility for special education in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

LEAs found to have individual cases of noncompliance in FFY2021 were required to submit to OSES documentation that the children had been evaluated, although late, and that IEP meetings were held for each child found eligible to determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and developed a plan for providing the services. LEAs were required to submit a Verification Spreadsheet which included LEA verification of correction of all individual cases of noncompliance along with evidence of correction for each individual case of noncompliance. Evidence to be submitted for this subset of files include PWNs, eligibility documentation, and enrollment status of exiting students. OSES reviewed these submissions for verification of correction. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	19	19	0

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

FFY 2020

Findings of Noncompliance Verified as Corrected

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

To determine whether LEAs had complied with regulatory requirements after a finding in FFY 2020 the OSES reviewed the data for FFY 2021. Upon review by the OSES, no LEAs were found to have systemic noncompliance for this Indicator. The noncompliance in each LEA appeared to be isolated instances. The OSES reviewed the policies, procedures, and practices related to evaluation for initial eligibility for special education in each LEA and found that the policies and procedures were aligned with all federal and state requirements. The findings of noncompliance were related to distinct situations and not even to a particular staff member. All LEAs with findings were required to review practices and, if appropriate, develop additional procedures such as checklists or an additional review to ensure all evaluation team members were adhering to the regulatory requirements. Based on a review of updated data, the OSES determined that each LEA is correctly implementing the regulatory requirements at the system's level and is, therefore, demonstrating 100% compliance for this Indicator at the system level.

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

LEAs found to have individual cases of noncompliance in FFY2021 were required to submit to OSES documentation that the children had been evaluated, although late, and that IEP meetings were held for each child found eligible to determine whether the child had been denied a FAPE under the IDEA. If the team determined that FAPE had been denied, the team determined the amount of compensatory services needed and developed a plan for providing the services. LEAs were required to submit a Verification Spreadsheet which included LEA verification of correction of all individual cases of noncompliance along with evidence of correction for each individual case of noncompliance. Evidence to be submitted for this subset of files include PWNs, eligibility documentation, and enrollment status of exiting students. OSES reviewed these submissions for verification of correction. Based on these reviews, the OSES determined that each LEA had corrected all individual, student-specific noncompliance and is therefore demonstrating 100% compliance at the student level for this Indicator.

11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 19 uncorrected findings of noncompliance identified in FFY 2020 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, 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.

Response to actions required in FFY 2021 SPP/APR

The state reported above the information required in the required actions section.

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

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

Data Source

Data to be taken from State monitoring or State data system.

Measurement

a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
f. # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

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

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR §303.211 or a similar State option.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	78.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	99.56%	90.22%	52.69%	99.50%

Targets

FFY	2022	2023	2024	2025
Target	100%	100%	100%	100%

FFY 2022 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	4,776
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	1,124

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,072
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	1,487
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	79
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	2,072	2,086	99.50%	100%	99.33%	Did not meet target	No Slippage

Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d , e, or f

14

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

The range of days beyond the third birthday was from 15 to 85 days. There were varying reasons for the delays (and subsequent noncompliance) to include the following: an IEP team was not able to meet due to a staff illness; scheduling conflicts; unaware of timelines; and the LEA held an IEP meeting after the student's third birthday.

Attach PDF table (optional)

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

State monitoring

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

The OSES collects data from the statewide special education database, SC Enrich IEP, for use in the measurement of IDEA Part B Indicator 12. The data are pushed up from the LEA to the state level. The date range for this collection was July 1, 2022 – June 30, 2023. These data were reflective of all students for whom this applies in SC. A team of OSES staff with expertise in data collection, analyses, and reporting reviewed both quantitative and qualitative data from the SC Enrich IEP spreadsheet reports to determine the categorical analysis of each individual student for whom consent to evaluate was received. These staff also conducted follow-up communication with any LEA that exceeded the timeline for one or more children to determine whether or not there was any noncompliance by LEA. The OSES collected additional data and explanatory documentation to ensure the data and information were valid and reliable.

Provide additional information about this indicator (optional)

The OSES has a strong partnership with the state's Part C partner – BabyNet. Part C continues to see a significant increase in referrals to the Part C system. In FFY 2021, there was an increase of 349 children who were served in Part C and referred to Part B. As a result of this partnership, Part C and Part B frequently communicate at both the local level and state level to address any concerns regarding timely notifications to ensure an effective transition.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	7		2

FFY 2021 Findings of Noncompliance Verified as Corrected

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

In FFY 2021, there were nine individual findings within five LEAs. The OSES reviewed the policies, procedures, and practices related to evaluation and transition from C to B in each LEA and found that the policies and procedures were aligned with all federal and state requirements. There was a significant decrease in instances of noncompliance from FFY 2020. Three of the LEAs have corrected findings of noncompliance. The remaining two LEAs, continue to need to correct findings of noncompliance (one per LEA). Those corrections and verifications are still in progress and are not due until January 31, 2024.

The LEAs were required to turn in to the OSES a PWN and/or any additional documentation for each non-compliant file reviewed to support the correction of non-compliance. Upon the correction of all non-compliance, the LEA was issued a verification letter that all corrections had been completed. During this reporting period, the OSES has verified that three of the five LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the regulatory requirements.

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

First, the OSES verified through its statewide data system, that all Part C to B transitions had been completed, with an IEP developed and implemented, unless the student moved from the LEA or consent for evaluation for Part B services was refused. Then, the OSES required the five LEAs to review and correct each individual case where Part C to B transition was untimely in FFY 2021 and who were found eligible under Part B of the IDEA. Specifically,

for each LEA, the OSES issued findings of noncompliance in a corrective actions letter that included a "Verification Spreadsheet". There were nine findings within five districts and the information/requirements were sent to each LEA. The OSES directed the LEAs to correct all individual findings of noncompliance as soon as possible but no later than one year from the date of notification. The OSES specified that correction for each student found eligible under IDEA must include holding an IEP team meeting to determine whether the delay in transition of the child resulted in a denial of FAPE, and if so, consideration of whether compensatory services was warranted. The OSES required LEA personnel to verify completion of the required corrective actions, along with the date of the corrections, on the Verification Spreadsheet provided by the OSES. The OSES reviewed the Verification Spreadsheets and verified correction for all of the individual cases with the exception of two of the cases in two LEAs. These are the same LEAs responsible for the two findings of noncompliance that the SEA has not been able to verify as corrected.

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

For the LEAs that demonstrated non-compliance, the state required the LEAs to submit the necessary documentation that indicated the reasoning for the missed timeline from Part C to Part B along with evidence of discussion of denial of FAPE (where applicable). The LEAs were given a one-year timeline to complete the corrections and submit the paperwork necessary for each case of non-compliance. The LEAs were provided with communication throughout the process to do one or more of the following: clarify questions, support with the process, and to inform the LEAs about the required steps needed to meet compliance within the timeline.

*LEAs have until January 31, 2024, to submit corrections; therefore, corrections and verifications are still in progress.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	114	76	38

FFY 2020

Findings of Noncompliance Verified as Corrected

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

The OSES verified that fifty-one LEAs with a total of 76 findings of noncompliance were correctly implementing the specific regulatory requirements. The LEAs were required by OSES to turn in to the OSES a PWN and/or any additional documentation for each non-compliant file reviewed to support the correction of non-compliance. Each individual case of noncompliance was corrected and verified, meeting 100 percent compliance after corrections. The LEAs were then issued a verification letter that all corrections had been completed.

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

First, the OSES verified through its statewide data system, that all Part C to B transitions had been completed, with an IEP developed and implemented, unless the student moved from the LEA or consent for evaluation for Part B services was refused. Then, the OSES sent letters of notification to districts in February 2, 2022, then a revised reminder was sent on February 17, 2022. Additional reminders were sent via email in December 2022. LEAs were required to review and correct each individual case where Part C to B transition was untimely in FFY 2021 and who were found eligible under Part B of the IDEA. Required documentation was to be submitted to the OSES between the dates of 2/2/23-2/17/23. The OSES directed the LEAs to correct all individual findings of noncompliance as soon as possible but no later than one year from the date of notification. The OSES specified that correction for each student found eligible under IDEA must include holding an IEP team meeting to determine whether the delay in transition of the child resulted in a denial of FAPE, and if so, consideration of whether compensatory services was warranted. The OSES required LEA personnel to verify completion of the required corrective actions, along with the date of the corrections, on the Verification Spreadsheet provided by the OSES.

Forty-six LEAs were given a letter of clearance between January and February 2023. Letters of non-compliance were sent to six LEAs that had not submitted the required paperwork by the deadline and required submissions be sent to the OSES by 5/31/23. Five of those LEAs have now findings verified as corrected. This yields a total of 76 individual corrections.

FFY 2020

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

One LEA has not yet submitted corrections. This one LEA has 38 findings of noncompliance. Notifications have been sent via formal letters, emails and phone calls. Notifications were sent: 2/2022, 12/2022, 2/2023, 3/2023, 5/2023, 6/2023, 9/2023, and 1/2024. No response has been received from this LEA. This will affect the LEA's determinations. A letter will also be sent to the superintendent and the school board.

12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 114 uncorrected findings of noncompliance identified in FFY 2020 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY2020 : (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 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.

Response to actions required in FFY 2021 SPP/APR

For the LEAs that demonstrated non-compliance, the state required the LEAs to submit the necessary documentation that indicated the reasoning for the missed timeline from Part C to Part B along with evidence of discussion of denial of FAPE (where applicable). The LEAs were given a one-year timeline to complete the corrections and submit the paperwork necessary for each case of non-compliance. The LEAs were provided with communication throughout the process to do one or more of the following: clarify questions, support with the process, and to inform the LEAs about the required steps needed to meet compliance within the timeline. LEAs have until January 31, 2024, to submit corrections required in FFY 2021; therefore, corrections and verifications are still in progress.

The determinations will be affected for the LEA that continues to have outstanding findings of noncompliance for FFY 2020.

12 - OSEP Response

12 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the remaining 40 uncorrected findings of noncompliance identified in FFY 2021 (two findings) and FFY 2020 (38 findings) were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and each LEA with remaining noncompliance identified in FFY 2021 and FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

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

Data Source

Data to be taken from State monitoring or State data system.

Measurement

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

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

Targets must be 100%.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	98.92%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	90.48%	96.88%	98.25%	81.42%	95.35%

Targets

FFY	2022	2023	2024	2025
Target	100%	100%	100%	100%

FFY 2022 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
259	319	95.35%	100%	81.19%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

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

State monitoring

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

South Carolina conducted the Indicator 13 data collection review in accordance with our published procedures. The State Performance Plan/Annual Performance Report (SPP/APR) Indicator 13 data collection and review process operates on a three-year data collection cycle. All local educational agencies (LEAs) and state operated programs (SOPs) are assigned to an Indicator 13 data collection group. Each year, one group submits Indicator 13 documents for review, receives feedback, and corrects findings of noncompliance as necessary within assigned timelines. The LEAs and SOPs in other data collection groups are not required to submit documents when it is not their submission year unless the LEA or SOP is continuing to correct noncompliance from a previous year's review. The review of documents is performed by the Office of Special Education Services (OSES) using the Indicator 13 review form.
In the fall, LEAs are notified that they will be reviewed. LEAs submit data for a number of students based on district size. The OSES reviews the submissions and issues feedback and any findings of noncompliance in January. LEAs make corrections according to the required corrective actions and resubmit the new data for review. The nature of the corrective actions varies with the level of overall compliance percentage of the files reviewed. LEAs may be required to simply correct errors, complete virtual professional learning opportunities, or participate in approved direct training opportunities designed to meet the technical assistance needs of the district. All findings of noncompliance are corrected unless the student exits the district after review, but prior to corrections.

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

If no, please explain

SC reports review data for those students who meet federal reporting requirements – age 16 and above by the child count date each year – for Indicator 13. Students who fall under state requirements – age 13 to 16 – are reviewed as part of the program review cycle, but not specifically for Indicator 13.

Provide additional information about this indicator (optional)

The SCDE based their indicator review off of the NTACT:C Indicator 13 checklist. The required LEA corrective actions are based on the compliance percentage at the time of initial data submission and review. All LEAs that had individual findings of noncompliance had to submit evidence of correction of the individual findings of noncompliance. If the LEA scored below 79% compliance, the OSES required the LEA to participate in the indicator 13 virtual professional learning opportunity. The LEA then submitted documentation to the designated staff participating in the post-secondary transition professional learning opportunity.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	8		0

FFY 2021 Findings of Noncompliance Verified as Corrected

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

LEAs reviewed all findings of noncompliance for each individual student as well as the overall compliance percentage for the district and OSES provided professional learning opportunities to address all regulatory requirements of Indicator 13. Following professional development, all LEAs submitted corrections of noncompliance. These requirements are part of the assessment tool used by the SEA. All individual findings of noncompliance were corrected at 100 percent. Once all individual corrections were made, the SEA reassesses all cases to ensure 100% regulatory compliance after corrections. Each LEA with noncompliance identified for this indicator achieved 100% compliance based on a review of updated data subsequently collected through an LEA review of student IEPs.

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

All corrections of noncompliance identified were reviewed and verified by OSES staff for this indicator. All 8 LEAs have submitted corrected IEPs and PWNs that the OSES then verified as correct and compliant. All instances of individual cases of noncompliance were verified as 100 percent correct unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. After the LEA completed all corrective action requirements, additional IEPs not previously reviewed were submitted for review to verify the corrections in subsequent IEPs. These IEPs were reviewed using the same data review tool as was used for the initial review. After verification that the new subset of IEPs submitted were correct a clearance letter was issued to the LEA.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 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 LEA 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 LEA, 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.

Response to actions required in FFY 2021 SPP/APR

The state reported above the information required in the required actions section.

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Results indicator: Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

A. Enrolled in higher education within one year of leaving high school.

B. Enrolled in higher education or competitively employed within one year of leaving high school.

C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.

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

Data Source

State selected data source.

Measurement

A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.
B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.
C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

Instructions

*Sampling **of youth who had IEPs and are no longer in secondary school** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See General Instructions on page 3 for additional instructions on sampling.)*

Collect data by September 2023 on students who left school during 2021-2022, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2021-2022 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. *Definitions*

Enrolled in higher education as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

Competitive employment as used in measures B and C: States have two options to report data under "competitive employment":

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Option 2: States report in alignment with the term "competitive integrated employment" and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Enrolled in other postsecondary education or training as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

Some other employment as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services).

II. *Data Reporting*

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).
Provide the total number of targeted youth in the sample or census.
Provide the actual numbers for each of the following mutually exclusive categories. The actual number of "leavers" who are:

1. Enrolled in higher education within one year of leaving high school;
2. Competitively employed within one year of leaving high school (but not enrolled in higher education);
3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);
4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).

"Leavers" should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, "leavers" who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also

happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

III. *Reporting on the Measures/Indicators*
Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school *must* be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

Include the State’s analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2020	Target >=	17.00%	18.00%	25.00%	11.16%	11.36%
A	11.16%	Data	30.87%	24.44%	10.65%	11.16%	24.55%
B	2020	Target >=	46.00%	47.00%	50.00%	39.39%	40.89%
B	39.39%	Data	61.04%	54.63%	24.90%	39.39%	67.88%
C	2020	Target >=	62.00%	64.00%	75.00%	83.46%	84.46%
C	83.46%	Data	76.44%	69.87%	75.83%	83.46%	74.05%

FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A >=	11.56%	11.76%	11.96%	12.16%
Target B >=	42.39%	43.89%	45.39%	46.89%
Target C >=	85.46%	86.46%	87.46%	88.46%

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a

liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	6,562
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	2,400
Response Rate	36.57%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	503
2. Number of respondent youth who competitively employed within one year of leaving high school	1,129
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	102
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	85

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Enrolled in higher education (1)	503	2,400	24.55%	11.56%	20.96%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,632	2,400	67.88%	42.39%	68.00%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	1,819	2,400	74.05%	85.46%	75.79%	Did not meet target	No Slippage

Please select the reporting option your State is using:

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Response Rate

FFY	2021	2022
Response Rate	24.59%	36.57%

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

The metric used to determine representativeness is a fixed rate of 10%. This means that if the difference between the demographics of respondents and the state demographics is within 10%, the data are considered representative. In other words, if the percentage difference between the proportion of responders and the target group is less than or equal to 10%, the data are deemed to accurately reflect the demographics of children receiving special education services in the state. If the difference exceeds 10%, further action may be needed to address potential biases or disparities in survey responses.

Include the State's analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in its analysis. In addition, the State's analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

The State's analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had Individualized Education Programs (IEPs) in effect at the time they left school includes the following key findings:

1. Demographic Breakdown of Respondents: Of the 6562 individuals exiting special education services, 2400 responded to the survey. In terms of disability category, 52% of respondents indicated they had a "specific learning disability," 31% indicated they had an "other disability," 9% indicated they had an "intellectual disability," and 7% indicated they had an "emotional disability." Additionally, 50% of respondents were white, and 38% were black or African American.

2. Demographic Breakdown of Exiters: Of the 6562 individuals exiting special education services, in terms of disability category, 55% indicated they had a "specific learning disability," 34% had an "other disability," 8% had an "intellectual disability," and 3% had an "emotional disability." 43% of the students who exited were white, and 42% were black or African American.

3. Comparison of Response Rates by Demographics: The Office of Special Education Services (OSES) calculated response rates for race or ethnicity (using federal reporting categories) and primary disability category. These response rates were then compared to the demographics of youth exiting special education services for the reporting year.

4. Threshold for Representativeness: The state set a threshold of a 10 percent difference to determine representativeness. If the difference between the demographics of the respondents and the population of youth exiting special education services was within +/-10 percent, the data were considered representative.

5. Comparison Results: The analysis revealed that there were no differences that exceeded -10.00 percent between the demographics of the respondents and the population of youth exiting special education services. Therefore, the State concludes that these data are representative of the State's demographics.

Overall, the analysis conducted by the State indicates that the response data do accurately reflect the demographics of youth exiting special education services in South Carolina, based on the established threshold for representativeness. This finding underscores the importance of ongoing efforts to improve survey participation and ensure that survey results are more representative of the population they intend to capture.

The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)

YES

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

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

To increase the response rate year over year, particularly among underrepresented groups, the Office of Special Education Services (OSES) will implement the following strategies:

1. LEA Opt-in Surveys: Encouraging Local Education Agencies (LEAs) to opt-in to send surveys directly to their school exiters to follow up on post-secondary experiences. Research has shown that surveys sent from the school rather than from the State Education Agency (SEA) can result in increased response rates and representation. By empowering LEAs to directly engage with their former students, the OSES aims to improve participation and ensure that survey responses are more reflective of the local student population.

2. Third-Party Vendor Outreach: Implementing a proactive approach by partnering with a third-party vendor to contact non-responders from opt-in LEAs and school exiters from LEAs that did not opt-in. This vendor will utilize multiple communication channels, including email, outbound calls, mailers/letters, and Short Messaging Services (SMS), to reach out to former students who have aged out, graduated with a regular high school diploma, received a state certificate, or are dropouts at or above age 14. By employing various outreach methods and engaging non-responders directly, the OSES aims to capture valuable post-secondary experience data from a broader cross-section of former students.

By employing these two complementary strategies, the OSES anticipates increasing the response rate and representation in post-secondary experience surveys, particularly among underrepresented groups. This proactive and multi-faceted approach aims to ensure that survey data accurately reflect the diverse experiences of youth exiting special education services across the state.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

The South Carolina Department of Education (SCDE) conducted an analysis of the response rate for survey submissions from youth who are no longer in secondary school and had Individualized Education Programs (IEPs) in effect at the time they left school. Here's an overview of the analysis and steps taken to reduce bias and promote response from a broad cross-section of youth:

1. Demographic Comparison: SCDE solicited survey responses from students with disabilities regarding demographics of gender, race/ethnicity, and primary disability one year after graduation. A comparison of response rates by demographic to the Total Exiters for the reporting year was conducted to assess representativeness.

2. Promotion of Response: To reduce bias and promote response from a broad cross-section of youth, SCDE implemented several strategies:

- Cooperative Efforts with LEAs: Collaborating with Local Education Agencies (LEAs) to solicit online responses from students with disabilities, leveraging existing relationships and networks to reach a diverse group of respondents.
- Multilingual Options: Incorporating multi-lingual options via print and online accessibility to ensure that language barriers did not hinder participation among non-English speaking students and families.
- Administrative Support: Encouraging administrative support within schools to facilitate survey administration and encourage student participation, emphasizing the importance of capturing diverse perspectives.

3. Evaluation for Representativeness: The response rates were compared to one another to identify representativeness based on a metric of +/-10% (threshold). The evaluation determined that all respondent groups are represented within this threshold, indicating that the survey responses accurately reflect the demographics of children exiting special education services in the State.

4. Absence of Nonresponse Bias: No nonresponse bias was identified in the analysis, suggesting that the survey results are not systematically skewed due to certain demographic groups being more or less likely to respond to the survey in any demographics category or disability categories.

Overall, SCDE's efforts to promote response and reduce bias among youth who are no longer in secondary school and had IEPs in effect at the time they left school were successful, resulting in representative survey data that accurately capture the perspectives of this population.

Sampling Question	Yes / No
Was sampling used?	NO
Survey Question	**Yes / No**
Was a survey used?	YES
If yes, is it a new or revised survey?	NO

Provide additional information about this indicator (optional)

The Office of Special Education Services (OSES) in South Carolina has undertaken the VICTORY SC initiative in collaboration with the Office of Career and Technology and the South Carolina Vocational Rehabilitation Services. This initiative aims to enhance career readiness and post-secondary outcomes for students with disabilities. VICTORY SC involves providing supports tailored to increase career readiness aligned with South Carolina Accountability Standards and fostering improvement reflected on Local Education Agency (LEA) school report cards.

Furthermore, SCDE has established a data sharing agreement with the South Carolina Vocational Rehabilitation Department (SCVRD). Under this agreement, SCDE receives SCVRD consumer information for exiters, which supplements survey data collected. This collaboration enhances the depth and accuracy of data available to inform decision-making and support services for youth transitioning from special education to post-secondary life.

In response to revisiting processes, SCDE implemented a two-pronged approach resulting in improved representativeness of demographic data and an increased response rate of 11.98%. This signifies a positive trend in survey participation and reflects efforts to enhance engagement with youth who have exited secondary school with Individualized Education Programs (IEPs). SCDE anticipates further improvements in response rates as more LEAs opt into the survey data collection process, signaling ongoing commitment to gathering comprehensive data and promoting positive outcomes for students with disabilities.

14 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are from a response group that is representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, 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 response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2021 SPP/APR

The South Carolina Department of Education (SCDE) is taking proactive steps to improve the representativeness of survey data and increase response rates. Achieving a response rate increase of 11.98% is a significant accomplishment and indicates the effectiveness of the two-pronged approach implemented by SCDE. The anticipation of more LEAs opting into the survey data collection process suggests a positive trajectory for further improvements in response rates. This commitment to enhancing data quality and participation reflects SCDE's dedication to serving students with disabilities effectively.

14 - OSEP Response

In its description of its FFY 2022 data, the State reported that the data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. However, the State did not address whether the response group was representative of the demographics of youth who are no longer enrolled in secondary school and had IEPs in effect at the time they left school. Specifically, the State reported, "[I]f the percentage difference between the proportion of responders and the target group is less than or equal to 10%, the data are deemed to accurately reflect the demographics of children receiving special education services in the state." The State must include the extent to which the demographics of respondents are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, as required by the Measurement Table.

14 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, 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 response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

15 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	30
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	10

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

NO

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

Historical Data

Baseline Year	Baseline Data
2016	37.50%

FFY	2017	2018	2019	2020	2021
Target >=	40.00%	42.50%	42.50%	45.00%-60.00%	45.00%-60.00%
Data	60.00%	63.16%	43.48%	39.29%	32.35%

Targets

FFY	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	45.00%	60.00%	45.00%	60.00%	45.00%	60.00%	45.00%	60.00%

FFY 2022 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target (low)	FFY 2022 Target (high)	FFY 2022 Data	Status	Slippage
10	30	32.35%	45.00%	60.00%	33.33%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the 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 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, develop baseline and targets and report on them in the corresponding SPP/APR.

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

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

16 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	3
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	2
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	1

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

NO

Targets: Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

Historical Data

Baseline Year	Baseline Data
2020	50.00%

FFY	2017	2018	2019	2020	2021
Target >=		64.00% - 100.00%	64.00%-100.00%		75.00%-80.00%
Data	0.00%	100.00%	80.00%	50.00%	100.00%

Targets

FFY	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	75.00%	80.00%	75.00%	80.00%	75.00%	80.00%	75.00%	80.00%

FFY 2022 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 2021 Data	FFY 2022 Target (low)	FFY 2022 Target (high)	FFY 2022 Data	Status	Slippage
2	1	3	100.00%	75.00%	80.00%	100.00%	Met target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

The State reported fewer than ten mediations held in FFY 2022. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

Targets*:* In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

Phase I: Analysis:

- Data Analysis;
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Children with Disabilities;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

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

- Infrastructure Development;
- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and
- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPPs/APRs, 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, 2023). 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 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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 (e.g., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (e.g., 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 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

17 - Indicator Data

Section A: Data Analysis

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

Increase the literacy performance of 3rd grade students with disabilities in South Carolina as measured by South Carolina's ELA performance assessment (SC READY).

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

YES

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

After the hiring of a new director, reorganization of the office structure, and establishing a new SSIP team, and with support from the National Center for Educational Outcomes (NCEO), National Center for Systemic Improvement (NCSI), and IDEA Data Center (IDC), we reviewed OSEP's comments from our last SIMR. OSES analyzed the various types of literacy data collected statewide and determined that the third grade SC READY ELA data would be the first opportunity to analyze the impact of instruction based on teachers receiving Science of Reading training and students benefitting from that instruction. This determination was based on the fact that other literacy data collected K-3 was not collected consistently statewide (e.g., MAP, Universal Screeners, iReady, etc.). OSES gathered detailed information regarding current literacy initiatives from the Office of Assessment and Standards and the Office of Early Learning and Literacy within the SCDE and we discussed possibilities for collaboration and coordination with agency-wide initiatives. There was agreement to continue the focus on literacy and an understanding of the importance of targeting third grade ELA scores as an indicator of future academic success which aligns with the Agency's Science of Reading initiative.

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

Data sources used to support a change of the SiMR include SC READY ELA data grades 3-8 at the State, LEA and building level over the past 5 years, universal screening data in literacy for grades K-2, and kindergarten readiness assessment data (KRA).

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

The State analyzed third grade SC READY data by making comparisons with schools that have participated in LETRS training and those schools who have not. Analyzing kindergarten readiness assessment data, screening data, and SC READY data supported the importance of 3rd grade ELA scores for future school success. These findings aligned with research and led to the decision to shift the focus to 3rd grade scores. We saw increased achievement in ELA scores in schools who have participated in LETRS training. We also looked at trend data in our SC READY ELA scores for grades 3-8 and high school, as well as graduation rate, to establish the long-term impacts of low literacy scores. This led us to a consensus with the research that clearly states that by the end of third grade, all students should have proficient literacy skills. The research also supports that all aspects of literacy (literacy, writing, speaking, listening, and thinking) are intertwined and that improvements across all essential components of literacy instruction supports long-term academic success to enable our students to be college and career ready. The importance of all the aspects of literacy supported the change in our language from "reading" to "literacy."

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

Stakeholders, including Special Education Directors, parents, and interagency representatives, were asked for feedback regarding the shift from using grade 4-8 SC READY ELA data to using 3rd grade SC READY ELA data and for input regarding the baseline and targets. Stakeholders agreed that the shift to using 3rd grade SC READY data was supported by research because changing the outcomes for third grade will impact student outcomes from third grade through graduation. Stakeholders also agreed that amending the SSIP to center on "literacy" skills rather than "reading" skills is important, as literacy skills are intertwined and SC READY comprehensively assesses all aspects of literacy skills as opposed to reading skills only. The new revised SiMR received positive feedback from our stakeholder groups. We will continue to engage our stakeholders frequently through Advisory Council meetings and Special Education Director meetings.

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

YES

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

The subset of the population includes K-3rd grade students with disabilities in five pilot schools from diverse demographics around South Carolina. Kindergarten, 1st grade, 2nd grade, 3rd grade, and special education teachers in these schools must have participated in LETRS training.

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.

Changes to the theory of action include:
Revising the scope to a more specific focus
Improved measurability due to decreased input and output variables (more specific training to a more defined group and narrowed focus to K-3rd grade only
Training for special education teachers aligned with the science of reading.

Please provide a link to the current theory of action.

https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/data-collection-and-reporting/state-performance-plan-and-state-determinations/section-vi-theory-of-action/

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
2021	10.61%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	10.61%	11.11%	11.11%	11.61%

FFY 2022 SPP/APR Data

Number of students who meet or exceed	Number of students tested	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
13	85		10.61%	15.29%	Met target	N/A

Provide the data source for the FFY 2022 data.

3rd grade SC READY ELA scores

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

3rd grade SC READY ELA data is collected by the Office of Research and Data Analysis (ORDA) and analyzed by the SSIP team and our independent evaluator.

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

NO

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

https://ed.sc.gov/districts-schools/special-education-services/data-and-technology-d-t/data-collection-and-reporting/state-performance-plan-and-state-determinations/ssip-evaluation-plan/

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.

The evaluation plan has been updated to reflect more specific and measurable data to include how special education teachers are applying knowledge based on the science of reading for writing appropriate and rigorous goals, progress monitoring, following a clear trajectory of improvement, and identifying and monitoring student-specific needs.

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

The rationale for changing the SSIP evaluation plan was that the SiMR was revised and theory of action changed and the evaluation plan needed to be updated to reflect those changes. The evaluation plan also needed to be clearer and more concise to align with stakeholder feedback.

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

Improvement strategies during this reporting period included the hiring of a new director, restructuring of teams and cross-team collaborative groups, office realignment based on education associates' knowledge base and strengths, the strengthening of our SC TEAMS technical assistance network for LEAs, the creation of a new SSIP team, as well as increased collaboration with the Office of Assessment and Standards and the Office of Early Learning and Literacy. The SSIP team meets weekly with our academic technical assistance team to ensure technical assistance and the professional development they are offering and continue to create aligns with the targeted needs of our districts based on our current data.

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.

Hiring a permanent director assisted with establishing a long-term plan, collaboration with other offices at SCDE, better organization and structure for the SSIP, and alignment with agency initiatives to effectively and efficiently address literacy concerns for students with disabilities in SC. (b. sustainability of systems improvement efforts; governance)

Collaboration with other offices has resulted in:
a. participation in the creation of the state's new ELA standards.
b. participation in the training/roll out of the new ELA standards across the state.
c. increased OSES staff knowledge in the science of reading alongside the state's literacy specialists. This has led to further collaboration between general education and special education, resulting in the identification of LEA concerns and SEA mandates to use the science of reading and provide effective core instruction. This will improve 3rd grade outcomes for all students, including students with a disability, and sustain improvement in the long term. (c. scale-up; data, quality standards, professional development)

Technical assistance to districts provided at Summer Institute and the MTSS conference by the Academic Alliance of South Carolina (AASC) and SC TEAMS provided districts with resources to build, sustain, and scale up LEAs' capacity for evidence-based practices in literacy. (b. sustainability of systems improvement efforts and (c. scale-up; professional development and quality standards)

New department teams (Policy, Guidance and Community Engagement, Review and Analysis, Improvement Support, Data Collection and Verification, and Fiscal and Grants Management) were created that utilize the strengths and knowledge of the individuals that were assigned to each team which enables the department to support LEAs as they support students with disabilities. In addition, efforts have been made to support the sustainability of the reading initiatives. The feedback on individual student IEPs provided by the Review and Analysis team during the cyclical program review process will help OSES better align professional development to the needs of districts in the area of reading and goal writing. The Improvement Support team will facilitate targeted professional development from the data gathered by the program reviews, determinations, indicators, and complaints. (b. sustainability of systems improvement efforts; governance, accountability/monitoring)

Within our office, one person from every team is also on a cross-team collaborative group which supports interdepartmental communication and collaboration and results in improvement in key initiatives. Specifically, the creation of a specific cross-team collaborative group focusing on the SSIP has resulted in improved collaboration with key partners to support all aspects of the SSIP. (a. achievement of the SiMR, (b. sustainability of systems improvement efforts; accountability, and quality standards)

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

YES

Describe each <u>new</u> (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

Improvement strategies during this reporting period included restructuring of teams and cross-team collaborative groups, individual team assignments aligned to education associate's knowledge base and strengths, improved technical assistance, as well as increased collaboration with other offices within the SEA.

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

1. Gathering additional stakeholder input:
    a. Establishing an external stakeholder group to include literacy specialists, LEA special education director, and school-based personnel.
    b. Establishing an external stakeholder group to include SEA personnel from other offices.
    c. Gathering additional feedback from the state advisory council and LEAs.
    d. Gathering stakeholder input from parents in collaboration with our parent training and information center.

2. Training specific to the needs of the five schools outlined in the SSIP in the areas of writing literacy goals aligned to the new ELA standards that are rigorous and help bridge the gap for students with disabilities, establishing appropriate baseline data, and progress monitoring.

3. Conducting information sessions for parents of students with disabilities for the five pilot schools related to how to support children at home based on evidence-based reading practices.

4. Securing an external evaluator.

5. Finalizing fidelity surveys for general education teachers, special education teachers, administrators, coaches, and literacy specialists.?

6. Meeting with school level data teams to conduct data analyses.

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

Evidence-based practices that have been implemented include:?
1. LETRS training
2. Professional development on writing reading goals
3. MTSS Conference

Provide a summary of each evidence-based practices.

LETRS Training (Language Essentials for Teachers of Reading and Spelling) – This is a professional learning course for instructors of reading, spelling, and related language skills. It provides educators with in-depth knowledge and tools that they can use with any reading program. The program provides educators with the Science of Reading pedagogy, depth of knowledge, and tools to teach language and literacy skills to every student. The evidence-based practices imbedded within this training include the structure of the English language, the cognitive processes of learning to read, and the teaching practices proven to be most effective in preventing and remediating reading difficulties. This was initially rolled out to tier 3 buildings (most significant need) within South Carolina and during this reporting period as well as the next reporting period is being rolled out to all kindergarten through third grade teachers and special education teachers.

Professional development on writing reading goals – Professional development was provided in a train-the-trainer model in the writing of literacy goals aligned to the new South Carolina ELA standards. This training included establishing students' strengths and needs in reading based on the specific indicators (skills) within the standards, aligning goals to each child's specific needs, establishing a baseline, and progress monitoring to include incorporating parent and student input in the process. Training materials were shared so that the materials can be used by the districts to train additional staff. The evidence-based practices included in this professional development were audience engagement with the presentation, modeling through case scenarios, as well as ongoing support based on Data-Based Individualization (DBI) and using resources from National Center for Intensive Intervention (NCII).

MTSS Conference – MTSS teams that included general education and special education staff were trained on how to use data-based decision making in the alignment of interventions, progress monitoring the effectiveness of interventions and how special education fits into the MTSS process. Two common MTSS processes incorporated the use of evidence-based practices: RTI (response to intervention) that addresses academic needs and PBIS (positive behavior interventions and supports) which supports students behavioral needs.

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

LETRS training – The goal of this training is to change a mindset throughout the districts in South Carolina that a three-cueing system of teaching reading is not evidence-based and not effective and has not resulted in improved outcomes for our state in reading for years. Additionally, a goal is for districts to understand that if reading scores have not improved in years then we cannot keep doing the same thing and expect increased results suddenly. Following the science of reading research and having the appropriate tools to teach children how to read is intended to impact our SiMR by improving reading outcomes for students with disabilities. Districts and teachers were very apprehensive in the beginning, but as they are seeing the results, we are building a large group of supporters. Parents are beginning to see improved outcomes for their children and are becoming more knowledgeable and involved in their children's progress in reading.

Professional development on writing reading goals – The goal of this training was to walk LEA directors and coordinators through the process of aligning goals to student-specific needs and to the new South Carolina ELA standards. The training targeted the understanding that goals need to be achievable but also rigorous enough to bridge the gap between where the student is functioning and grade level standards. Our hope is that writing more appropriate goals for reading will lead to better reading outcomes.

MTSS Conference – The conference included sessions that targeted collaboration between special education teachers and general education teachers all working to increase outcomes for the same students. These sessions focused on structuring an MTSS system that meets student needs at each tier, the importance of rigorous instruction and goals, and the importance of collaboration among general education and special education across all tiers.

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

No data to monitor fidelity of implementation was collected as the new SSIP team was convened in late March 2023 and it was discovered that the state's previous SiMR and theory of action had not been not fully implemented.

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.

No additional data was collected due to changes in the Theory of Action and Evaluation Plan.

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

In the fall of 2023, surveys were created that will be completed by administrators, general education teachers, special education teachers, literacy specialists, reading coaches, and special education directors. These survey results will be analyzed by our outside evaluator to determine fidelity of implementation and practice change.

The next reporting period will include professional development for special education teachers aligned with the science of reading and our new ELA standards, as they will be mandatory for SC for the 2024-2025 school year. We will facilitate increased communication and collaboration between our general education teachers and special education teachers with additional professional development. We will analyze implementation data reports from our outside evaluator and use those data results to adjust our support to teachers for implementing the science of reading in their classrooms for increased student improvement of literacy proficiency.

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 updated Theory of Action and Evaluation Plan includes evidence-based activities and strategies that will lead to more significant student growth in reading proficiency. We will continue to focus on literacy by providing additional training and support for special education teachers and administrators in the areas of goal-writing and progress monitoring that aligns with the State LETRS initiative and the state's new ELA Standards.

We will also work toward continued collaboration with other offices within the South Carolina Department of Education by including SEA representation in an internal SSIP stakeholder group that meets quarterly. Our goal is to create an understanding that our special education students are general

education students first and that to improve outcomes for all students, we need to ensure that we are improving outcomes for our students with disabilities.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The OSES shared information about the SPP/APR and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SPP/APR were shared at the quarterly ACESD meetings. The SPP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly also provides feedback on all aspects of the SPP/APR components and other initiatives.

We work with our PTI, Family Connection, to create a cohesive message and inform stakeholders about OSES initiatives and general supervision systems. We also incorporate them into SC TEAMS. Additionally, they attend all SC TEAMS meetings, Spring and Fall Administrator Meetings for LEA Special Education Directors and the SC TEAMS Summer University. Also, a Community Engagement position was created in the OSES to act as a liaison between our office and our PTI and other community stakeholders.

Virtual Town hall meetings were held at various times and dates to solicit as much stakeholder input as possible on our SSIP.

The OSES shared information about the SSIP and sought input from our South Carolina Advisory Council on the Education of Students with Disabilities (ACESD). This partnership is designed to authentically engage this critical group of stakeholders in collaborative efforts that are directly aligned with the educational results and functional outcomes for students with disabilities. Updates with the SSIP were shared at the quarterly ACESD meetings. The SSIP targets were also shared with the South Carolina Joint Citizens and Legislative Committee on Children and feedback was solicited from this group as well. The LEA directors' group that meets bi-monthly provided feedback on all aspects of the SSIP components including setting current targets and establishing our baseline.

Continued stakeholder input was obtained from our directors and state literacy specialists prior to June 30, 2023. The OSES received positive feedback on the revisions to the SSIP Theory of Action and Evaluation Plan. Additional stakeholder input regarding the Theory of Action and Evaluation plan was collected after June 30th and will be reported on next year's SPP/APR.

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

The current SSIP and proposed revisions were presented at our twice monthly virtual directors meeting on June 5th, 2023. The presentation was followed by a question-and-answer session. There was positive feedback regarding the clarity of the revisions and measuring 3rd grade reading, which is critical for future success. We also met with a stakeholder group consisting of state level literacy specialists that provide direct support to South Carolina schools. We reviewed the current SSIP, implementation strategy changes, evidence-based practices, and developing fidelity surveys followed by a question-and-answer session and discussion. The literacy specialists and directors were very positive about the alignment with the science of reading training initiative they are working on, the new ELA standards, and the additional support for special education teachers. Virtual town hall meetings were also held to solicit parent input and community feedback.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

There were some concerns that special education does not always collaborate well with general education within the LEAs. This input was new to the OSES. The state will be addressing this issue in collaboration with our technical assistance center to provide technical assistance and create professional development that will target this concern.

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.

A barrier that was identified in the stakeholder process and identified in the new ELA standards training was that special education can often be "on their own island" and that collaboration is sometimes hindered by the perception that special education is unwilling to cooperate. This information was very surprising to our team, as we are always urging our special education leaders to find a seat at the table and work closely with their general education counterparts. For this reason, improving collaboration between special education and general education is on our list of next steps.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

The State did not, as required by the OSEP Response to the State's FFY 2020 SPP/APR and the Measurement Table, provide: (1) data for FFY 2021; (2) baseline data; (3) FFY 2020- FFY 2025 targets; and (4) the numerator and denominator descriptions. Additionally, the State did not provide in its FFY 2021 submission, a current Evaluation Plan, or a summary of the strategies or activities that ensured the use of evidence-based practices with fidelity, as required by the Measurement Table.

In the FFY 2022 SPP/APR, the State must report all required data and components in this indicator. Reporting data under this indicator is critical so that

the State, OSEP, and the public can determine the State's performance and whether and how the State met its targets for this indicator. OSEP may consider taking additional actions if the State is unable to report the required data in its FFY 2022 SPP/APR.

Response to actions required in FFY 2021 SPP/APR

OSES has provided data for FFY 2021, baseline data, targets for FFY 2022-2025, as well as the numerator and denominator descriptions for this indicator. In addition, OSES has included the updated SiMR, theory of action, and evaluation plan.

17 - OSEP Response

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

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

17 - 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 Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Peter Keup

Title:

Director, Office of Special Education Services

Email:

pekeup@ed.sc.gov

Phone:

18037670453

Submitted on:

04/24/24 2:57:08 PM

Determination Enclosures

RDA Matrix

South Carolina
2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
67.50%	Needs Assistance

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	9	45.00%
Compliance	20	18	90.00%

(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 2024: Part B."

2024 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	99%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	97%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	22%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	92%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	18%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	94%	1

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	99%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	97%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	35%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	95%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	14%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	92%	1

(2) Statewide assessments include the regular assessment and the alternate assessment.

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	31	0
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	55	0

**When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. §300.102(a)(3)(iv), in effect June 30, 2017, "the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential."

2024 Part B Compliance Matrix

Part B Compliance Indicator (3)	**Performance (%)**	**Full Correction of Findings of Noncompliance Identified in FFY 2021** (4)	**Score**
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	1.23%	YES	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	2.56%	YES	2
Indicator 11: Timely initial evaluation	99.38%	YES	2
Indicator 12: IEP developed and implemented by third birthday	99.33%	NO	2
Indicator 13: Secondary transition	81.19%	YES	1
Timely and Accurate State-Reported Data	97.62%		2
Timely State Complaint Decisions	98.36%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			1
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	Yes, 2 to 4 years		

(3) The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2024_Part-B_SPP-APR_Measurement_Table.pdf

(4) This column reflects full correction, which is factored into the scoring only when the compliance data are >=5% and <10% for Indicators 4B, 9, and 10, and >=90% and <95% for Indicators 11, 12, and 13.

Data Rubric

South Carolina

FFY 2022 APR (1)

Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1

APR Score Calculation

Subtotal	21
Timely Submission Points - If the FFY 2022 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) =	26

(1) 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.

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 8/30/23	1	1	0	2
Personnel Due Date: 2/21/24	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Discipline Due Date: 2/21/24	1	1	1	3
State Assessment Due Date: 1/10/24	1	1	1	3
Dispute Resolution Due Date: 11/15/23	1	1	1	3
MOE/CEIS Due Date: 5/3/23	1	1	1	3

618 Score Calculation

Subtotal	20
Grand Total (Subtotal X 1.23809524) =	24.76

(2) 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 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation

A. APR Grand Total	26
B. 618 Grand Total	24.76
C. APR Grand Total (A) + 618 Grand Total (B) =	50.76
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	52.00
D. Subtotal (C divided by Denominator) (3) =	0.9762
E. Indicator Score (Subtotal D x 100) =	97.62

(3) 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 1.23809524.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 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 B 618 Data

1) Timely – A State will receive one point if it submits all ED*Facts* files or the entire E*MAPS* 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	**ED*Facts* Files/ E*MAPS* Survey**	**Due Date**
Part B Child Count and Educational Environments	C002 & C089	8/30/2023
Part B Personnel	C070, C099, C112	2/21/2024
Part B Exiting	C009	2/21/2024
Part B Discipline	C005, C006, C007, C088, C143, C144	2/21/2024
Part B Assessment	C175, C178, C185, C188	1/10/2024
Part B Dispute Resolution	Part B Dispute Resolution Survey in E*MAPS*	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in E*MAPS*	5/3/2023

2) Complete Data – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to ED*Facts* aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in E*MAPS*. 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

Dispute Resolution

IDEA Part B

South Carolina

School Year: 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing' if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	94
(1.1) Complaints with reports issued.	61
(1.1) (a) Reports with findings of noncompliance	52
(1.1) (b) Reports within timelines	60
(1.1) (c) Reports within extended timelines	0
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	33

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	11
(2.1) Mediations held.	3
(2.1) (a) Mediations held related to due process complaints.	2
(2.1) (a) (i) Mediation agreements related to due process complaints.	2
(2.1) (b) Mediations held not related to due process complaints.	1
(2.1) (b) (i) Mediation agreements not related to due process complaints.	1
(2.2) Mediations pending.	0
(2.3) Mediations withdrawn or not held.	8

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	43
(3.1) Resolution meetings.	30
(3.1) (a) Written settlement agreements reached through resolution meetings.	10
(3.2) Hearings fully adjudicated.	5
(3.2) (a) Decisions within timeline (include expedited).	5
(3.2) (b) Decisions within extended timeline.	0
(3.3) Due process complaints pending.	6
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	32

Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)

(4) Total number of expedited due process complaints filed.	5
(4.1) Expedited resolution meetings.	4
(4.1) (a) Expedited written settlement agreements.	1
(4.2) Expedited hearings fully adjudicated.	3
(4.2) (a) Change of placement ordered	0
(4.3) Expedited due process complaints pending.	0
(4.4) Expedited due process complaints withdrawn or dismissed.	2

State Comments:

Errors:
Please note that the data entered result in the following relationships which violate edit checks:

State error comments:

This report shows the most recent data that was entered by:
South Carolina
These data were extracted on the close date:
11/15/2023

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 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

https://sites.ed.gov/idea/how-the-department-made-determinations/

Final Determination Letter

June 21, 2024

Honorable Ellen Weaver
Superintendent of Education
South Carolina Department of Education
1006 Rutledge Building, 1429 Senate Street
Columbia, SC 29201

Dear Superintendent Weaver :

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that South Carolina needs assistance in implementing the requirements of Part B of the IDEA. This determination is based on the totality of South Carolina's data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

South Carolina's 2024 determination is based on the data reflected in its "2024 Part B Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for each State and Entity and consists of:

(1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;

(2) a Results Matrix that includes scoring on Results Elements;

(3) a Compliance Score and a Results Score;

(4) an RDA Percentage based on both the Compliance Score and the Results Score; and

(5) the State's or Entity's Determination.

The RDA Matrix is further explained in a document, entitled "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2024, as it did for Part B determinations in 2014-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for South Carolina).

In making Part B determinations in 2024, OSEP continued to use results data related to:

(1) the participation and performance of CWD on the most recently administered (school year 2021-2022) National Assessment of Educational Progress (NAEP), as applicable (For the 2024 determinations, OSEP using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2024 determination as it did for Puerto Rico's 2023 determination. OSEP did not use NAEP data in making the BIE's 2024 determination because the NAEP data available for the BIE were not comparable to the NAEP data available for the 50 States, the District of Columbia, and Puerto Rico; specifically, the most recently administered NAEP for the BIE is 2019, whereas the most recently administered NAEP for the 50 States, the District of Columbia, and Puerto Rico is 2022.)

(2) the percentage of CWD who graduated with a regular high school diploma; and

(3) the percentage of CWD who dropped out.

For the 2024 IDEA Part B determinations, OSEP also considered participation of CWD on Statewide assessments (which include the regular assessment and the alternate assessment). While the participation rates of CWD on Statewide assessments were a factor in each State or Entity's 2024 Part B Results Matrix, no State or Entity received a Needs Intervention determination in 2024 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2025 determinations.

You may access the results of OSEP's review of South Carolina's SPP/APR and other relevant data by accessing the E*MAPS* SPP/APR reporting tool using your South Carolina-specific log-on information at https://emaps.ed.gov/suite/. When you access South Carolina's SPP/APR on the site, you will find, in applicable Indicators 1 through 17, the OSEP Response to the indicator and any actions that South Carolina is required to take. The actions that South Carolina is required to take are in the "Required Actions" section of the indicator.

It is important for you to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

You will also find the following important documents in the Determinations Enclosures section:

(1) South Carolina's RDA Matrix;

(2) the HTDMD link;

(3) "2024 Data Rubric Part B," which shows how OSEP calculated South Carolina's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and

(4) "Dispute Resolution 2022-2023," which includes the IDEA Section 618 data that OSEP used to calculate the South Carolina's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, South Carolina's 2024 determination is Needs Assistance. A State's or Entity's 2024 RDA Determination is Needs Assistance if the RDA Percentage is at least 60% but less than 80%. A State or Entity's determination would also be Needs Assistance if its RDA Determination percentage is 80% or above but the Department has imposed Specific Conditions on the State's or Entity's last three IDEA Part B grant awards (for FFYs 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

South Carolina's determination for 2023 was also Needs Assistance. In accordance with Section 616(e)(1) of the IDEA and 34 C.F.R. §300.604(a), if a State or Entity is determined to need assistance for two consecutive years, the Secretary must take one or more of the following actions:

(1) advise the State or Entity of available sources of technical assistance that may help the State or Entity address the areas in which the State or Entity needs assistance and require the State or Entity to work with appropriate entities;

(2) direct the use of State-level funds on the area or areas in which the State or Entity needs assistance; or

(3) identify the State or Entity as a high-risk grantee and impose Specific Conditions on the State's or Entity's IDEA Part B grant award.

Pursuant to these requirements, the Secretary is advising South Carolina of available sources of technical assistance, including OSEP-funded technical assistance centers and resources at the following websites: Monitoring and State Improvement Planning (MSIP) | OSEP Ideas That Work, Individuals with Disabilities Education Act (IDEA) Topic Areas, and requiring South Carolina to work with appropriate entities. In addition, South Carolina should consider accessing technical assistance from other Department-funded centers such as the Comprehensive Centers with resources at the following link: https://compcenternetwork.org/states. The Secretary directs South Carolina to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. We strongly encourage South Carolina to access technical assistance related to those results elements and compliance indicators for which it received a score of zero. South Carolina must report with its FFY 2023 SPP/APR submission, due February 1, 2025, on:

(1) the technical assistance sources from which South Carolina received assistance; and

(2) the actions South Carolina took as a result of that technical assistance.

As required by IDEA Section 616(e)(7) and 34 C.F.R. §300.606, South Carolina must notify the public that the Secretary of Education has taken the above enforcement actions, including, at a minimum, by posting a public notice on its website and distributing the notice to the media and through public agencies.

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering three criteria related to IDEA Part B determinations as part of the Department's continued efforts to incorporate equity and improve results for CWD. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). This factor would be reflected in the determination for each State and Entity through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State or Entity that would otherwise receive a score of Meets Requirements would not be able to receive a determination of Meets Requirements if the State or Entity had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is considering as potential additional factors the improvement in proficiency rates of CWD on Statewide assessments. Third, the Department is considering whether and how to continue including in its determinations criteria the participation and proficiency of CWD on the NAEP.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix and States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 3, 5, and 6 (as they have in the past). Under EDFacts Modernization, States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in the EDPass or EMAPS system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, South Carolina must report annually to the public, by posting on the State educational agency's (SEA's) website, the performance of each local educational agency (LEA) located in South Carolina on the targets in the SPP/APR as soon as practicable, but no later than 120 days after South Carolina's submission of its FFY 2022 SPP/APR. In addition, South Carolina must:

(1) review LEA performance against targets in the State's SPP/APR;

(2) determine if each LEA "meets the requirements" of Part B, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part B of the IDEA;

(3) take appropriate enforcement action; and

(4) inform each LEA of its determination.

Further, South Carolina must make its SPP/APR available to the public by posting it on the SEA's website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

(1) includes South Carolina's determination letter and SPP/APR, OSEP attachments, and all State or Entity attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and

(2) will be accessible to the public via the ed.gov website.

OSEP appreciates South Carolina's efforts to improve results for children and youth with disabilities and looks forward to working with South Carolina over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,

Valerie C. Williams
Director
Office of Special Education Programs

cc: South Carolina Director of Special Education