

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**

North 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 North Carolina Department of Public Instruction (NCDPI) provides leadership and support to 340 public school units (PSUs). Public school units is the collective term used to describe 115 local education agencies, 211 public charter schools, 1 regional school, 8 lab schools, and 5 state-operated programs. All PSUs must follow the requirements of the Individuals with Disabilities Education Act (IDEA) and are provided technical assistance and support with these requirements through the NCDPI Office of Exceptional Children (OEC) within the division of Educator and Student Advancement. The OEC's organizational structure includes a Senior Director, an Assistant Director, and 7 Sections Chiefs who provide leadership to OEC consultants in the following sections: Early Childhood Exceptional Children; Regional Administrative Support; Special Programs and Data; Policy, Monitoring, and Audit; Program Improvement and Professional Development; Sensory Support and Assistive Technology; and Supporting Teaching and Related Services. *NOTE: The number of PSUs increased from 330 to 340 in FFY2022 as a result of the opening of 10 new public charter schools.

Additional information related to data collection and reporting

The OEC collaborates with its partners across the NCDPI to collect the data necessary to report on its SPP/APR and provide associated support to its PSUs. Those partnerships include: Educator and Student Advancement; Standards, Accountability, and Research; and Technology Services and Digital Learning.

Number of Districts in your State/Territory during reporting year

340

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 NCDPI-OEC has established its General Supervision System consistent with requirements of the IDEA to include: (1) the SPP/APR; (2) Policies, Practices, and Procedures; (3) a Dispute Resolution System; (4) Data Collection; (5) Monitoring Activities; (6) Improvement, Correction, Incentives, and Sanctions; (7) Targeted Technical Assistance; and (8) Fiscal Management. Two key electronic data systems support the integration of these activities.

First, the Every Child Accountability System (ECATS) is North Carolina's (NC) database for the development of individualized education programs (IEPs) and is required for use by all NC PSUs in the management of services for children with disabilities (CWD). Through ECATS, data elements used to develop IEPs inform key data collections for the SPP/APR, provide opportunities for frequent or as-needed desktop monitoring, identify trends that require technical assistance and/or professional development, provide access to documents needed as part of dispute resolution; and enable the OEC opportunities to examine local practices for the implementation and documentation of practices necessary to provide services to CWD. Further, standard and advanced reporting functions provide real-time, on-demand data to inform state and local decision making for improving outcomes for CWD.

Second, the NC Comprehensive, Continuous Improvement Plan (CCIP), also known as the fiscal federal grants system. The CCIP collects fiscal data necessary to ensure that the local management of federal fiscal dollars are budgeted in alignment with subgrantee applications, the SPP/APR, and document assurances that federal funds are expended in order to improve outcomes for CWD.

In addition to the federal regulations established by the IDEA, NC maintains state board policies and Article 9 of General Statute 115C to operationalize its requirements.

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.

NC has designed its system to include: Professional Learning, Technical Assistance, and Systems-level Coaching further outlined with three intensity levels of Universal, Tailored, and Customized supports. All systems of support are aligned to the state performance report and local PSU determinations.

Universal Technical Assistance (UTA) is described as support voluntarily accessed by PSUs via synchronous or archived OEC resources accessed through its website, listservs, webinars, videos, etc. This level of support is often one-time/one-way interaction with OEC staff. The topics selected for UTA are relevant to all PSUs in all regions, disciplines, groups, grades, populations, and/or subgroups and are developed primarily to address policy, practice, procedural, and/or infrastructure issues.

Tailored Technical Assistance (TTA) is designed for selected regions, disciplines, groups, grades, populations, and/or subgroups, and is provided via synchronous, small group discussion/work sessions, or professional learning community (PLC). TTA is characterized by longer/episodic intersections with specialty areas/groups (i.e., Supporting, Teaching, and Related Services Section; Policy, Monitoring, and Audit Section, etc.) within the OEC. The content for TTA is developed and delivered based on regional or subgroup data.

Customized Technical Assistance (CTA) is required or made available for specific PSUs, disciplines, groups, grades, populations, and/or subgroups. CTA is characterized by sustained/prolonged interaction facilitated by the OEC and is based upon PSU-specific corrective action, PSU APR determination status, and/or infrastructure in need of intervention. CTA is delivered by specific OEC staff matched to the identified need.

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.

NC has designed its system to include: Professional Learning, Technical Assistance, and Systems-level Coaching further outlined with three intensity levels of Universal, Tailored, and Customized supports. All systems of support are aligned to the state performance report and local PSU determinations.

Universal Professional Development (UPD) are opportunities for all PSU staff to engage in a broad catalogue of self-selected opportunities designed to support positive outcomes for CWD. UPD is developed by OEC staff to address statewide programmatic or outcome data. PSUs have the option of requiring UPD locally to address areas of focus as identified in local improvement plans.

Tailored Professional Development (TPD) are opportunities for select PSU staff in regions, disciplines, grades, populations, and/or subgroups to engage in specialized topics developed as a result of regional or subgroup data. TPD is available to PSU meeting selection criteria or may be compulsory for PSUs demonstrating need, risk, or corrective action. A train-the-trainer model is the delivery mechanism used in order to support local capacity-building efforts and is provided by specialty area OEC staff able to provide feedback and coaching necessary for scaling up local improvement activities.

Customized Professional Development (CPD) is intended for specific PSUs in regions, disciplines, grades, populations, and/or subgroups in order to provide highly specialized topics. CPD is available to or may be compulsory PSUs demonstrating urgent, serious need/meeting selection criteria. Delivery is based on regional or subgroup data, delivered by select OEC staff, and do not rely upon the train-the-trainer model.

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.

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

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

YES

Number of Parent Members:

25

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.

To ensure we reach a diverse groups of stakeholders, multiple avenues of engagement have been developed. Parents are engaged in stakeholder activity through partnerships with the Exceptional Children Assistance Center (ECAC), North Carolina's parent training and information center, advocacy groups, outreach via listserv maintained by the OEC parent liaison, and collaboration with the Council on Exceptional Services for Exceptional Children (CESEC), NC's federally required parent advisory council. Further ensuring a diverse group of stakeholders from various geographic areas, PSUs often provide recommendations for parent participation from local parent advisory committees when requested. The OEC parent liaison also maintains a parent listserv for sharing information helpful to parents of CWD that includes opportunities for engagement. During FY2022, parents were contributing members on the OEC's three SPP workgroups: Data Literacy, Research-Informed Practices, and Stakeholder and Family Engagement. There are representatives from each of the eight regions of North Carolina to ensure diversity of the group. The Office of Exceptional Children works with the Exceptional Children Assistance Center (ECAC) to build capacity with our parents. ECAC provides training regarding IEP processes, courses of study, dispute resolution processes, effective communication, and continue to provide additional targeted technical assistance for parent groups.

North Carolina initiated a review and revision of SPP/APR in February 2022. Parents were included as thought-partners when reviewing/evaluating progress, discussions regarding the appropriateness of targets, and developing improvement strategies. In particular, parents provided feedback regarding significant disproportionality (Indicators 4,9,10), the potential transition from a sampling plan for measuring Indicator 8 and Indicator 14, and reflecting upon the NC 2023 Determination for improvement activities. Recommendations included census activities conducted by all PSUs and made available to parents/guardians/students at each annual IEP Team meeting for Indicator 8 to increase parent participation rates; student record reviews to determine if local practices were contributing to disproportionate representation; and moving to a census model for Indicator 14. Improvement activities included the development of a collection of parent information materials specific to the discipline of CWD, Child Find, and eligibility determinations. Targets for Indicator 3 are still in progress as are the potential revisions to the SIMR to align with NC's Statewide Professional Development Grant (both are focused on reading) and revisions to NC's General Supervision paper.

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.

Parent engagement activities are scheduled with consideration given to time of day, platform (in-person/virtual), accessibility, and publicity. Communication loops include publicizing events through the OEC website, parent listserv, and leveraging partnerships with parent advocacy groups, other listservs throughout NCDPI, and the CESEC.

Meetings include closed-captioning in any language, Spanish-speaking translators, as well as American Sign Language Interpreters. OEC staff consult with ECAC to ensure materials are parent-friendly, easily understood, and translated when necessary. Various opportunities for feedback are routinely provided through open-discussion, chat features, small group discussions, and/or survey materials. To the extent possible, presentation materials are provided in advance of scheduled meetings in order to provide ample opportunity for review prior to discussion.

Soliciting Public Input:

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

Public input is solicited through OEC announced meetings and/or surveys, and analysis of survey items related to CWD that may be collected as a result of school improvement activities by other NCDPI offices. The OEC sponsors an external stakeholder group composed of parents, advocacy groups, CESEC members, CEC representatives, PSU staff, and NCDPI leaders. The external stakeholder group had regularly scheduled meetings at the beginning of FY2022 to discuss the changes in targets and improvement activities initiated in FY2021 and then transitioned to as-needed meetings during the Spring of FY2022. This transition, in part, was to provide time for an internal OEC infrastructure analysis as the result of onboarding a new Senior Director as a result of retirement.

The OEC also facilitates public input through hosting the Director Advisory Committee (DAC) and quarterly EC Administrators meetings to evaluate

progress and develop improvement strategies. Local EC administrators, local program specialists, and/or local EC designees, identify unmet needs for each of the state board regions across NC. The OEC coordinates a review of local data paired with evidence-based practices to inform technical assistance/professional development needed across the state or within the state's TA/PD levels of support.

OEC staff also support and participate in stakeholder groups that may be hosted by entities other than the OEC (i.e., Council for Developmental Disabilities, Institute of Higher Education committees, Council for Exceptional Children, Council for Deaf/Hard of Hearing, Council on Administrators of Special Education, etc.) to discuss unmet needs of CWD. This type of participation provides valuable input for statewide improvement activities and often provides an additional platform to share data collected by the SPP/APR to consider meaningful improvement strategies across state, and community agencies and professional organizations.

Examples of timelines in which public input is solicited include: the drafting of the annual SPP/APR, upon receipt of the state's annual determination by the U.S. Office of Special Education Programs (OSEP), improvement activities initiated by the NCDPI Superintendent or NC State Board of Education, and in the Spring of each school year to determine the upcoming TA/PD and engagements hosted by the OEC in its annual engagement guide.

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 NCDPI-OEC maintains a website to publicly report the results of target setting, data analysis, improvement strategies and evaluation. During FY2022, the OEC engaged with the Rhonda Weiss Center [<https://www.weissta.org/>] to begin reviewing and revising its website to better organize reporting requirements, display data in parent-friendly formats, and ensure accessibility for the unique needs of stakeholders. Prior to submission, the external stakeholder group was provided an opportunity to review the results of FY2022 in comparison with FY2021 to begin discussions about improvement activities necessary for the upcoming school year.

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 SPP/APR is shared with the public (i.e., media, stakeholder groups, etc.) through the OEC website, a formal report provided to the NC State Board of Education, a legislative report provided to the NC General Assembly, and the OEC update provided to the CESEC. Each of these entities have listservs and public reporting sites that continue to make this information available to the public.

To access these data commensurate with the reporting requirements established above, the following pathway can be followed once visitors land on the NCDPI webpage: <https://www.dpi.nc.gov/> > Districts & Schools > Classroom Resources > Exceptional Children > Program and Fiscal Monitoring > Federal Reporting > SEA and LEA Annual Performance Reports

This is the direct link to the NC SPP/APR data: <https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports>

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.

OSEP notes that one or more of the Introduction attachment(s) included in the State's FFY 2021 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2021 SPP/APR

In response to the requirement that NC must report (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, please note the following:

1- TA Centers: Collaboration for Effective Educator Development, Accountability, and Reform (CEEDAR); Council of Chief State School Officers (CCSSO) – Advancing Inclusive Principal Leadership (AIPL); The Center for Appropriate Dispute Resolution in Special Education (CADRE); National Center for Pyramid Model Innovations (NCPMI); The Center for IDEA Early Childhood Data Systems (DaSY); Early Childhood Technical Assistance Center (ECTA); State Implementation and Scaling-Up of Evidence-Based Practices (SISEP); Center for IDEA Fiscal Reporting (CIFR); IRIS Center; IDEA Data Center (IDC); Innovation for Inclusion in Early Education (STEMIE); The Early Childhood Personnel Center (ECPC); National Center on DeafBlindness (NCDB); National Center on Accessible Educational Materials (AEM); National Deaf Center (NDC); National Instructional Materials Assistance Center (NIMAC); Bookshare; Technical Assistance for Excellence in Special Education (TAESE); AEM Center for Early Childhood; Rhonda Weiss Center for Accessible IDEA Data; National Center for Systemic Improvement (NCSI); National Technical Assistance Center on Transition (NTACT)

2- Actions Taken: As a result of NC's partnership with CEEDAR, four goals with action steps have been identified and are in progress. NC's goals include increasing capacity of Institutes of Higher Education (IHE)/SEA/LEAS to: offer high quality instruction for teacher and leader candidates; track and evaluate the impact of policy on the ability to attract, prepare, and sustain teachers/leaders; use multiple data sources to inform continuous improvement on personnel preparation systems to attract/prepare/retain teachers/leaders; and collaborate/implement plans that sustain and scale up reform efforts. To increase these efforts across systems, NC's partnership with CCSSO/AIPL has fostered a community of practice internal and external to NCDPI with a common goal of measuring inclusive principal leadership to develop a portfolio-based assessment for use in applications for administrator licensure. NC has also maintained a partnership with CADRE to engage in continuous self-assessment and improvement for strengthening its written procedures for dispute resolution. As a result of examining NC's preschool data in need of improvement, several partnerships have been established and strengthened. Consultation and collaboration with NCPMI, DaSY, ECTA, SISEP, CIFR, IRIS Center, IDC, and ECPC have supported the creation and organization of the Early Learning Exceptional Children section in the OEC. This shift in infrastructure is an effort to prioritize early

childhood outcomes to leverage existing internal/external partnerships across NCDPI, scale-up implementation of the Pyramid model, reduce the use of exclusionary discipline for young children, and improve transition activities with our Part C counterparts. Accessibility is a priority for educational materials and stakeholder engagement. To facilitate these efforts, partnerships with NCDB, AEM, NDC, NIMAC, Bookshare, TAESE, AEM Center for Early Childhood, and the Rhonda Weiss Center for Accessible IDEA Data have either been strengthened or newly initiated. Activities include: targeted technical assistance in ensuring AEM to students in a timely manner; increasing accessible media producers statewide; increasing the number of Bookshare accounts with technical assistance provided to educators statewide in providing and requesting accessible materials; and improving performance of educational interpreter to increase student access. Collaboration with the NDC and NTACT have focused NC's efforts on postsecondary transition activities for all children with disabilities and included a priority area of students who are Deaf. These collaborations (i.e., Engage for Change State Initiative) foster joint problem-solving with other state agencies (i.e., Vocational Rehabilitation, etc.) and have contributed to strategies that have been shared and implemented statewide. Lastly, the partnership with NCSI has enabled OEC leadership to engage in continuous improvement to align systems across NCDPI. Examples include partnering with the NCDPI Office of Early Learning (OEL) to scale-up efforts with the NC SiMR to improve outcomes in reading by incorporating strategies for CWD in general education activities (i.e., Individual Reading Plans, District/School Improvement Plans, etc.); initiating co-monitoring activities within OEC (i.e., program, fiscal, disproportionality, etc.); embedding LEA annual performance data as evaluation measures within district/school improvement planning; and engagement in self-assessment activities (i.e., matching improvement activities with fiscal investments, etc.); and partnering with NCDPI Finance and Business Services to advocate and propose for legislative consideration of a weighted statewide model for funding the unique needs of CWD.

For the FY2022 submission, no attachments were included in the SPP/APR. The NC FY2022 SPP/APR submission has been posted to the NCDPI-OEC website at this location: <https://www.dpi.nc.gov/> > Districts & Schools > Classroom Resources > Exceptional Children > Program and Fiscal Monitoring > Federal Reporting > SEA and LEA Annual Performance Reports

This is the direct link to the NC SPP/APR data: <https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/every-child-accountability-tracking-system-ecats/lea-annual-performance-reports>

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.

On May 14, 2021, OSEP issued findings in its monitoring report, which are not fully resolved. Longstanding noncompliance (from any unresolved finding identified by OSEP during and prior to FFY 2021) may be a factor in the Department's 2025 determinations. OSEP will work with the State to clarify what actions remain.

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
2019	72.51%

FFY	2017	2018	2019	2020	2021
Target >=	80.00%	80.00%	80.00%	77.02%	78.27%
Data	70.32%	69.06%	72.51%	83.92%	79.16%

Targets

FFY	2022	2023	2024	2025
Target >=	79.52%	80.77%	82.02%	83.27%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors’ Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

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)	9,439
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)	613
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)	59

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 due to dropping out (e)	2,353

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
9,439	12,464	79.16%	79.52%	75.73%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The data for this year is based on lag data collected for the 2021-2022 school year. NC did not meet the target for this indicator and demonstrated slippage. The root cause for slippage is hypothesized to be related to the transition back to in-person learning after the statewide closures from the initial onset of the COVID-19 pandemic during the 2019-2020 school year. During the 2021-2022 school year, NC's Governor established three options for the return to in-person learning. The option selected was a LEA decision based on local pandemic metrics and in consultation with local health departments. The learning progressions for all students were inconsistent as pandemic metrics improved intermittently across the state requiring frequent quarantines by class, school, and/or district and resulted in hybrid in-person and virtual learning all year. The requirement to return to in-person learning statewide did not occur by Governor's order until the 2022-2023 school year.

Graduation Conditions

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

All NC students must earn at least 22 credits in the Future-Ready Course of Study (FRC) to graduate from high school. The Future-Ready Course graduation requirements ensure that a student is prepared for life and whatever pathway they choose after they graduate, workplace, colleges/university or the military and is considered a regular high school diploma.

The Occupational Course of Study (OCS) is available for those students with disabilities who are specifically identified for the program and has adapted course requirements and the same credit requirements as FRC. Students that successfully complete the OCS graduate with a regular high school diploma.

Although the state requires a designated number of courses and credits for students to graduate high school (22 credits), local school districts and other public school units may require additional courses and credits to graduate.

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)

In the FFY21 APR clarification period, NC requested and OSEP approved the request to amend the 2019 baseline to 72.51%; however, the baseline was not corrected before the FFY2022 template was prefilled. NC has corrected this issue and the FFY22 APR now accurately reflects the approved baseline revision of 72.51% for 2019.

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	11.44%

FFY	2017	2018	2019	2020	2021
Target <=	3.50%	3.00%	3.00%	18.75%	17.07%
Data	3.95%	4.02%	3.73%	11.44%	14.99%

Targets

FFY	2022	2023	2024	2025
Target <=	16.62%	16.17%	15.72%	15.27%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

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)	9,439
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)	613
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)	59

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 due to dropping out (e)	2,353

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
2,353	12,464	14.99%	16.62%	18.88%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The data for this year is based on lag data collected for the 2021-2022 school year. NC did not meet the target for this indicator and demonstrated slippage. The root cause for slippage is hypothesized to be related to the transition back to in-person learning after the statewide closures from the initial onset of the COVID-19 pandemic during the 2019-2020 school year. During the 2021-2022 school year, NC’s Governor established three options for the return to in-person learning. The option selected was a LEA decision based on local pandemic metrics and in consultation with local health departments. The learning progressions for all students were inconsistent as pandemic metrics improved intermittently across the state requiring frequent quarantines by class, school, and/or district and resulted in hybrid in-person and virtual learning all year. The requirement to return to in-person learning statewide did not occur by Governor’s order until the 2022-2023 school year.

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

In NC, a “dropout” is an individual who: was enrolled in school at some time during the reporting year; was not enrolled on day 20 of the current year; has not graduated from high school or complete a state or district approved educational program; and does not meet any of the following reporting exclusions: (1) transferred to another public school district, private school registered with the NC Department of Non-Public Education, home school registered with the NC Department of Non-Public Education, or state/district approved educational program (not including programs at community colleges), (2) temporarily absent due to suspension or school approved illness, or (3) death. [Source: NC Dropout Data Collection and Reporting Procedures: Procedures for Reporting 2022-2023 Dropouts]

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

NO

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

Provide additional information about this indicator (optional)

In the FFY 2021 SPP/APR, NC updated the Baseline year from the FY2020 SPP/APR to 2019 based on the SY 2018-19 data for Indicator 2. However, in the FFY 2021 SPP/APR NC recorded the baseline year to be 2019 and the baseline data to be 17.07% yet recorded 3.73% as the data for 2019.

In reviewing historical findings, the FFY 2020 Indicated 2019 for the baseline year and with the baseline data as 18.75% yet recorded 3.73% as the data for 2019. The FFY 2019 indicates that 3.73% as the data for that reporting period.

In reviewing historical data, NC transposed the baseline data years and intended to revise the baseline year to 2020 rather than 2019. Therefore, for FFY 2022, NC corrected the baseline to the intended year of 2020 (11.44%) and maintained the original targets to reflect improvement over the revised baseline data.

2 - Prior FFY Required Actions

None

2 - OSEP Response

OSEP cannot accept the FFY 2025 target because the State’s end target does not reflect improvement over the State’s FFY 2020 baseline data as reported in the FFY 2022 SPP/APR. Because the State revised its FFY 2019 baseline to FFY 2020, the State must revise its FFY 2025 target to reflect improvement over the revised baseline data and indicate that stakeholders were provided an opportunity to comment on the targets.

2 - Required Actions

In the FFY 2023 SPP/APR, the State must provide the required targets through FFY 2025 that reflect improvement over the baseline, as required by the Measurement Table.

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	2018	99.67%
Reading	B	Grade 8	2018	98.79%
Reading	C	Grade HS	2018	96.80%
Math	A	Grade 4	2018	99.58%
Math	B	Grade 8	2018	98.55%
Math	C	Grade HS	2018	97.61%

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

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

FFY 2022 Data Disaggregation from EDFacts

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)	17,323	15,847	14,353
b. Children with IEPs in regular assessment with no accommodations (3)	6,988	4,796	4,402
c. Children with IEPs in regular assessment with accommodations (3)	8,954	9,377	8,252
d. Children with IEPs in alternate assessment against alternate standards	1,251	1,342	1,148

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)	17,324	15,848	11,015
b. Children with IEPs in regular assessment with no accommodations (3)	5,480	4,023	3,288
c. Children with IEPs in regular assessment with accommodations (3)	10,450	10,147	6,201
d. Children with IEPs in alternate assessment against alternate standards	1,252	1,343	987

(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	17,193	17,323	98.98%	95.00%	99.25%	Met target	No Slippage
B	Grade 8	15,515	15,847	97.20%	95.00%	97.90%	Met target	No Slippage
C	Grade HS	13,802	14,353	94.49%	95.00%	96.16%	Met 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	17,182	17,324	98.90%	95.00%	99.18%	Met target	No Slippage
B	Grade 8	15,513	15,848	97.05%	95.00%	97.89%	Met target	No Slippage
C	Grade HS	10,476	11,015	88.95%	95.00%	95.11%	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.

This is the direct link to the NC assessment data: <https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#EndofYearReports-2824>

NOTE: The link above displays the location of the two files for posting “state level proficiency data” and the “students with disabilities assessments with/without accommodations”. Data is displayed under the End-of-Year Report heading. Under 2022-2023 State Level Proficiency Data, students can be disaggregated by selecting “Student with Disabilities” in the “Student” dropdown in order to provide the participation of children with disabilities on statewide assessments with the same frequency and details for nondisabled students. This information is further disaggregated by proficiency – “College and Career Ready” and “Grade Level Proficiency”.

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

Response to actions required in FFY 2021 SPP/APR

Evidence of NC’s compliance with this requirement was provided via email to our OSEP contact on September 11, 2023. In preparation for the FFY22 submission, NC reorganized its webpage to combine multiple reporting requirements in one location.

To access these data commensurate with the reporting requirements established above, the following pathway can be followed once visitors land on the NCDPI webpage: <https://www.dpi.nc.gov/> > Districts & Schools > Classroom Resources > Exceptional Children > Program and Fiscal Monitoring > Federal Reporting > IDEA 618 Data Products: State Level Data Files > Assessment

This is the direct link to the NC assessment data: <https://data.ed.gov/dataset/idea-section-618-state-level-data-files-part-b-assessment/resources?resource=6ef97f41-26ab-4dc6-b638-c4fae2882f51>

3A - OSEP Response

The State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities, if any, participating in alternate assessments based on alternate academic achievement standards, at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3A - Required Actions

Within 90 days of the receipt of the State's 2024 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2022, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2023 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2023.

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	2018	13.41%
Reading	B	Grade 8	2018	7.94%
Reading	C	Grade HS	2018	9.85%
Math	A	Grade 4	2018	12.56%
Math	B	Grade 8	2018	5.92%
Math	C	Grade HS	2018	9.14%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	18.83%	21.54%	24.25%	26.95%
Reading	B >=	Grade 8	14.32%	17.51%	20.70%	23.89%
Reading	C >=	Grade HS	17.21%	20.89%	24.57%	28.25%
Math	A >=	Grade 4	17.42%	19.85%	22.28%	24.73%
Math	B >=	Grade 8	8.58%	9.91%	11.24%	12.57%
Math	C >=	Grade HS	13.86%	16.22%	18.58%	20.94%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

FFY 2022 Data Disaggregation from ED Facts

Data Source:

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			
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

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			
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

(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			18.42%	18.83%	Not Valid and Reliable	N/A	N/A
B	Grade 8			12.79%	14.32%	Not Valid and Reliable	N/A	N/A
C	Grade HS			16.13%	17.21%	Not Valid and Reliable	N/A	N/A

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			20.34%	17.42%	Not Valid and Reliable	N/A	N/A
B	Grade 8			9.12%	8.58%	Not Valid and Reliable	N/A	N/A
C	Grade HS			12.40%	13.86%	Not Valid and Reliable	N/A	N/A

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.

This is the direct link to the NC assessment data: <https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#EndofYearReports-2824>

NOTE: The link above displays the location of the two files for posting “state level proficiency data” and the “students with disabilities assessments with/without accommodations”. Data is displayed under the End-of-Year Report heading. Under 2022-2023 State Level Proficiency Data, students can be disaggregated by selecting “Student with Disabilities” in the “Student” dropdown in order to provide the participation of children with disabilities on statewide assessments with the same frequency and details for nondisabled students. This information is further disaggregated by proficiency – “College and Career Ready” and “Grade Level Proficiency”.

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

Response to actions required in FFY 2021 SPP/APR

Evidence of NC's compliance with this requirement was provided via email to our OSEP contact on September 11, 2023. In preparation for the FFY22 submission, NC reorganized its webpage to combine multiple reporting requirements in one location.

To access these data commensurate with the reporting requirements established above, the following pathway can be followed once visitors land on the NCDPI webpage: <https://www.dpi.nc.gov/> > Districts & Schools > Classroom Resources > Exceptional Children > Program and Fiscal Monitoring > Federal Reporting > IDEA 618 Data Products: State Level Data Files > Assessment

This is the direct link to the NC assessment data: <https://data.ed.gov/dataset/idea-section-618-state-level-data-files-part-b-assessment/resources?resource=6ef97f41-26ab-4dc6-b638-c4fae2882f51>

(Students with disabilities can be found by selecting Students with Disabilities from drop down list)

3B - OSEP Response

The State's 2022-23 IDEA Section 618 assessment proficiency data are being suppressed due to data quality concerns. The IDEA Section 618 data are the data source for Part B SPP/APR Indicator 3B. Therefore, the FFY 2022 data are also being suppressed under Indicator 3B. On May 10, 2024, the State requested a correction opportunity for these data. As noted in the 2023 IDEA Part B determination letter, OSEP is using the 2022-23 IDEA Section 618 Part B data on children with disabilities as of the due date (i.e., January 10 for the assessment data submission) to pre-populate Indicator 3 of the IDEA Part B SPP/APR in the Department's online SPP/APR submission tool. As further noted in the 2023 determination letter and in OSEP's approval of the State's request for a correction opportunity, OSEP is not using the 2022-23 Assessment data submitted during a correction opportunity for the FFY 2022 IDEA Part B SPP/APR or the 2024 IDEA Part B Results Matrix.

3B - Required Actions

The State did not provide valid and reliable data for FFY 2022. The State must provide valid and reliable data for FFY 2023 in the FFY 2023 SPP/APR.

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	2018	43.36%
Reading	B	Grade 8	2018	41.87%
Reading	C	Grade HS	2018	44.21%
Math	A	Grade 4	2018	6.28%
Math	B	Grade 8	2018	6.94%
Math	C	Grade HS	2018	37.11%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	45.50%	46.50%	47.50%	48.50%
Reading	B >=	Grade 8	43.00%	44.00%	45.00%	46.00%
Reading	C >=	Grade HS	45.25%	46.25%	47.25%	48.25%
Math	A >=	Grade 4	8.50%	9.50%	10.50%	11.50%
Math	B >=	Grade 8	8.00%	9.00%	10.00%	11.00%
Math	C >=	Grade HS	38.95%	39.93%	40.91%	41.89%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

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			
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient			

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			
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient			

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			39.97%	45.50%	Not Valid and Reliable	N/A	N/A
B	Grade 8			39.18%	43.00%	Not Valid and Reliable	N/A	N/A
C	Grade HS			35.44%	45.25%	Not Valid and Reliable	N/A	N/A

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			40.15%	8.50%	Not Valid and Reliable	N/A	N/A
B	Grade 8			32.15%	8.00%	Not Valid and Reliable	N/A	N/A
C	Grade HS			46.46%	38.95%	Not Valid and Reliable	N/A	N/A

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.

This is the direct link to the NC assessment data: <https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#EndofYearReports-2824>

NOTE: The link above displays the location of the two files for posting “state level proficiency data” and the “students with disabilities assessments with/without accommodations”. Data is displayed under the End-of-Year Report heading. Under 2022-2023 State Level Proficiency Data, students can be disaggregated by selecting “Student with Disabilities” in the “Student” dropdown in order to provide the participation of children with disabilities on statewide assessments with the same frequency and details for nondisabled students. This information is further disaggregated by proficiency – “College and Career Ready” and “Grade Level Proficiency”.

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

Response to actions required in FFY 2021 SPP/APR

Evidence of NC’s compliance with this requirement was provided via email to our OSEP contact on September 11, 2023. In preparation for the FFY22 submission, NC reorganized its webpage to combine multiple reporting requirements in one location.

To access these data commensurate with the reporting requirements established above, the following pathway can be followed once visitors land on the NCDPI webpage: <https://www.dpi.nc.gov/> > Districts & Schools > Classroom Resources > Exceptional Children > Program and Fiscal Monitoring > Federal Reporting > IDEA 618 Data Products: State Level Data Files > Assessment

This is the direct link to the NC assessment data: <https://data.ed.gov/dataset/idea-section-618-state-level-data-files-part-b-assessment/resources?resource=6ef97f41-26ab-4dc6-b638-c4fae2882f51>

3C - OSEP Response

The State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities, the performance results of children with disabilities on alternate assessments based on alternate academic achievement standards, at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

The State’s 2022-23 IDEA Section 618 data on assessment proficiency are being suppressed due to data quality concerns. The IDEA Section 618 data are the data source for Part B SPP/APR Indicator 3C. Therefore, the State’s FFY 2022 data also are being suppressed under Indicator 3C. On May 10, 2024, the State requested a correction opportunity for these data. As noted in the 2023 IDEA Part B determination letter, OSEP is using the 2022-23

IDEA Section 618 Part B data on children with disabilities as of the due date (i.e., January 10 for the assessment data submission) to pre-populate Indicator 3 of the IDEA Part B SPP/APR in the Department's online SPP/APR submission tool. As further noted in the 2023 determination letter and in OSEP's approval of the State's request for a correction opportunity, OSEP is not using the 2022-23 Assessment data submitted during a correction opportunity for the FFY 2022 IDEA Part B SPP/APR or the 2024 IDEA Part B Results Matrix.

3C - Required Actions

Within 90 days of the receipt of the State's 2024 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2022, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2023 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2023.

The State did not provide valid and reliable data for FFY 2022. The State must provide valid and reliable data for FFY 2023 in the FFY 2023 SPP/APR.

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	2018	30.49
Reading	B	Grade 8	2018	35.58
Reading	C	Grade HS	2018	40.94
Math	A	Grade 4	2018	11.03
Math	B	Grade 8	2018	10.44
Math	C	Grade HS	2018	11.85

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A <=	Grade 4	24.39	21.34	18.29	15.24
Reading	B <=	Grade 8	28.46	24.90	21.34	17.78
Reading	C <=	Grade HS	32.76	28.76	24.58	20.49
Math	A <=	Grade 4	8.83	7.73	6.63	5.53
Math	B <=	Grade 8	8.36	7.32	6.28	5.24
Math	C <=	Grade HS	9.47	8.28	7.09	5.90

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

FFY 2022 Data Disaggregation from ED Facts

Data Source:

SY 2022-23 Assessment Data Groups - Reading (ED Facts 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			
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment			
c. All students in regular assessment with no accommodations scored at or above proficient against grade level			
d. All students in regular assessment with accommodations scored at or above proficient against grade level			
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

Data Source:

SY 2022-23 Assessment Data Groups - Math (ED Facts 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			
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment			
c. All students in regular assessment with no accommodations scored at or above proficient against grade level			
d. All students in regular assessment with accommodations scored at or above proficient against grade level			
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

(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			32.99	24.39	Not Valid and Reliable	N/A	N/A
B	Grade 8			37.93	28.46	Not Valid and Reliable	N/A	N/A
C	Grade HS			43.48	32.76	Not Valid and Reliable	N/A	N/A

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			29.60	8.83	Not Valid and Reliable	N/A	N/A
B	Grade 8			33.16	8.36	Not Valid and Reliable	N/A	N/A
C	Grade HS			52.17	9.47	Not Valid and Reliable	N/A	N/A

Provide additional information about this indicator (optional)

This is the direct link to the NC assessment data: <https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#EndofYearReports-2824>

NOTE: Data is displayed under the End-of-Year Report heading. Under 2022-2023 State Level Proficiency Data, students can be disaggregated by selecting "Student with Disabilities" in the "Student" dropdown in order to provide the participation of children with disabilities on statewide assessments with the same frequency and details for nondisabled students. This information is further disaggregated by proficiency – "College and Career Ready" and "Grade Level Proficiency".

3D - Prior FFY Required Actions

None

3D - OSEP Response

The State's 2022-23 IDEA Section 618 data on assessment proficiency are being suppressed due to data quality concerns. The IDEA Section 618 data are the data source for Part B SPP/APR Indicator 3D. Therefore, the FFY 2022 data also are being suppressed under Indicator 3D. On May 10, 2024, the State requested a correction opportunity for these data. As noted in the 2023 IDEA Part B determination letter, OSEP is using the 2022-23 IDEA Section 618 Part B data on children with disabilities as of the due date (i.e., January 10 for the assessment data submission) to pre-populate Indicator 3 of the IDEA Part B SPP/APR in the Department's online SPP/APR submission tool. As further noted in the 2023 determination letter and in OSEP's approval of the State's request for a correction opportunity, OSEP is not using the 2022-23 Assessment data submitted during a correction opportunity for the FFY 2022 IDEA Part B SPP/APR or the 2024 IDEA Part B Results Matrix.

3D - Required Actions

The State did not provide valid and reliable data for FFY 2022. The State must provide valid and reliable data for FFY 2023 in the FFY 2023 SPP/APR.

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
2020	52.17%

FFY	2017	2018	2019	2020	2021
Target <=	2.50%	2.50%	2.00%	52.17%	47.17%
Data	0.00%	0.00%	0.64%	52.17%	100.00%

Targets

FFY	2022	2023	2024	2025
Target <=	42.17%	37.17%	32.17%	27.17%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

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.

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Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
7	81	100.00%	42.17%	8.64%	Met target	No Slippage

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

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

State's definition of "significant discrepancy" and methodology

NC met with its stakeholders during FFY2020 to review the State's definition of "significant discrepancy" and methodology. NC defines "significant discrepancy" as suspensions/expulsions for students with IEPs that occur greater than 2.5 times the rate of suspensions/expulsions for students without disabilities. NC has also chosen to establish a minimum n size = 5 CWD.

Methodology:

- 1- NC reviews discipline data for all PSUs statewide. The following steps are taken if PSUs have children with suspensions greater than 10 days.
- 2- If a PSU has a n size less than 5 CWD, the PSU is excluded. Only the total number of PSUs meeting the minimum n/cell-size are reported in the APR data table.
- 3- To identify those PSUs, NC calculates the percentage of CWD suspended/expelled > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD suspended/expelled > 10 days / CWD in Child Count = Percentage of CWD suspended/expelled]
- 4- Then, NC calculates the percentage of non-CWD suspended/expelled > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: ALL students suspended/expelled > 10 days / non-CWD = Percentage of non-CWD suspended/expelled]
- 5- The numerator equals the percentage of CWD suspended/expelled. The denominator equals the percentage of non-CWD suspended/expelled. The numerator is divided by the denominator for each PSU to identify the PSU RATE RATIO. [Formula: CWD suspended/expelled / non-CWD suspended/expelled = PSU rate ratio for suspensions/expulsions]
- 6- Once the PSU RATE RATIO has been calculated for each PSU with the minimum cell size of 5, NC determines whether PSUs are demonstrating SIGNIFICANT DISCREPANCY.
- 7- NC reviews the PSU RATE RATIO for all PSUs with the minimum cell size of 5. If the PSU RATE RATIO for CWD is greater than 2.5 times the rate for non-CWD for a PSU, that PSU is determined to have SIGNIFICANT DISCREPANCY. [Formula: PSU Rate Ratio CWD > 2.5 * the PSU Rate Ratio for non-CWD = PSU SIGNIFICANT DISCREPANCY]
- 8- The total number of PSUs with SIGNIFICANT DISCREPANCY is identified from the list of PSUs calculated in Step 6.

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.

Once a PSU was determined to have a significant discrepancy, the SEA initiated program monitoring of its disciplinary practices and procedures. Program monitoring included a review of the disciplinary change in placement, manifestation determination review, prior written notice for the removal, and the accompanying IEP for a student sample of CWD suspended greater than 10 out-of-school suspensions in the PSU during FFY2021 and compared to the regulatory requirements to determine if the PSU had a finding of noncompliance in its policy, practice, and/or procedure. If findings of noncompliance were identified during program monitoring, corrective action was issued, and System/Child Specific activities initiated to affirm noncompliance was not ongoing after correction occurred.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

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

4A - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State’s LEAs are being examined for significant discrepancy under the State’s chosen methodology.

Response to actions required in FFY 2021 SPP/APR

NC met with its stakeholders during FFY2020 to review the State’s definition of “significant discrepancy” and methodology. NC define “significant discrepancy” as suspensions/expulsions for students with IEPs that occur greater than 2.5 times the rate of suspensions/expulsions for students without disabilities. NC has also chosen to establish a minimum n size = 5 CWD.

Methodology:

- 1- NC reviews discipline data for all PSUs statewide. The following steps are taken if PSUs have children with suspensions greater than 10 days.
- 2- If a PSU has a n size less than 5 CWD, the PSU is excluded. Only the total number of PSUs meeting the minimum n/cell-size are reported in the APR data table.
- 3- To identify those PSUs, NC calculates the percentage of CWD suspended/expelled > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD suspended/expelled > 10 days / CWD in Child Count = Percentage of CWD suspended/expelled]
- 4- Then, NC calculates the percentage of non-CWD suspended/expelled > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD students suspended/expelled > 10 days / non-CWD = Percentage of non-CWD suspended/expelled]
- 5- The numerator equals the percentage of CWD suspended/expelled. The denominator equals the percentage of non-CWD suspended/expelled. The numerator is divided by the denominator for each PSU to identify the PSU RATE RATIO. [Formula: CWD suspended/expelled / non-CWD suspended/expelled = PSU rate ratio for suspensions/expulsions]
- 6- Once the PSU RATE RATIO has been calculated for each PSU with the minimum cell size of 5, NC determines whether PSUs are demonstrating SIGNIFICANT DISCREPANCY.
- 7- NC reviews the PSU RATE RATIO for all PSUs with the minimum cell size of 5. If the PSU RATE RATIO for CWD is greater than 2.5 times the rate for non-CWD for a PSU, that PSU is determined to have SIGNIFICANT DISCREPANCY. [Formula: PSU Rate Ratio CWD > 2.5 * the PSU Rate Ratio for non-CWD = PSU SIGNIFICANT DISCREPANCY]
- 8- The total number of PSUs with SIGNIFICANT DISCREPANCY is identified from the list of PSUs calculated in Step 6.

4A - OSEP Response

4A - Required Actions

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
2020	17.86%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	17.86%	0.00%

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.

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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
55	1	72	0.00%	0%	Not Valid and Reliable	Did not meet target	Slippage

Provide reasons for slippage, if not applicable

NC had one PSU with findings during the student record review indicative of noncompliant systemic and child specific practices regarding suspension and expulsion. Slippage occurred due to the findings of noncompliant systemic and child specific practices regarding suspension and expulsion in one PSU.

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

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

NC met with its stakeholders during FFY2020 to review the State's definition of "significant discrepancy" and methodology. NC define "significant discrepancy" as suspensions/expulsions for students with IEPs that occur greater than 2.5 times the rate of suspensions/expulsions for students without disabilities in each RACIAL/ETHNIC group. NC has also chosen to establish a minimum n size = 5 CWD.

Methodology:

- 1- NC reviews discipline data for all PSUs statewide. The following steps are taken if PSUs have children with suspensions greater than 10 days for a RACIAL/ETHNIC group.
- 2- If a PSU has a n size less than 5 CWD for a RACIAL/ETHNIC group, the PSU is excluded from the calculation for that group. Only the total number of PSUs meeting the minimum n/cell-size for a RACIAL/ETHNIC group are reported in the APR data table.
- 3- To identify those PSUs, NC calculates the percentage of CWD suspended/expelled for each RACIAL/ETHNIC group > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD suspended/expelled for each RACIAL/ETHNIC group > 10 days / CWD for each RACIAL/ETHNIC group in Child Count = Percentage of CWD suspended/expelled for each RACIAL/ETHNIC group]
- 4- Then, NC calculates the percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD students suspended/expelled for each RACIAL/ETHNIC group > 10 days / non-CWD = Percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group]
- 5- The numerator equals the percentage of CWD suspended/expelled for each RACIAL/ETHNIC group. The denominator equals the percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group. The numerator is divided by the denominator for each PSU to identify the PSU RATE RATIO for each RACIAL/ETHNIC group. [Formula: CWD suspended/expelled for each RACIAL/ETHNIC group / non-CWD suspended/expelled for each

RACIAL/ETHNIC group = PSU rate ratio for suspensions/expulsions for each RACIAL/ETHNIC group]

6- Once the PSU RATE RATIO for each RACIAL/ETHNIC group has been calculated for each PSU with the minimum cell size of 5, NC determines whether PSUs are demonstrating SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group.

7- NC reviews the PSU RATE RATIO for each RACIAL/ETHNIC group for all PSUs with the minimum cell size of 5. If the PSU RATE RATIO for CWD for each RACIAL/ETHNIC group is greater than 2.5 times the rate for non-CWD for each RACIAL/ETHNIC group for a PSU, that PSU is determined to have SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group. [Formula: PSU Rate Ratio CWD for each RACIAL/ETHNIC group > 2.5 * the PSU Rate Ratio for non-CWD for each RACIAL/ETHNIC group = PSU SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group]

8- The total number of PSUs with SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group is calculated from the list of PSUs identified in Step 6.

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.

Once a PSU was determined to have a significant discrepancy for a RACIAL/ETHNIC group, the SEA initiated program monitoring of its disciplinary policies, practices, and procedures. Program monitoring included a review of the disciplinary change in placement, manifestation determination review, prior written notice for the removal, and the accompanying IEP for a student sample of CWD suspended greater than 10 out-of-school suspensions commensurate with the discrepant RACIAL/ETHNIC groups in the PSU during FFY2021 and compared to the regulatory requirements to determine if the PSU had a finding of noncompliance in its policy, practice, and/or procedure. If findings of noncompliance were identified during program monitoring, corrective action was issued, and System and Child Specific Noncompliance activities initiated to affirm noncompliance was not ongoing after correction occurred.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

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

4B - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State’s LEAs are being examined for significant discrepancy under the State’s chosen methodology.

Response to actions required in FFY 2021 SPP/APR

NC met with its stakeholders during FFY2020 to review the State’s definition of “significant discrepancy” and methodology. NC define “significant discrepancy” as suspensions/expulsions for students with IEPs that occur greater than 2.5 times the rate of suspensions/expulsions for students without disabilities in each RACIAL/ETHNIC group. NC has also chosen to establish a minimum n size = 5 CWD.

Methodology:

- 1- NC reviews discipline data for all PSUs statewide. The following steps are taken if PSUs have children with suspensions greater than 10 days for a RACIAL/ETHNIC group.
- 2- If a PSU has a n size less than 5 CWD for a RACIAL/ETHNIC group, the PSU is excluded from the calculation for that group. Only the total number of PSUs meeting the minimum n/cell-size for a RACIAL/ETHNIC group are reported in the APR data table.
- 3- To identify those PSUs, NC calculates the percentage of CWD suspended/expelled for each RACIAL/ETHNIC group > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD suspended/expelled for each RACIAL/ETHNIC group > 10 days / CWD for each RACIAL/ETHNIC group in Child Count = Percentage of CWD suspended/expelled for each RACIAL/ETHNIC group]
- 4- Then, NC calculates the percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD students suspended/expelled for each RACIAL/ETHNIC group > 10 days / non-CWD = Percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group]
- 5- The numerator equals the percentage of CWD suspended/expelled for each RACIAL/ETHNIC group. The denominator equals the percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group. The numerator is divided by the denominator for each PSU to identify the PSU RATE RATIO for each RACIAL/ETHNIC group. [Formula: CWD suspended/expelled for each RACIAL/ETHNIC group / non-CWD suspended/expelled for each RACIAL/ETHNIC group = PSU rate ratio for suspensions/expulsions for each RACIAL/ETHNIC group]
- 6- Once the PSU RATE RATIO for each RACIAL/ETHNIC group has been calculated for each PSU with the minimum cell size of 5, NC determines whether PSUs are demonstrating SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group.

7- NC reviews the PSU RATE RATIO for each RACIAL/ETHNIC group for all PSUs with the minimum cell size of 5. If the PSU RATE RATIO for CWD for each RACIAL/ETHNIC group is greater than 2.5 times the rate for non-CWD for each RACIAL/ETHNIC group for a PSU, that PSU is determined to have SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group. [Formula: PSU Rate Ratio CWD for each RACIAL/ETHNIC group > 2.5 * the PSU Rate Ratio for non-CWD for each RACIAL/ETHNIC group = PSU SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group]

8- The total number of PSUs with SIGNIFICANT DISCREPANCY for each RACIAL/ETHNIC group is calculated from the list of PSUs identified in Step 6.

4B - OSEP Response

OSEP cannot determine whether the data are valid and reliable. The State reported "NC calculates the percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group > 10 days for each PSU with the minimum cell size of 5 or greater. [Formula: CWD students suspended/expelled for each RACIAL/ETHNIC group > 10 days / non-CWD = Percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group] 5- The numerator equals the percentage of CWD suspended/expelled for each RACIAL/ETHNIC group. The denominator equals the percentage of non-CWD suspended/expelled for each RACIAL/ETHNIC group." It is unclear whether the State is using different State thresholds for different racial and ethnic groups. It is the Department's longstanding position that States may not set different thresholds for different racial and ethnic groups because doing so would be unlikely to meet constitutional scrutiny. The State's thresholds developed for each category of analysis must be the same for each racial and ethnic group. Therefore, OSEP could not determine whether the State met its target.

4B- Required Actions

In the FFY 2023 SPP/APR, the State must provide data for this indicator for FFY 2023 using a methodology that does not result in different thresholds for different racial and ethnic groups.

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 >=	65.20%	65.00%	65.50%	68.70%	68.75%
A	68.70%	Data	66.85%	67.51%	67.81%	68.70%	69.63%
B	2020	Target <=	15.10%	15.00%	14.50%	12.03%	12.00%
B	12.03%	Data	14.02%	13.94%	13.27%	12.03%	11.55%
C	2020	Target <=	2.00%	2.00%	2.00%	1.68%	1.63%
C	1.68%	Data	1.81%	1.78%	1.73%	1.68%	1.43%

Targets

FFY	2022	2023	2024	2025
Target A >=	68.80%	68.85%	68.90%	68.95%
Target B <=	12.00%	11.50%	11.50%	11.25%
Target C <=	1.58%	1.53%	1.48%	1.43%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	189,710

Source	Date	Description	Data
Data Groups (EDFacts file spec FS002; Data group 74)			
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	133,319
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	21,322
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	1,550
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	171
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	644

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	133,319	189,710	69.63%	68.80%	70.28%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	21,322	189,710	11.55%	12.00%	11.24%	Met 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]	2,365	189,710	1.43%	1.58%	1.25%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: 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 >=	37.60%	38.00%	38.00%	29.64%	29.60%
A	Data	34.93%	34.64%	30.59%	29.64%	29.61%
B	Target <=	19.70%	19.40%	19.40%	26.84%	26.25%
B	Data	21.91%	21.80%	23.74%	26.84%	29.19%
C	Target <=				2.42%	2.40%
C	Data				2.42%	1.93%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

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	29.64%
B	2020	26.84%
C	2020	2.42%

Inclusive Targets – 6A, 6B

FFY	2022	2023	2024	2025
Target A >=	29.70%	29.80%	29.90%	30.00%
Target B <=	26.00%	25.75%	25.50%	25.25%

Inclusive Targets – 6C

FFY	2022	2023	2024	2025
Target C <=	2.35%	2.30%	2.25%	2.20%

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	4,353	6,349	1,898	12,600
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	850	2,040	721	3,611
b1. Number of children attending separate special education class	1,483	1,631	384	3,498
b2. Number of children attending separate school	56	92	39	187
b3. Number of children attending residential facility	0	2	0	2
c1. Number of children receiving special education and related services in the home	74	80	24	178

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 - 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	3,611	12,600	29.61%	29.70%	28.66%	Did not meet target	No Slippage
B. Separate special education class, separate school or residential facility	3,687	12,600	29.19%	26.00%	29.26%	Did not meet target	No Slippage
C. Home	178	12,600	1.93%	2.35%	1.41%	Met target	No Slippage

Provide additional information about this indicator (optional)

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	2013	Target >=	82.50%	82.55%	83.00%	84.04%	84.28%
A1	82.34%	Data	84.82%	84.92%	84.00%	84.77%	84.38%

A2	2013	Target >=	35.20%	35.40%	35.50%	38.16%	38.56%
A2	35.08%	Data	37.90%	38.72%	37.76%	38.02%	38.10%
B1	2013	Target >=	82.52%	82.60%	83.00%	83.67%	84.07%
B1	82.52%	Data	82.89%	83.40%	83.27%	83.64%	83.89%
B2	2013	Target >=	34.46%	34.50%	35.00%	38.50%	38.90%
B2	34.24%	Data	37.40%	36.95%	38.10%	37.93%	38.13%
C1	2013	Target >=	82.00%	82.20%	83.00%	82.51%	82.91%
C1	81.81%	Data	83.55%	84.02%	82.11%	82.99%	83.17%
C2	2013	Target >=	52.17%	52.20%	53.00%	54.35%	54.75%
C2	52.05%	Data	54.12%	53.95%	53.95%	53.30%	52.67%

Targets

FFY	2022	2023	2024	2025
Target A1 >=	84.48%	84.68%	84.88%	85.08%
Target A2 >=	38.96%	39.36%	39.76%	40.16%
Target B1 >=	84.47%	84.87%	85.27%	85.67%
Target B2 >=	39.30%	39.70%	40.10%	40.50%
Target C1 >=	83.31%	83.71%	84.11%	84.51%
Target C2 >=	55.11%	55.55%	55.95%	56.35%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

FFY 2022 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

6,422

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	75	1.17%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	792	12.33%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,022	47.06%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,003	31.19%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	530	8.25%

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	5,025	5,892	84.38%	84.48%	85.29%	Met target	No Slippage

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>							
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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,533	6,422	38.10%	38.96%	39.44%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	71	1.11%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	837	13.03%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,900	45.16%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,155	33.56%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	459	7.15%

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. <i>Calculation: (c+d)/(a+b+c+d)</i>	5,055	5,963	83.89%	84.47%	84.77%	Met 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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,614	6,422	38.13%	39.30%	40.70%	Met target	No 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	76	1.18%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	832	12.96%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,051	31.94%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,423	37.73%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,040	16.19%

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. <i>Calculation: (c+d)/(a+b+c+d)</i>	4,474	5,382	83.17%	83.31%	83.13%	Did not meet target	No 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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	3,463	6,422	52.67%	55.11%	53.92%	Did not meet target	No Slippage

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.

Local Education Agencies (LEAs) used the Child Outcomes Summary Form (COSF) to collect "entry" and "exit" data regarding outcomes for preschool children aged 3 through 5 with IEPs. LEAs then submitted their data using the Every Child Accountability and Tracking System (ECATS), the State's new accountability/reporting system that includes a required module for reporting for students with disabilities. All data was populated to the ECO COSF form to further validate the data and allow follow-up, if needed, with LEAs.

Provide additional information about this indicator (optional)

For the current APR, data submissions were submitted via Every Child Accountability and Tracking System (ECATS), the State's accountability/reporting system. To mitigate the anomalies experienced last year and the impact of COVID-19, NCDPI put corrective measures in place as well as a State-provided Indicator 7 spreadsheet as an alternative data collection tool. Helpdesk accessibility, instructions on running the report and correcting errors as well as training videos were provided to support PSUs in this process. Additionally, the EC Division designated monthly, virtual office hours to provide additional support to PSUs with Federal Reporting questions around Indicator 7.

North Carolina has measures in place for improving outcomes for all children. Extensive training to understand the outcomes is ongoing. Training is regularly provided throughout the year, formalized and through self-paced modules. One of the most widely used tools by LEAs to evaluate student progress is the Teaching Strategies Gold, a system for assessing children from birth through kindergarten. Our cross-sector partners at the Department of Health and Human Services (DHHS) Division of Child Development and Early Education (DCDEE), along with the Office of Early Learning at the NC Department of Public Instruction have been in collaboration to coordinate efforts to bring Teaching Strategies Gold to all preschools classrooms. To further support preschool children with disabilities and their families, NCDPI also partners with the North Carolina Early Learning Network (ELN), providing early learning communities with professional development and technical assistance based on guiding principles and values, aligned with and reported in the State Performance Plan/Annual Performance Report. ELN promotes the development and successful participation of North Carolina's preschool-age exceptional children in a broad range of activities and contexts. Preschool coordinators have access to multi-tiered levels of support and facilitated cross-sector professional development. Program support focuses on expanding skills and increased family participation to improve the performance and success of preschool children in North Carolina. Additionally, NC is receiving TA support from CASEL and ECTA/DaSy Centers. CASEL is providing targeted TA to NC to align MTSS efforts with school wide SEL efforts. NC is also currently in a cross-state cohort focusing on improving local Child Outcomes data use. Through the TA support, NC is identifying opportunities for improving communication and support between the state and local preschool programs to facilitate local Child Outcomes data use. The TA from ECTA/DaSy Centers will align with the NCPMI intensive TA since NC PPM practices affect and support positive child outcomes. Also, aligning communication about NC PPM implementation with the communication and support focused on improving Child Outcomes data supports NC's focus on PPM implementation and scale-up efforts as a strategy for supporting Child Outcomes for children enrolled in preschool programs.

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

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

Historical Data

Baseline Year	Baseline Data
2020	45.17%

FFY	2017	2018	2019	2020	2021
Target >=	50.00%	50.00%	50.00%	45.17%	49.36%
Data	44.24%	43.98%	49.36%	45.17%	48.48%

Targets

FFY	2022	2023	2024	2025
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Target >=	50.00%	51.00%	52.00%	53.00%
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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
1,519	3,034	48.48%	50.00%	50.07%	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 report on school's efforts to facilitate parental involvement, the NCDPI uses a modified version of a 25-item survey questionnaire with a rating scale, the Schools' Efforts to Partner with Parents Scale (SEPPS), developed and validated previously by the National Center for Special Education Accountability (NCSEAM). Administered by the NCDPI, two versions of the scale are used to capture the experiences of parents with children at specific and uniquely different time points in the delivery of services. One questionnaire is for parents of preschool children and the other is for parents of children in kindergarten through 12th grade. For parents of children ages 5-21, NCDPI uses a modified version of the NCSEAM 25-item Part B Survey Form 2.0 that addresses family involvement. For parents of preschool children, NCDPI uses a modified version of the NCSEAM 25-item Preschool 619 Survey. The modified versions of each survey consist of 17 items taken from the original instruments and are consistent with the instruments used by NCDPI since the 2019-2020 academic year. Given the modified version of both surveys and efforts taken to ensure that each response item has a 1:1 correspondence, NC can combine preschool and school age survey for aggregate analysis.

The number of parents to whom the surveys were distributed.

80,150

Percentage of respondent parents

3.79%

Response Rate

FFY	2021	2022
Response Rate	4.39%	3.79%

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

NC utilized the ECTA Response Rate and Representativeness Calculator to compute response rates and to determine if the surveys received are representative of the target population. A statistical formula is used to determine if the overall distribution of survey responses across subgroups is similar to the distribution of those subgroups in the population. If the calculator finds the distribution of subgroups from the survey is significantly different than the distribution of those subgroups in the population, a follow-up analysis is completed to compare the population and survey percentages for each subgroup to determine if the two percentages are meaningfully different within each subgroup (i.e., % of surveys received vs. % of families in the target population). The values are entered by subgroup and calculated to determine the overall significance of the table. If the overall calculation is statistically significant, an additional calculation is completed to determine the difference between the two percentages within each subgroup and highlights significant differences.

The calculator utilizes a Chi-square test to evaluate the statistical difference of the overall table. If this overall test shows no significant difference, the data are representative of the population. If the overall test shows a significant difference, a z test of proportional difference is applied to determine whether the difference between the two percentages is statistically significant, based upon the 90% confidence intervals for each indicator (significance level = 0.10).

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.

NC analyzed its survey responses for representativeness using the following demographics: Race/Ethnicity, Hispanic origin, and disability category. In the survey sample, NC identified 80,150 families for the overall target population. The number of families responding to the survey was 3,034. Given the small response rate of 3.79%, NC's survey data was not representative of the Race/Ethnicity of children receiving special education services overall. Of the families in the target population, responses to the survey were received from the following Race/Ethnicity groups: African American or Black, American Indian or Alaska Native, Asian, Native Hawaiian or Pacific Islander, White, More than One Race, and Hispanic. When compared among Race/Ethnicity subgroups from the number of families responding to the survey, response data were considered representative for American Indian or Alaskan Native, and Native Hawaiian or Pacific Islander. However, given the small overall response rate and the small n-size for each of these subgroups, NC uses caution when analyzing its data. The remaining Race/Ethnicity subgroups and Hispanic subgroup did not have response rates representative of CWD in NC.

As directed in the measurement table, NC selected "Disability Category" as its additional demographic to be analyzed when determining whether its overall survey responses are representative of children receiving special education services. Survey responses were received from families of children with the following disability categories: Specific Learning Disability (LD), Other Health Impaired (OHI), Autism (AU), Speech/Language Impairment (SI), Intellectually Disabled (ID), Developmentally Delayed (DD), Emotional Disturbance (ED), Multiple Disabilities (MU), Hearing Impairment (HI), Traumatic

Brain Injury (TB), Visual Impairment (VI), Orthopedically Impaired (OI), Deaf/Hard of Hearing (DF), and Deaf/Blind (DB). Overall, survey responses analyzed by disability categories were not representative of children receiving special education services in NC. When also compared among disability category subgroups, none of the categories yielded survey data that was representative of CWD in NC. Further, DB, DF, OI, VI, TB, HI, and ED subgroups had extremely low response rates (<100) when compared across all subgroups.

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

Given the low response rate overall and under-representation of responses from Race/Ethnicity, Hispanic, and disability subgroups, NC will be transitioning away from a sampling plan to a census model for reporting in the FFY2024 APR. This decision was made in consultation with OEC stakeholders over the 2022-2023 and 2023-2024 school years. In preparing for the transition, OEC has partnered with ECAC to host parent information sessions across the state in the Spring of 2024. This meeting will also provide an opportunity to notify parents of the importance of the survey with the goal of increasing participation during the last year of the sampling plan (FFY2023) while also providing notification of NC's census plan for increasing survey responses statewide the following year (FFY2024). NC is also exploring options for hosting parent information sessions for the LEAs in the FFY2023 sampling plan to increase participation and representativeness. This transition timeline also provides the opportunity for technical assistance to LEAs statewide prior to data collections to ensure survey opportunities are consistently made available to all subgroups.

In the interim, the survey has transitioned to a QR code accessible through any electronic device. This also expands the opportunity to translate the survey into languages beyond Spanish. Survey invitations include an opportunity to request a paper copy if accessing the survey electronically is a barrier. Lastly, the OEC will leverage its Parent Liaison, parent listserv, ECAC, and other communication loops to increase participation.

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

Given the low response rate overall and under-representation of responses from Race/Ethnicity, Hispanic, and disability subgroups, NC will be transitioning away from a sampling plan to a census model for reporting in the FFY2024 APR. This decision was made in consultation with OEC stakeholders over the 2022-2023 and 2023-2024 school years. In preparing for the transition, OEC has partnered with ECAC to host parent information sessions across the state in the Spring of 2024. This meeting will also provide an opportunity to notify parents of the importance of the survey with the goal of increasing participation during the last year of the sampling plan (FFY2023) while also providing notification of NC's census plan for increasing survey responses statewide the following year (FFY2024). NC is also exploring options for hosting parent information sessions for the LEAs in the FFY2023 sampling plan to increase participation and representativeness. This transition timeline also provides the opportunity for technical assistance to LEAs statewide prior to data collections to ensure survey opportunities are consistently made available to all subgroups.

The new census plan for increasing the response rate from groups that are underrepresented (African-American/Black, Asian, White, More than One Race, Hispanic, LD, OHI, AU, SI, ID, DD, ED, MU, HI, TB, VI, OI, DR, DB) includes the strategy of providing the survey immediately following the annual IEP Team meeting for each student with a disabilities in all public school units across the state. The QR code to the electronic survey can be scanned upon departure, duplicated for distribution, displayed in meeting spaces, electronically displayed if alternate means of meeting participation are used, completed onsite if there are barriers to technology and translated into language beyond Spanish and more reflective of those spoken across North Carolina. Further, rather than a select number of PSUs sampled annually, parents will be provided the opportunity annually statewide to provide feedback for this indicator.

In the interim, the survey has transitioned to a QR code accessible through any electronic device. This also expands the opportunity to translate the survey into languages beyond Spanish. Survey invitations include an opportunity to request a paper copy if accessing the survey electronically is a barrier. Lastly, the OEC will leverage its Parent Liaison, parent listserv, ECAC, and other communication loops to increase participation.

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.

In the survey sample, NC identified 80,150 families for the overall target population. The number of families responding to the survey was 3,034. Given the small response rate of 3.79%, NC's survey data was not representative of the Race/Ethnicity of children receiving special education services or disability subgroups overall. NC hypothesizes that nonresponse bias could be attributed to the time of year the survey was conducted (Spring/Summer), procedures used to distribute surveys, and the method in which survey data is collected. Some survey participants reported a challenge with accessing the electronic survey link. NC recognizes that participants who experienced difficulty with accessing the link may not persist beyond the first try which may have contributed to the low response rate.

Because nonresponse bias may be attributed to the length of the survey, poor timing of survey distribution, lack of incentives to PSUs for distributing surveys, limited accessibility, or privacy concerns, NC will be evaluating the following strategies for implementation with its transition to the census model. NC's current survey has 25 questions. This is likely too many questions and may be causing participants to exit the survey prior to completion yielding a nonresponse. As noted in the previous paragraph, the time of year the survey was conducted (Spring/Summer) may have contributed to nonresponse bias; therefore, the strategy of conducting the survey throughout the school year after the annual IEP Team meeting is intended to mitigate the timing and increase response rates. Strategies, to mitigate the challenges with accessibility (accessing the survey), include a QR code to the electronic survey scanned upon conclusion of IEP Team meeting, duplicated for distribution, displayed in meeting spaces, electronically displayed if alternate means of meeting participation are used, completed onsite if there are barriers to technology and translated into language beyond Spanish and more reflective of those spoken across North Carolina. NC is also partnering with ECAC to conduct parent meetings regarding the survey as a strategy to mitigate privacy concerns about the survey and to explain the purpose and how the state will use the results in improvement planning. Lastly, NC is carefully considering incentives to offer PSUs with high response rates (i.e., free registration to NCDPI conferences, etc.)

NC will be transitioning away from a sampling plan to a census model for reporting in the FFY2024 APR. This decision was made in consultation with OEC stakeholders over the 2022-2023 and 2023-2024 school years. In preparing for the transition, OEC has partnered with ECAC to host parent information sessions across the state in the Spring of 2024. This meeting will also provide an opportunity to notify parents of the importance of the survey with the goal of increasing participation during the last year of the sampling plan (FFY2023) while also providing notification of NC's census plan for increasing survey responses statewide the following year (FFY2024). NC is also exploring options for hosting parent information sessions for the LEAs in the FFY2023 sampling plan to increase participation and representativeness. This transition timeline also provides the opportunity for technical assistance to LEAs statewide prior to data collections to ensure survey opportunities are consistently made available to all subgroups.

In the interim, the survey has transitioned to a QR code accessible through any electronic device. This also expands the opportunity to translate the survey into languages beyond Spanish. Survey invitations include an opportunity to request a paper copy if accessing the survey electronically is a barrier. Lastly, the OEC will leverage its Parent Liaison, parent listserv, ECAC, and other communication loops to increase participation.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

As a sampling state, NCDPI follows a sampling plan that annually includes survey data collection from the five largest PSUs (i.e., Charlotte-Mecklenburg, Cumberland, Guilford, Wake, and Winston-Salem Forsyth) and approximately one-fifth of the remaining traditional and charter PSUs. Four additional state-run PSUs are divided across the first four years. Data collection from each PSU other than the largest five PSUs occurs once during the five-year timeframe and is balanced to achieve consistency in size and demographic distribution across years for students with disabilities (SWD). The largest five PSUs each serve on average more than 50,000 students annually, and collectively constitute nearly 30% of the total state-wide SWD population. The remaining PSUs are divided into approximately equivalent groups using an anti-clustering technique (Papenberg & Kalu, 2021) and conditional on average daily membership (ADM) counts by race/ethnicity, categories of SWD, local education area (LEA) charter/traditional classification, and NCDPI region. The anti-clustering method follows a systematic and recursive algorithm to divide an existing dataset into approximately equivalent groups by maximizing the variability within each constructed group and subsequently minimizes the variability between those groups. Specifically, to generate equivalent groups of PSUs, the state-wide measure of ADM in schools taken from December 2019 (the most recent federal child count) was used to perform an anti-cluster analysis with the R package anticlust conditional on PSU counts of SWD by student race/ethnicity categories (American Indian or Alaska Native, Asian, Black or African American, Hispanic/Latino, two or more races, Native Hawaiian or Other Pacific Islander, and White), charter/traditional classification (traditional or charter), and NCDPI region (Northeast, Southeast, North Central, Sandhills, Piedmont-Triad, Southwest, Northwest, and Western). Given that PSUs can vary quite considerably in size and demographics, achieving an exact balance is not typically possible. New charter schools will be added annually to the sampling year corresponding to two years after its opening, and any schools that close will be removed from their assigned sampling year group.

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

Provide additional information about this indicator (optional)

8 - 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 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 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

NC analyzed its survey responses in FFY2022 for representativeness using the following demographics: Race/Ethnicity, Hispanic origin, and disability category. In the survey sample, NC identified 80,150 families for the overall target population. The number of families responding to the survey was 3,034. Given the small response rate of 3.79%, NC’s survey data was not representative of the Race/Ethnicity of children receiving special education services overall.

Of the families in the target population, responses to the survey were received from the following Race/Ethnicity groups: African American or Black, American Indian or Alaska Native, Asian, Native Hawaiian or Pacific Islander, White, More than One Race, and Hispanic. When compared among Race/Ethnicity subgroups from the number of families responding to the survey, response data were considered representative for American Indian or Alaskan Native, and Native Hawaiian or Pacific Islander. However, given the small overall response rate and the small n-size for each of these subgroups, NC uses caution when analyzing its data. The remaining Race/Ethnicity subgroups and Hispanic subgroup did not have response rates representative of CWD in NC.

As directed in the measurement table, NC selected “Disability Category” as its additional demographic to be analyzed when determining whether its overall survey responses are representative of children receiving special education services. Survey responses were received from families of children with the following disability categories: Specific Learning Disability (LD), Other Health Impaired (OHI), Autism (AU), Speech/Language Impairment (SI), Intellectually Disabled (ID), Developmentally Delayed (DD), Emotional Disturbance (ED), Multiple Disabilities (MU), Hearing Impairment (HI), Traumatic Brain Injury (TB), Visual Impairment (VI), Orthopedically Impaired (OI), Deaf/Hard of Hearing (DF), and Deaf/Blind (DB). Overall, survey responses analyzed by disability categories were not representative of children receiving special education services in NC. When also compared among disability category subgroups, none of the categories yielded survey data that was representative of CWD in NC. Further, DB, DF, OI, VI, TB, HI, and ED subgroups had extremely low response rates (<100) when compared across all subgroups.

Given the low response rate overall and under-representation of responses from Race/Ethnicity, Hispanic, and disability subgroups, NC will be transitioning away from a sampling plan to a census model for reporting in the FFY2024 APR. This decision was made in consultation with OEC stakeholders over the 2022-2023 and 2023-2024 school years. In preparing for the transition, OEC has partnered with ECAC to host parent information sessions across the state in the Spring of 2024. This meeting will also provide an opportunity to notify parents of the importance of the survey with the goal of increasing participation during the last year of the sampling plan (FFY2023) while also providing notification of NC’s census plan for increasing survey responses statewide the following year (FFY2024). NC is also exploring options for hosting parent information sessions for the LEAs in the FFY2023 sampling plan to increase participation and representativeness. This transition timeline also provides the opportunity for technical assistance to LEAs statewide prior to data collections to ensure survey opportunities are consistently made available to all subgroups.

In the interim, the survey has transitioned to a QR code accessible through any electronic device. This also expands the opportunity to translate the survey into languages beyond Spanish. Survey invitations include an opportunity to request a paper copy if accessing the survey electronically is a barrier. Lastly, the OEC will leverage its Parent Liaison, parent listserv, ECAC, and other communication loops to increase participation.

8 - OSEP Response

The State did not analyze the response rate to identify potential nonresponse bias, as required by the Measurement Table.

8 - Required Actions

In the FFY 2023 SPP/APR, the State must analyze the response rate to identify potential nonresponse bias and the steps taken to reduce any identified bias and promote response from parents of children with disabilities receiving special education services, as required by the Measurement Table.

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.

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%	0.00%	0.00%	0.00%	0.00%

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.

11

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
5	0	329	0.00%	0%	0.00%	Met target	No Slippage

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).

NC defines "disproportionate representation" of racial and ethnic groups in special education using a risk ratio of 3.0. LEAs with a risk ratio of greater than or equal to 3.0 (≥ 3.0) for each Race/Ethnic subgroup of CWD is determined to have disproportionate representation.

Calculation Method – Disproportionate Representation

1. December Child Count data for the reporting year is collected and disaggregated by Race/Ethnicity (R/E) for CWD in each LEA. R/E groups with a cell size less than 10 are excluded from the overall calculation.
2. R/E data for all students enrolled in LEAs is collected from the State Statistical Profile for the reporting year and disaggregated. R/E groups with an n-size less than 30 are excluded from the overall calculation.
3. R/E groups meeting the cell size ≥ 10 and the n-size ≥ 30 are used in the calculation.
4. Risk Ratio Numerator: [Formula: CWD (R/E targeted group) / All Students in LEA (R/E targeted group) = percentage of CWD by R/E targeted group].
5. Risk Ratio Denominator: [Formula: All other CWD (R/E comparison group) / All other Students (R/E comparison group) in LEA = percentage of CWD in all other R/E comparison group]
6. If the Risk Ratio ≥ 3.0 , the PSU has disproportionate representation in a R/E group.

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.

Once a PSU was determined to have a disproportionate representation for identification in special education in a RACIAL/ETHNIC group, the SEA initiated program monitoring of its identification practices and procedures. Program monitoring included a review of the evaluations conducted and eligibility determination for a student sample of CWD identified in the data collection year commensurate with the discrepant RACIAL/ETHNIC groups in the PSU and compared to the regulatory requirements to determine if the PSU had a finding of noncompliance in its policy, practice, and/or procedure. If findings of noncompliance were identified during program monitoring, corrective action was issued, and System/Child Specific Noncompliance activities initiated to affirm noncompliance was not ongoing after correction occurred.

As a result, NC bases its annual determination on the following:

- Inappropriate Identification = Finding(s) of noncompliance during Indicator 9 Program Monitoring
- Not Inappropriate Identification = No finding(s) of noncompliance during Indicator 9 Program Monitoring; or, Reasonable Progress in reducing risk ratio

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

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

9 - Prior FFY Required Actions

None

9 - OSEP Response

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	2.90%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	2.90%	0.00%

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.

11

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
61	14	329	0.00%	0%	4.26%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Of the PSUs monitored, NC had 14 PSUs with findings during the student record review indicative of noncompliant systemic and child specific practices regarding Disproportionate Representation in Specific Disability Categories. Slippage occurred due to 14 PSUs with findings during the student record review indicative of noncompliant systemic and child specific practices regarding Disproportionate Representation in Specific Disability Categories which could have resulted in the transition of the implementation of policies and practices during phases of returning to face to face instruction after COVID 19 given the need to carefully navigate learning loss and suspected disabilities.

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).

NC defines “disproportionate representation” of racial and ethnic groups in special education using a risk ratio of 3.0. LEAs with a risk ratio of greater than or equal to 3.0 (≥ 3.0) for each Race/Ethnic subgroup in each disability category is determined to have disproportionate representation.

Calculation Method – Disproportionate Representation

1. December Child Count data for the reporting year is collected and disaggregated by Race/Ethnicity (R/E) for each disability category in each LEA. R/E groups with a cell size less than 10 are excluded from the overall calculation.
2. R/E data for all students enrolled in LEAs is collected from the State Statistical Profile for the reporting year and disaggregated. R/E groups with an n-size less than 30 are excluded from the overall calculation.
3. R/E groups for each disability category meeting the cell size ≥ 10 and the n-size ≥ 30 are used in the calculation.
4. Risk Ratio Numerator: [Formula: CWD (R/E targeted group) / All Students in LEA (R/E targeted group) = percentage of CWD by R/E targeted group].
5. Risk Ratio Denominator: [Formula: All other CWD (R/E comparison group) / All other Students (R/E comparison group) in LEA = percentage of CWD in all other R/E comparison group]
6. If the Risk Ratio ≥ 3.0 , the PSU has disproportionate representation in by R/E for a disability category.

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.

Once a PSU was determined to have a disproportionate representation for identification in a RACIAL/ETHNIC group for a DISABILITY CATEGORY, the SEA initiated program monitoring of its identification practices and procedures. Program monitoring included a review of the evaluations conducted and eligibility determination for a student sample of CWD identified in the data collection year commensurate with the discrepant RACIAL/ETHNIC groups and disability category in the PSU and compared to the regulatory requirements to determine if the PSU had a finding of noncompliance in its policy, practice, and/or procedure. If findings of noncompliance were identified during program monitoring, corrective action was issued, and System/Child Specific Noncompliance activities initiated to affirm noncompliance was not ongoing after correction occurred.

As a result, NC bases its annual determination on the following:

- Inappropriate Identification = Finding(s) of noncompliance during Indicator 10 Program Monitoring
- Not Inappropriate Identification = No finding(s) of noncompliance during Indicator 10 Program Monitoring; or, Reasonable Progress in reducing risk ratio

Provide additional information about this indicator (optional)

FFFY 2021 Data Note

For the 9 public school units (PSUs) with disproportionate representation of racial/ethnic groups in specific disability categories as a result of inappropriate identification in FY2020, the OEC piloted the new Indicator 10 review tool as Phase 1 of its targeted monitoring process. OEC staff provided training, targeted technical assistance and met in person with the districts to use the review tool described above to ensure that the PSU was correctly implementing policies, practices and procedures related to identification involving SWD. As a result of these intense reviews, PSUs were given recommendations on strengthening their processes. There were no findings of noncompliance during this phase.

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

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Because the State reported greater than 0% actual target data for this indicator identified in FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022. The State must demonstrate, in the FFY 2023 SPP/APR, that each district identified in FFY 2022 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 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 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	84.62%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	90.22%	88.99%	84.13%	59.11%	68.03%

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
49,315	35,278	68.03%	100%	71.54%	Did not meet target	No Slippage

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

14,037

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.

1-5 days - 1675
 6-15 days - 2128
 16-25 days - 1433
 26-35 days - 1086
 36-45 days - 994
 46 days or more - 6721
 Total - 14037

Reasons for delays/referrals that went beyond the 90-day timeline:

Referral paperwork not processed in a timely manner - 272
 Excessive student absences - 8936
 Weather delays - 4
 Delay in getting parent consent for evaluation - 1438
 Other - (e.g. limited access to personnel with appropriate credentials to administer evaluations, availability of licensed staff to conduct IEP Team meetings for referrals and/or eligibility/placement, staff turnover) - 3387
 Total - 14037

Indicate the evaluation timeline used:

The State established a timeline within which the evaluation must be conducted

What is the State's timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).

North Carolina has an established timeline (90 calendar days) from receipt of the referral to the placement determination. The 90-day timeline/receipt of the referral begins before parental consent to evaluate and includes the time the evaluation must be conducted, eligibility determined and a decision about placement made.

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 FY 2022 data were collected for all PSUs through Every Child Accountability and Tracking System (ECATS), North Carolina's accountability system for collecting data for students with IEPs. Allowable exceptions, that were removed from the number of referrals received, were included in ECATS as follows: children who transferred in or out of the PSU, dropped out, or died within 90 days of receipt of referral; children who transferred into the PSU after the 90 day timeline expired and children whose parent(s) repeatedly failed or refused to produce them for the evaluation.

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
251	237	0	14

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The 251 PSUs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, on a quarterly basis in order for the OEC to review new data/student records to verify that each LEA with non-compliance was correctly implementing the regulatory requirements. Any LEA whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner and was required to submit data/evidence to NCDPI's OEC of any changes made to improve processes as part of correcting non-compliance prior to the OEC reviewing additional new records in a subsequent quarterly review as required by the 09-02 memo. During this time, the OEC provided additional technical assistance, prior to the review of new data/student records, to PSUs that had low compliance rates. Upon review of the new data/student records for the 251 PSUs with findings of non-compliance, the OEC verified that 237 PSUs demonstrated 100% compliance on subsequent record reviews and were correctly implementing the regulatory requirements within one year of identification.

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

The 251 PSUs with non-compliant findings had 14,312 child-specific findings of non-compliance in 2021-22. At the time of the initial determination of compliance for Indicator 11, the OEC verified that the PSUs with non-compliance also submitted/updated data/evidence through the Every Child Accountability and Tracking System (ECATS) that 14,303 child-specific instances of non-compliance had been corrected. PSUs were required to submit data/evidence through ECATS to the NCDPI, as soon as possible and no later than one year from notification of the non-compliant findings. The OEC continues to monitor and provide technical assistance so that the remaining 14 PSUs with child-specific instances of non-compliance may subsequently be verified as corrected.

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

DATA NOTE = NC notified its PSUs of noncompliance with Indicator 11 for the FFY2021 in August of 2023. Therefore, the 14 findings of noncompliance subsequently corrected is considered pending as the PSUs are still within their one year of correction. For these 14 findings of noncompliance, the state will be undertaking the same actions described above for System Noncompliance and Child Specific Noncompliance.

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	22	22	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

The 22 PSUs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the OEC to review new data/student records to verify that each PSU with non-compliance was correctly implementing the regulatory requirements. Any PSU whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner, and was required to submit data/evidence to NCDPI's OEC of any changes made to improve processes as part of correcting non-compliance prior to the OEC reviewing additional new records in a subsequent quarterly review as required by the 09-02 memo. During this time, the OEC provided additional technical assistance, prior to the review of new data/student records, to PSUs that had low compliance rates. Upon review of the new data/student records for the 22 PSUs with findings of non-compliance, the OEC verified that all 22 PSUs demonstrated 100% compliance on subsequent record reviews and were correctly implementing the regulatory requirements.

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

The 22 PSUs with non-compliant findings had child-specific findings of non-compliance in 2020-21. At the time of the initial determination of compliance for Indicator 11, the OEC verified that the PSUs with non-compliance also submitted/updated data/evidence through the Every Child Accountability and Tracking System (ECATS) that all child-specific instances of non-compliance had been corrected.

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 22 uncorrected findings of noncompliance identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each 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

Regulatory Requirements:

The 22 PSUs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the OEC to review new data/student records to verify that each PSU with non-compliance was correctly implementing the regulatory requirements. Any PSU whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner, and was required to submit data/evidence to NCDPI's OEC of any changes made to improve processes as part of correcting non-compliance prior to the OEC reviewing additional new records in a subsequent quarterly review as required by the 09-02 memo. During this time, the OEC provided additional technical assistance, prior to the review of new data/student records, to PSUs that had low compliance rates. Upon review of the new data/student records for the 22 PSUs with findings of non-compliance, the OEC verified that all 22 PSUs demonstrated 100% compliance on subsequent record reviews and were correctly implementing the regulatory requirements.

Individual Noncompliance:

The 22 PSUs with non-compliant findings had child-specific findings of non-compliance in 2020-21. At the time of the initial determination of compliance for Indicator 11, the OEC verified that the PSUs with non-compliance also submitted/updated data/evidence through the Every Child Accountability and Tracking System (ECATS) that all child-specific instances of non-compliance had been corrected.

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. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the remaining 14 findings of noncompliance identified in FFY 2021 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: (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	48.40%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	86.03%	89.60%	70.42%	46.46%	77.71%

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.	4,816
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	658

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,618
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.	593
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	161
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.	0

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.	2,618	3,404	77.71%	100%	76.91%	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

786

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.

Reasons for delays/referrals that went beyond the third birthday:

- a. Family Circumstance (e.g. illness/death in family, change in custody) - 47
- b. Child Circumstance (e.g. child was sick) - 27
- c. Part B Circumstance (e.g. delays completing evaluations, timely meetings, arranging transportation, enrollment, etc.) - 675
- d. Part C Circumstance (e.g. delays in notifying or issuing transition planning meeting invitation) - 37
- TOTAL - 786

Number of students with delays by days beyond third birthday:

- 1 to 5 days - 30
- 6 to 15 days - 75
- 16 to 25 days - 61
- 26 to 35 days - 68
- 36 to 45 days - 69
- 46 days or more - 483
- TOTAL - 786

Attach PDF table (optional)

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.

Every LEA in NC collects data for this indicator using an OEC-created tool that populates the state database for the entire reporting year. The database contains fields for each APR data element (A-F) and applies the formula necessary for calculating the percentage of timely transitions. Once the data collection period ends, the LEA verifies the accuracy of the data by providing a written assurance along with its electronic submission to the OEC.

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
45	45	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

The 45 LEAs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the OEC to review new data/student records to verify that each PSU with non-compliance was correctly implementing the regulatory requirements. Any PSU whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner and was required to submit data/evidence to NCDPI's OEC of any changes made to improve processes as part of correcting non-compliance prior to the OEC reviewing additional new records in a subsequent quarterly review as required by the 09-02 memo. During this time, the OEC provided additional technical assistance, prior to the review of new data/student records, to LEAs that had low compliance rates. Upon review of the new data/student records for the 45 LEAs with findings of non-compliance, the OEC verified that all 45 LEAs demonstrated 100% compliance on subsequent record reviews and were correctly implementing the regulatory requirements.

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

The 45 PSUs with non-compliant findings had child-specific findings of non-compliance in 2021-22. At the time of the initial determination of compliance for Indicator 12, the OEC verified that the PSUs with non-compliance also submitted/updated data/evidence through the Every Child Accountability and Tracking System (ECATS) that all child-specific instances of non-compliance had been corrected.

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

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. 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

Regulatory Requirements:

The 45 PSUs with findings of non-compliance were required to access the reports tool in the new Every Child Accountability and Tracking System (ECATS) to report and update their data, at a minimum on a quarterly basis in order for the OEC to review new data/student records to verify that each PSU with non-compliance was correctly implementing the regulatory requirements. Any PSU whose data were not verified by the State to be 100% compliant in the first quarter was reviewed in the second quarter or sooner and was required to submit data/evidence to NCDPI's OEC of any changes made to improve processes as part of correcting non-compliance prior to the OEC reviewing additional new records in a subsequent quarterly review as required by the 09-02 memo. During this time, the OEC provided additional technical assistance, prior to the review of new data/student records, to PSUs that had low compliance rates. Upon review of the new data/student records for the 45 PSUs with findings of non-compliance, the OEC verified that all 45 PSUs demonstrated 100% compliance on subsequent record reviews and were correctly implementing the regulatory requirements.

Individual Noncompliance:

The 45 PSUs with non-compliant findings had child-specific findings of non-compliance in 2021-22. At the time of the initial determination of compliance for Indicator 11, the OEC verified that the PSUs with non-compliance also submitted/updated data/evidence through the Every Child Accountability and Tracking System (ECATS) that all child-specific instances of non-compliance had been corrected.

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. 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 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	94.70%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	85.45%	80.84%	56.42%	60.74%	60.40%

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	420	60.40%	100%	61.67%	Did not meet target	No Slippage

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.

Secondary Transition data was collected through the state’s monitoring system, known as the Program Compliance Review (PCR). The PCR is a comprehensive monitoring activity used to ensure that students with disabilities are provided a free appropriate public education. PCR Monitoring activities are conducted by a monitoring team composed of consultants from the North Carolina Department of Public Instruction Office of Exceptional Children (NCDPI OEC) and is led by the assigned regional Policy, Monitoring and Audit consultant.

All public school units (PSUs), which includes traditional school systems, charter schools, and state operated programs are scheduled for a PCR on a five-year rotation. Additionally, the PCR is utilized in the second semester of the first year of operation for all new charter schools. For FFY2022, NCDPI OEC monitored PSUs that were scheduled for the final year of a five year rotation monitoring schedule.

The number of student records (student monitoring cohort) selected for review is based on a chart developed for use with the PCR process. The chart considers the Active Child Count of Exceptional Children and the number of schools in the district. The number of records selected for monitoring secondary transition includes records for student monitoring as well as an additional number of transition aged student records to provide a representative cohort from across the school system.

A virtual desktop electronic student record review was completed of each selected student’s special education file. The Special Education Student Record Review Protocol measures compliance in several areas, including a dedicated section of review indicators related to secondary transition. The secondary transition indicators are based upon the indicator 13 Checklist, developed by the National Secondary Transition and Technical Assistance Center (NSTTAC).

For FFY2022, NCDPI OEC reviewed 420 transition aged student records and identified 170 records with instances of noncompliance. NCDPI OEC issued letters of findings to those PSUs with one or more instances of Indicator 13 noncompliance. The calculated compliance rate of 62.41% falls short of the target of 100%. *However, for FFY2022, NCDPI OEC has determined that no slippage has occurred based upon the increase (FFY2022 62.41%, FFY2021 60.40%).

Question	Yes / No
Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	NO

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
240	240	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

Systemic Noncompliance and Child Specific Noncompliance activities were required for each PSU that was monitored in FFY2021 and had one or more non-compliant findings in the area of secondary transition. To verify that these PSUs were correctly implementing the regulatory requirements, a subsequent (Child Specific Noncompliance) review of student records was completed. During the Child Specific Noncompliance process, NCDPI OEC staff reviewed an additional student sample of secondary transition records for each PSU where any instance of non-compliance was identified. NCDPI OEC staff reviewed the newly selected student records electronically through the Every Child Accountability and Tracking System (ECATS) to ensure that any systemic noncompliance had been identified, corrected and thus were able to verify that the PSUs demonstrated 100% compliance on subsequent record reviews and were correctly implementing the specific regulatory requirements consistent with OSEP Memo 09-02 and reinforced in the technical assistance issued by OSEP in July 2023.

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

NCDPI OEC staff conducted Systemic Noncompliance reviews for all PSUs that had findings of non-compliance in one or more student secondary transition records. Systemic Noncompliance required the correction of individual noncompliant transition plans and review and revision, if necessary, of policies, practices, and procedures regarding transition planning. The PSUs that had identified non-compliance were required to submit a copy of each student’s IEP that documented the correction of student specific noncompliance for NCDPI OEC review and verification. If IEPs could be accessed electronically through ECATS, the NCDPI OEC Monitoring Consultants verified correction using the electronic submission/version of the IEP(s). The NCDPI OEC Monitoring Consultants verified the correction of each individual case of noncompliance related to the transition requirements was corrected within one year of notification of noncompliance.

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

Regulatory Requirements

Systemic Noncompliance and Child Specific Noncompliance activities were required for each PSU that was monitored in FFY2021 and had one or more non-compliant findings in the area of secondary transition. To verify that these PSUs were correctly implementing the regulatory requirements, a subsequent (Child Specific Noncompliance) review of student records was completed. During the Child Specific Noncompliance process, NCDPI OEC staff reviewed an additional student sample of secondary transition records for each PSU where any instance of non-compliance was identified. NCDPI OEC staff reviewed the newly selected student records electronically through the Every Child Accountability and Tracking System (ECATS) to ensure that any systemic noncompliance had been identified, corrected and thus were able to verify that the PSUs demonstrated 100% compliance on subsequent record reviews and were correctly implementing the specific regulatory requirements consistent with OSEP Memo 09-02 and reinforced in the technical assistance issued by OSEP in July 2023.

Individual Cases of Noncompliance

NCDPI OEC staff conducted Systemic Noncompliance reviews for all PSUs that had findings of non-compliance in one or more student secondary transition records. Systemic Noncompliance required the correction of individual noncompliant transition plans and review and revision, if necessary, of, of policies, practices and procedures regarding transition planning. The PSUs that had identified non-compliance were required to submit a copy of each student's IEP that documented the correction of student specific noncompliance for NCDPI OEC review and verification. If IEPs could be accessed electronically through ECATS, the NCDPI OEC Monitoring Consultants verified correction using the electronic submission/version of the IEP(s). The NCDPI OEC Monitoring Consultants verified the correction of each individual case of noncompliance related to the transition requirements was corrected within one year of notification of noncompliance.

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

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	2009	Target >=	39.75%	40.00%	40.00%	40.51%	41.51%
A	39.00%	Data	27.01%	29.48%	28.51%	19.64%	22.52%
B	2009	Target >=	62.75%	63.00%	63.00%	71.00%	73.00%
B	62.00%	Data	62.83%	63.07%	69.99%	50.90%	65.19%
C	2009	Target >=	73.75%	74.00%	76.00%	81.76%	83.75%
C	73.00%	Data	77.70%	79.05%	80.76%	57.98%	71.29%

FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A >=	42.50%	43.00%	43.50%	44.00%
Target B >=	75.00%	77.00%	79.00%	81.00%
Target C >=	85.75%	87.75%	89.75%	91.75%

Targets: Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	2,682
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,164
Response Rate	43.40%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	289
2. Number of respondent youth who competitively employed within one year of leaving high school	519
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)	7
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).	91

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)	289	1,164	22.52%	42.50%	24.83%	Did not meet target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	808	1,164	65.19%	75.00%	69.42%	Did not meet 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)	906	1,164	71.29%	85.75%	77.84%	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	19.23%	43.40%

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

NC utilized the ECTA Response Rate and Representativeness Calculator to compute response rates and to determine if the surveys received are representative of the target population. A statistical formula is used to determine if the overall distribution of survey responses across subgroups is similar to the distribution of those subgroups in the population. If the calculator finds the distribution of subgroups from the survey is significantly different than the distribution of those subgroups in the population, a follow-up analysis is completed to compare the population and survey percentages for each subgroup to determine if the two percentages are meaningfully different within each subgroup (i.e., % of surveys received vs. % of families in the target population). The values are entered by subgroup and calculated to determine the overall significance of the table. If the overall calculation is statistically significant, an additional calculation is completed to determine the difference between the two percentages within each subgroup and highlights significant differences.

The calculator utilizes a Chi-square test to evaluate the statistical difference of the overall table. If this overall test shows no significant difference, the data are representative of the population. If the overall test shows a significant difference, a z test of proportional difference is applied to determine whether the difference between the two percentages is statistically significant, based upon the 90% confidence intervals for each indicator (significance level = 0.10).

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.

NC analyzed its survey responses for representativeness using the following demographics: Race/Ethnicity, Hispanic origin, and disability category. In the survey sample, NC identified 2,682 youth for the overall target population. The number of youth responding to the survey was 1,164. While the response rate was 43.40%, NC’s survey data overall was not representative of the Race/Ethnicity for post-secondary outcomes.

Of the youth in the target population, responses to the survey were received from the following Race/Ethnicity groups: African American or Black, American Indian or Alaska Native, Asian, Native Hawaiian or Pacific Islander, White, More than One Race, and Hispanic. When compared among Race/Ethnicity subgroups from the number of youth responding to the survey, response data were considered representative for American Indian or Alaskan Native, Asian, Native Hawaiian or Pacific Islander, More than One Race, and Hispanic. With the exception of More than One Race and Hispanic, data for the subgroups that were considered representative should be used with caution given the small n-size. The remaining Race/Ethnicity subgroups (African American or Black, and White) did not have response rates representative for post-secondary outcomes of CWD in NC.

As directed in the measurement table, NC selected “Disability Category” as its additional demographic to be analyzed when determining whether its overall survey responses are representative of youth with post-secondary outcomes. Survey responses were received from youth with the following disability categories: Specific Learning Disability (LD), Other Health Impaired (OHI), Autism (AU), Speech/Language Impairment (SI), Intellectually Disabled (ID), Developmentally Delayed (DD), Emotional Disturbance (ED), Multiple Disabilities (MU), Hearing Impairment (HI), Traumatic Brain Injury (TB), Visual Impairment (VI), Orthopedically Impaired (OI), Deaf/Hard of Hearing (DF), and Deaf/Blind (DB). Overall, survey responses analyzed by disability categories were representative of post-secondary outcomes for youth in NC. Therefore, further analysis between disability subgroups was not warranted.

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)

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.

NC’s data indicated that African American and White response rates were not representative for surveying youth for post-secondary outcomes. Given these data are collected by interview, NC will review its data collection protocol to determine whether multiple attempts are made to secure responses in the sample. In preparing for the upcoming collection, NC will consider reviewing and revising the technical assistance it offers to LEAs and the method in which youth are informed of the post-secondary survey during the exit year. Anecdotal data from LEAs who just conducted the survey should be collected and analyzed to identify any potential barriers that could be addressed in the upcoming collection. Lastly, FFY2021 was the first year survey data was collected in ECATS. NC should review its training plan to ensure data entry can be successfully completed.

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

In addition to the strategies described above for increasing representativeness, NC is considering a transition away from the sampling + census to a statewide + census methodology for reporting in the FFY2024 APR. The desired result is that through over-sampling, NC will improve the response rate as well as the representativeness of the sample for African American and White youth. In preparing for the transition, OEC has partnered with ECAC to host parent information sessions across the state in the Spring of 2024. This meeting will also provide an opportunity to notify parents of the importance of the survey with the goal of increasing youth participation during the last year of the sampling plan (FFY2023) while also providing notification of NC’s census plan for increasing survey responses statewide the following year (FFY2024). NC is also exploring options for hosting parent information sessions for the LEAs in the FFY2023 sampling plan to increase youth participation and representativeness. This transition timeline also provides the opportunity for technical assistance to LEAs statewide prior to data collections to ensure survey opportunities are consistently made available to all subgroups.

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.

While NC increased its response rate between FFY21 (19.23%) and FFY22 (43.40%), FFY21 was the first year the data was collected in ECATS. Though improved, the response rate is likely impacted by when surveys are conducted, whether participants are willing to answer unknown callers appearing on caller IDs, and whether updated contact information is provided and/or maintained by the LEA for the timeline needed after exit. Further, staff conducting surveys may use ECATS infrequently, therefore potentially contributing to errors in data collection (i.e., saving responses, locating contact information, completing all components of the survey, etc.).

Because nonresponse bias may be attributed to the length of the survey, poor timing of survey distribution, limited accessibility, or privacy concerns, NC will be evaluating new strategies for increasing response rates. Currently, the survey is conducted by phone. Exploring the use of a shortened survey that can be electronically distributed via email may increase response rates. NC is also reconsidering its survey collection window as we have typically waited until one year post graduation/exit to administer; however, this indicator measures “within one year of leaving high school”. Therefore, administering the survey six months after leaving high school may increase response rate as it would be closer to when the school would notify the student of the survey occurring.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

North Carolina is a sampling state, and as such, each LEA in the state is on a 5-year cycle sampling plan with the exception of the five largest LEAs, which report annually. For each of the five largest LEAs, individual high schools within those LEAs are on their own 5-year sample cycle. Student-level data for each LEA or school is collected as a census, meaning the LEA attempts to contact every student that meets the criteria for Indicator 14. More specifically, NCDPI follows a sampling plan that annually includes survey data collection from approximately one-fifth of the high schools within the five largest LEAs (i.e., Charlotte-Mecklenburg, Cumberland, Guilford, Wake, and Winston-Salem Forsyth) and approximately one-fifth of the remaining traditional and charter PSUs across the state. Four additional state-run PSUs are divided across the first four years. Data collection from high schools within the five largest LEAs and data collection from each LEA other than the largest five LEAs occur once during the five-year timeframe and are balanced to achieve consistency in size and demographic distribution across years for students with disabilities (SWD). The largest five LEAs each serve on average more than 50,000 students annually, and collectively constitute nearly 30% of the total state-wide SWD population. Select high schools within each of the five largest LEAs as well as the remaining PSUs are, respectively, divided into approximately equivalent groups using an anti-clustering technique conditional on average daily membership (ADM) counts by race/ethnicity categories of SWD. Additionally, aside from the largest five, LEAs will also be distributed to achieve balance on LEA charter/traditional classification, and NCDPI region. The anti-clustering method follows a systematic and recursive algorithm to divide an existing dataset into approximately equivalent groups by maximizing the variability within each constructed group and subsequently minimizes the variability between those groups.

Specifically, to generate equivalent groups of LEAs, the state-wide measure of ADM in schools taken from the most recent federal child count are used to perform an anti-cluster analysis with the R package anticlust conditional on school/LEA counts of SWD by student race/ethnicity categories (American Indian or Alaska Native, Asian, Black or African American, Hispanic/Latino, two or more races, Native Hawaiian or Other Pacific Islander, and White), and where applicable, charter/traditional classification (traditional or charter) and NCDPI region (Northeast, Southeast, North Central, Sandhills, Piedmont-Triad, Southwest, Northwest, and Western). Given that schools/LEAs can vary quite considerably in size and demographics, achieving an exact balance is not typically possible. New charter schools will be added annually to the sampling year corresponding to two years after its opening, and any schools that close will be removed from their assigned sampling year group.

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)

14 - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

NC analyzed its survey responses for representativeness using the following demographics: Race/Ethnicity, Hispanic origin, and disability category. In the survey sample, NC identified 2,682 youth for the overall target population. The number of youth responding to the survey was 1,164. While the response rate was 43.40%, NC's survey data overall was not representative of the Race/Ethnicity for post-secondary outcomes.

Of the youth in the target population, responses to the survey were received from the following Race/Ethnicity groups: African American or Black, American Indian or Alaska Native, Asian, Native Hawaiian or Pacific Islander, White, More than One Race, and Hispanic. When compared among Race/Ethnicity subgroups from the number of youth responding to the survey, response data were considered representative for American Indian or Alaskan Native, Asian, Native Hawaiian or Pacific Islander, More than One Race, and Hispanic. With the exception of More than One Race and Hispanic, data for the subgroups that were considered representative should be used with caution given the small n-size. The remaining Race/Ethnicity subgroups (African American or Black, and White) did not have response rates representative for post-secondary outcomes of CWD in NC.

As directed in the measurement table, NC selected "Disability Category" as its additional demographic to be analyzed when determining whether its overall survey responses are representative of youth with post-secondary outcomes. Survey responses were received from youth with the following disability categories: Specific Learning Disability (LD), Other Health Impaired (OHI), Autism (AU), Speech/Language Impairment (SI), Intellectually Disabled (ID), Developmentally Delayed (DD), Emotional Disturbance (ED), Multiple Disabilities (MU), Hearing Impairment (HI), Traumatic Brain Injury (TB), Visual Impairment (VI), Orthopedically Impaired (OI), Deaf/Hard of Hearing (DF), and Deaf/Blind (DB). Overall, survey responses analyzed by disability categories were representative of post-secondary outcomes for youth in NC. Therefore, further analysis between disability subgroups was not warranted.

NC's data indicated that African American and White response rates were not representative for surveying youth for post-secondary outcomes. Given these data are collected by interview, NC will review its data collection protocol to determine whether multiple attempts are made to secure responses in the sample. In preparing for the upcoming collection, NC will consider reviewing and revising the technical assistance it offers to LEAs and the method in which youth are informed of the post-secondary survey during the exit year. Anecdotal data from LEAs who just conducted the survey should be collected and analyzed to identify any potential barriers that could be addressed in the upcoming collection. Lastly, FFY2021 was the first year survey data was collected in ECATS. NC should review its training plan to ensure data entry can be successfully completed.

14 - OSEP Response

The State did not analyze the response rate to identify potential nonresponse bias, as required by the Measurement Table.

14 - Required Actions

In the FFY 2023 SPP/APR, the State must analyze the response rate to identify potential nonresponse bias 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, as required by the Measurement Table.

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 (EMAPS)).

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	19
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	7

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

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

Historical Data

Baseline Year	Baseline Data
2005	86.00%

FFY	2017	2018	2019	2020	2021
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00%-85.00%	75.00%-85.00%	75.00%-85.00%
Data	47.37%	34.21%	21.05%	12.50%	35.48%

Targets

FFY	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	75.00%	85.00%	75.00%	85.00%	75.00%	85.00%	75.00%	85.00%

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
7	19	35.48%	75.00%	85.00%	36.84%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

Currently, in response to the filing of a due process petitions, many parties waive the right to a resolution session in favor of scheduling mediation. NC hypothesizes that the low number of resolution sessions and sessions that are resolved through settlement agreements completed during resolution sessions is directly related to the parties seeking legal counsel to proceed through the dispute with representation. Additionally, the short timeline in which to schedule and hold resolution sessions often proves challenging for the parties if the filing of a due process petition is the first indication of a dispute.

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 (EMAPS)).

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	104
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	54
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	21

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

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors' Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

Historical Data

Baseline Year	Baseline Data
2005	71.00%

FFY	2017	2018	2019	2020	2021
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00%-85.00%	75.00%-85.00%	75.00%-85.00%
Data	54.55%	62.50%	64.47%	46.03%	52.17%

Targets

FFY	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	75.00%	85.00%	75.00%	85.00%	75.00%	85.00%	75.00%	85.00%

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
54	21	104	52.17%	75.00%	85.00%	72.12%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

NC's data did not meet the target for successful mediation agreements. However, many parties may engage in multiple dispute resolution mechanisms to resolve their disagreements (i.e. facilitated IEP Team meetings or mediation outside of NCDPI). The NCDPI attributes the low percentage of mediation agreements to the number of mediation meetings (NCDPI supported and independent) required to resolve issues particularly when attorney fees are the last issue in dispute.

16 - Prior FFY Required Actions

None

16 - OSEP Response

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, 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, 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)?

NC will increase the percentage of CWD of color determined at or above proficient when compared to all CWD with a valid proficiency score against grade level academic standards in 4th grade reading.

NC is requesting that its baseline year for 2020 be revised to report the percentage of CWD of color determined at or above proficient on grade level academic standards in 4th grade reading when compared/divided with all CWD with a valid proficiency score on grade level academic standards in 4th grade reading. Then, all targets should be revised to show increasing percentages to accurately report annually the improvement for CWD of color.

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.

During the FFY2021 APR clarification period and in consultation with the IDC, NC reviewed its SiMR to determine whether it clearly articulated a multi-year plan for improving results for CWD and whether the methodology selected reflects what is measured in the SPP/APR data table. NC also reviewed: (1) the effectiveness of its SiMR customized support in comparison with SiMR-Support PSUs and universal support statewide; (2) collective impact on the number of students potentially benefiting from customized support in SiMR-Support PSUs; (3) transparency of the data to stakeholders when reporting on "gap-closing growth"; and (4) systems-alignment with improving literacy statewide by embedding SiMR improvement strategies within district school improvement activities.

Please list the data source(s) used to support the change of the SiMR.

Previously, NC reported the number of CWD of Color in SiMR Support LEAs Who Scored at Career and College Ready on 4th Grade Reading State Assessment and divided that number by the total CWD of Color in SiMR Support LEAs Who Took the 4th Grade Reading State Assessment to yield a percentage proficient. Had NC continued this methodology for FFY2022, only 59 CWD of color out of 1125 CWD of color in SiMR Support LEAs would have been proficient. Further, the calculation used was not an accurate calculation of closing the proficiency gap. It only represented the percentage of the CWD of color that were considered proficient (5.24%) when compared to the same subgroup (CWD of color proficient). As a result, NC's targets were not commensurate with the requirements in the APR measurement table, did not clearly measure what was intended by improving outcomes for CWD of color in 4th grade reading, and did not reflect improvement commensurate with the investment of statewide resources focused in this area.

During FFY2022, 40 LEAs opted in as SiMR-Support partners from a group of 97 invited LEAs with <25% of all students scoring in the College and Career Ready (CCR) on the 2020-21 4th grade reading state assessment. This subset only represents approximately 12% of all LEAs. When coupled with NC's Indicator 3B target (18.83%) for CWD scoring at or above proficient against grade level academic standards in 4th grade reading, the relative impact for improvement overall was low. Therefore, NC is not choosing to use a subset of the population (SiMR Support PSUs) in its SiMR reporting for FFY2022 in favor of expanding focus statewide for increasing proficiency in 4th Reading for all CWD of color.

Provide a description of how the State analyzed data to reach the decision to change the SiMR.

NC's review of the system analysis activities yielded the following: (1) over time and commensurate with staff turnover in PSUs, the number of SiMR-support PSUs voluntarily engaging in customized support decreased (96 originally meeting selection criteria to 40 currently); (2) sessions with SiMR support PSUs generally resulted in affirming outcomes from universal support not necessarily yielding new or different strategies; (3) gap-closing growth terminology was challenging to explain and visually represent to stakeholder groups as it was not a clear numerator and denominator one-step calculation; (4) partnership with the NC Office of Early Learning (OEL) yielded successful systems-alignment activities as SiMR strategies for improving reading were easily embedded in or enhanced by merging with district literacy plans and improvement activities.

Please describe the role of stakeholders in the decision to change the SiMR.

During FFY2021 and FFY2022, stakeholders were provided updates regarding SiMR support PSUs. While the number of external stakeholders varied and were few in number, NC observed that little to no questions or feedback was given regarding SiMR targets and data. NC hypothesizes that this could be attributed to the complexity of the current data calculation as stakeholders have consistently supported the overall focus on CWD of color and improving literacy. In the most recent stakeholder meeting, OEC staff shared preliminary data expected to be reported in the FFY2022 APR. Within the discussion, OEC staff raised concern about the proficiency of all CWD of color in 4th grade reading and the declining numbers of SiMR support PSUs engaged in customized activities. Stakeholders did not raise questions or concerns with the consideration for expanding the SiMR to a statewide focus on improving proficiency for CWD of color in 4th grade reading and refining our data collection to display increasing percentage proficient.

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.

NC will increase the percentage of CWD of color determined at or above proficient when compared to all CWD with a valid proficiency score against grade level academic standards in 4th grade reading. NC's subset of the population is CWD of color.

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.

NC's Theory of Action was revised to include the clarified SiMR statement.

Please provide a link to the current theory of action.

<https://docs.google.com/document/d/1JdnE0bPScb5MEDTQggpoOm4wpt8s3NQ3/edit?usp=sharing&oid=104427441376492106094&rtpof=true&sd=true>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2020	4.19%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	8.50%	11.00%	12.50%	15.00%

FFY 2022 SPP/APR Data

Number of CWD of Color Scoring At or Above Proficient Against Grade Level Academic Achievement Standards in 4th Grade Reading	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
598	13,516	4.00%	8.50%	4.42%	Did not meet target	No Slippage

Provide the data source for the FFY 2022 data.

Data for 4th grade reading end-of-grade assessment are collected from NC’s statewide accountability system and transferred to an internal NCDPI data warehouse (Common Education Data Analysis and Reporting System; CEDARS). OEC extracts the file from CEDARS and disaggregates/compares the 4th grade reading data by state, LEA, disability, and race/ethnicity group.

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

Data for 4th grade reading end-of-grade assessment are collected from NC’s statewide accountability system and transferred to an internal NCDPI data warehouse (Common Education Data Analysis and Reporting System; CEDARS). OEC extracts the file from CEDARS and disaggregates/compares the 4th grade reading data by state, LEA, disability, and race/ethnicity group.

Groups Used in Analysis

1. CWD of color includes the following Race/Ethnic groups: African American or Black, American Indian, or Alaska Native, Asian, Native Hawaiian or Pacific Islander, More than One Race, and Hispanic. This is the target group and the number of students in this group scoring at or above proficient in 4th grade reading provide the numerator for the SiMR calculation.
2. The aggregate number of CWD with a valid proficiency score on grade level academic standards in 4th grade reading is the comparison group and is the number used as the denominator for the SiMR calculation.
3. CWD includes the following, if reported: Specific Learning Disability (LD), Other Health Impaired (OHI), Autism (AU), Speech/Language Impairment (SI), Intellectually Disabled (ID), Developmentally Delayed (DD), Emotional Disturbance (ED), Multiple Disabilities (MU), Hearing Impairment (HI), Traumatic Brain Injury (TB), Visual Impairment (VI), Orthopedically Impaired (OI), Deaf/Hard of Hearing (DF), and Deaf/Blind (DB).

For FFY2022 reporting, NC amended its SiMR to increase the proficiency of CWD of color in 4th grade reading. To gather and analyze the data the following formula was used:

CWD of color scoring at or above proficient in 4th grade reading / ALL CWD with a valid proficiency score on grade level academic standards in 4th grade reading

NC K-3 Literacy Assessment – mClass DIBELS, Indicator 8 data, Indicator 5 data and Disproportionality and Indicator 4, 9, 10 data are data sets reviewed when analyzing improvement strategies.

Collectively, these data sets are intended to provide progress monitoring data on benchmarks for target group, parent engagement, and patterns of

significant discrepancy for race/ethnic groups, placement, and identification in disability categories to determine if interventions beyond strategies to improve reading are needed to improve outcomes.

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

YES

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

NC K-3 Literacy Assessment – mClass DIBELS
Indicator 8 data
Disproportionality and Indicator 4, 9, 10 data
Indicator 5 data
Federal Personnel Report data
NC State of Teaching Profession Annual Report

Collectively, these data sets are intended to provide progress monitoring data on benchmarks for target group, parent engagement, access to core instruction, and patterns of significant discrepancy for race/ethnic groups, placement, and identification in disability categories to determine if interventions beyond strategies to improve reading are needed to improve outcomes.

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.

SSIP Evaluation Plan - https://docs.google.com/document/d/1_iGuokd8571-WIX515OSWcb5HO_Se7fv/edit?usp=sharing&oid=114466409737524691690&rtpof=true&sd=true

DATA NOTE: NC has initiated a revision to its current evaluation plan pending OSEP's acceptance of the revised SiMR submitted in the FFY2022 APR. Anticipated revisions require additional stakeholder input.

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

NO

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

Strategy 1: Cohesive Technical Assistance and Professional Development

A new Senior Director/State Director transitioned into leadership in April 2023. At that time internal and external stakeholders were provided an opportunity to reflect on previous engagement with the OEC to identify practices that were going well, needed improvement, or needed to discontinue while utilizing the FFY2021 SPP/APR data as a driver for recommendations. A recurring theme was the need to review the frequency and types of communication issued between the SEA and LEA in order to ensure deadlines were met and opportunities communicated well in advance for local planning. The OEC responded to this feedback by creating the 2023-2024 OEC Activity Guide. This resource lists and defines each of the OEC engagements (i.e., listservs, data collection deadlines, TA/PPD offerings, etc.) and includes the objectives for each opportunity with an explicit correlation to SPP/APR indicators. Technical assistance offered by the OEC was further aligned to the "season of the work" (i.e., grant submission, data collections, child counts) to improve data quality, support local improvement efforts, and accurate reporting for the SPP/APR. Superintendents, local EC leaders, and NCDPI staff have access to this guide. It updates as needed with a live link and can be accessed at any time to determine what resources are available to support local improvement efforts focused on students with disabilities. Since its implementation, anecdotal feedback has been positive and the OEC plans to engage in a similar reflective opportunity in the Spring of 2024 to plan ahead for the next school year. The live link for the guide can be accessed here: <https://docs.google.com/document/d/1mwuJdHyh2TS-bs1gwzREZYaWvLmxvCwV/edit?usp=sharing&oid=104427441376492106094&rtpof=true&sd=true>

NC State Improvement Project (NC SIP)- Through the OSEP State Personnel Development Grant, the North Carolina State Improvement project (NC SIP) provides comprehensive, high quality professional development and follow up coaching focused on effective leadership and effective instruction to districts and schools by: building state-level capacity; enhancing leadership skills in administrators; delivering research-based professional development on literacy and mathematics instruction; aligning state and institutions of higher education instructional content; and improving family engagement at all levels of service delivery. The project contributes to the implementation of evidence-based practices to improve special education services in support of quality core instruction.

Strategy 2: Effective Teaming Structures

OEC Regional Data Team (RDT) - This regional teaming structure is internal to the OEC with OEC consultants and Section Chiefs in its membership. The RDT supports the analysis and improvement planning for the region in which they provide services (i.e., programmatic, discipline-specific, policy/monitoring, etc.). The RDT has provided targeted technical assistance to SiMR Support LEAs and LEAs statewide by reviewing root causes analyses, and systems-level coaching based on local LEA determinations and areas identified for improvement through district improvement plans.

Educational Equity Team – Internally, this team has facilitated a book study to engage the OEC in reflective practice regarding policies, practices, and procedures designed to explicitly address significant disproportionality statewide. Key infrastructure improvement strategies this reporting period included monthly webinars focused on equity topics to build capacity among district and school leaders statewide, an intentional collaboration session between Equity Officers and Special Education Leaders to align priorities and build mutual understanding, and ongoing development of an online repository of equity resources on the NCDPI Office of Exceptional Children website. Both internal and external efforts in this area have facilitated problem-solving discussions and strategic planning regarding opportunities to learn and analyzing data by race/ethnicity to identify root causes (i.e., suspension, identification, attendance, etc.) for poor outcomes for CWD.

The OEC partnered with the Office of Early Learning to embed SiMR improvement strategies within required local literacy plans. The intended outcome

is to promote systems alignment at the local level to scale-up existing or proposed improvement strategies for literacy with CWD of color as a target group.

Strategy 3: Data Systems

The Every Child Accountability and Tracking System (ECATS) is the statewide system for the management of special education paperwork and collects key data points used in federal reporting. The data in ECATS is analyzed with a business intelligence tool to detect correlation between IEP processes/elements and outcomes for SWD at the LEA level. For example, analyzing manifestation determination data housed in ECATS can help determine if disciplinary procedures and practices are impacting SWD opportunities to learn. In relation to the SiMR, this could further illuminate if some subgroups in grades K-4 are disproportionately missing literacy instruction due to removals, which negatively impact the SiMR 4th grade reading outcome metric.

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.

Strategy 1: Cohesive Technical Assistance and Professional Development

OEC Activities Guide - An intended outcome for these activities is the development of targeted TA/PPD opportunities that are explicitly stated and related to the SPP/APR. This effort ensures that the Office of Exceptional Children is matching its support directly to the areas in need of improvement statewide and LEAs can prioritize their engagement by selecting opportunities that correlate with their own data analysis for each indicator. Analysis of whether CWD are achieving outcomes (Indicator 3/7) and where CWD are receiving services (Indicator 5/6) begin critical conversations about whether special education is supplanting core instruction and the quality of special education services in special education settings. Furthermore, significant discrepancies by R/E (Indicators 4,9,10) could indicate a need for further problem-solving when ensuring equitable access to learning. The intersection of these indicators is directly related to NC's SiMR. This system is sustainable as the OEC has scheduled the feedback loops necessary to plan ahead for the 2024-2025 school year and can be scaled-up to incorporate additional opportunities determined to be effective (i.e., Regional Meetings, EC Conference, Institutes, etc.) from the current reporting year. SPP/APR data is available annually, therefore, correlating engagement to these indicators may provide an indirect method of evaluating success with this strategy. [Systems framework areas: governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance]

NC SIP - NC State Improvement Project (NC SIP)-In this past year, there have been 209 offerings of the foundational courses, Reading Research to Classroom Practice (RRtCP) and Foundations of Math (FoM). There have been over 400 in-service and 164 preservice educators successfully complete the two courses. For RRtCP, participants' knowledge grew from a 50% accuracy on the pre-test to an average of 81% on the post test. After completing the courses, 86% of participants observed met fidelity in implementing newly learned evidence-based practices in either literacy or math. As of September 30, 2023, there were 197 RRtCP instructors that successfully recertified. The RRtCP courses are accredited from the International Dyslexia Association because it meets the knowledge and practice standards identified by IDA. NCDPI is the only State Education Agency that has any courses/programs that meet these criteria. As of October 1, 2023, North Carolina had over 200 certified Reading Research to Classroom Practice instructors across the entire state that offer RRtCP classes, redeliver the content to fidelity, and provide implementation support to educators who participate in their course. Leveraging the work of NCSIP is a critical strategy necessary to achieve progress with the SiMR as it strengthens specially designed instruction in reading for CWD in special education settings and provides strategies in addition those provided during core instruction. This improvement effort is sustainable and can be scaled up as evidenced by NC's 20+ years of SIP work. [Systems framework areas: data, quality standards, professional development and/or technical assistance]

Strategy 2: Effective Teaming Structures

EC Regional Data Teams – For FFY2022, the outcome of this strategy was the review of all SiMR Root Cause Analysis for all LEAs statewide and the follow-up system-level coaching that occurred as a result. Teams conferenced with local exceptional children's leaders to refine precise problem statements, clearly state measurable improvement strategies, and align/embed within local literacy plans/district improvement plans. This work is clearly aligned with NC's SiMR; however, will need to be scaled up to shift from systems-level coaching to the provision of TA/PPD that is alignment with the needs/root causes identified by region. [Systems framework areas: data, quality standards, professional development and/or technical assistance]

Educational Equity Team - Short-term outcomes achieved through these strategies include increased awareness and capacity among leaders on educational equity topics through the monthly webinars, as measured by post-webinar surveys and aligning to professional development systems; stronger alignment between Equity Officers and Special Education Leaders from the intentional collaboration session, measured by participant feedback and relating to professional development; and increased access to equity resources through the online repository, measured by website traffic and supporting professional development and technical assistance. This strategy is intended to support the SiMR by facilitating critical conversations regarding Race/Ethnicity to examine whether local practices, policies, and procedures allow for equitable access. The OEC has begun scaling up this work by analyzing its own policies, practices, and procedures to ensure racial/ethnic subgroups are represented in Indicator 8 and 14 data, monitoring activities, and other components within its General Supervision system. [Systems framework areas: governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance]

Strategy 3: Data Systems

Every Child Accountability and Tracking System (ECATS) – The reports in ECATS are intended to provide access to data sets related to the SiMR. In order to engage in self-assessment to monitor compliance most closely related to outcomes. For example, ECATS reports for Indicator 11 can be disaggregated by Race/Ethnic group to determine if noncompliance with timelines impacts particular Racial/Ethnic subgroups. A delayed identification for a particular subgroup could be a contributing factor to root causes for opportunities to learn as a result of delayed access to special education and related services. Short-term outcomes have resulted in more clear and explicit connections between special education programming, data collection, SPP/APR and SiMR. NC believes this is essential to improving SiMR outcomes as there can be many policies, practices, and procedures that can be strengthened concurrently with instructional evidence-based practices. This strategy is sustainable as reports on available on demand in ECATS. NC also has opportunity to scale this up beyond the example provided to include service delivery, least restrictive environment, resource allocation, etc. [Systems framework areas: governance, data, accountability/monitoring, quality standards, professional development and/or technical assistance]

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

YES

Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

Strategy 1: Cohesive Technical Assistance and Professional Development

A new Senior Director/State Director transitioned into leadership in April 2023. At that time internal and external stakeholders were provided an opportunity to reflect on previous engagement with the OEC to identify practices that were going well, needed improvement, or needed to discontinue

while utilizing the FFY2021 SPP/APR data as a driver for recommendations. A recurring theme was the need to review the frequency and types of communication issued between the SEA and LEA in order to ensure deadlines were met and opportunities communicated well in advance for local planning. The OEC responded to this feedback by creating the 2023-2024 OEC Activity Guide. This resource lists and defines each of the OEC engagements (i.e., listservs, data collection deadlines, TA/PA offerings, etc.) and includes the objectives for each opportunity with an explicit correlation to SPP/APR indicators. Technical assistance offered by the OEC was further aligned to the "season of the work" (i.e., grant submission, data collections, child counts) to improve data quality, support local improvement efforts, and accurate reporting for the SPP/APR. Superintendents, local EC leaders, and NCDPI staff have access to this guide. It updates as needed with a live link and can be accessed at any time to determine what resources are available to support local improvement efforts focused on students with disabilities. Since its implementation, anecdotal feedback has been positive and the OEC plans to engage in a similar reflective opportunity in the Spring of 2024 to plan ahead for the next school year. The live link for the guide can be accessed here: <https://docs.google.com/document/d/1mwuJdHyh2TS-bs1gwzREZYaWvLmxvCwV/edit?usp=sharing&ouid=104427441376492106094&rtpof=true&sd=true>

OEC Activities Guide - An intended outcome for these activities is the development of targeted TA/PA opportunities that are explicitly stated and related to the SPP/APR. This effort ensures that the Office of Exceptional Children is matching its support directly to the areas in need of improvement statewide and LEAs are able to prioritize their engagement by selecting opportunities that correlate with their own data analysis for each indicator. Analysis of whether CWD are achieving outcomes (Indicator 3/7) and where CWD are receiving services (Indicator 5/6) begin critical conversations about whether special education is supplanting core instruction and the quality of special education services in special education settings. Furthermore, significant discrepancies by R/E (Indicators 4,9,10) could indicate a need for further problem-solving when ensuring equitable access to learning. The intersection of these indicators is directly related to NC's SiMR. This system is sustainable as the OEC has scheduled the feedback loops necessary to plan ahead for the 2024-2025 school year and can be scaled-up to incorporate additional opportunities determined to be effective (i.e., Regional Meetings, EC Conference, Institutes, etc.) from the current reporting year. SPP/APR data is available annually, therefore, correlating engagement to these indicators may provide an indirect method of evaluating success with this strategy. [Systems framework areas: governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance]

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

Strategy 1: Cohesive Technical Assistance and Professional Development

OEC Activities Guide – Since this strategy was first implemented during the 2023-2024 school year, the OEC will be evaluating its effectiveness with its stakeholders in the Spring of 2024. NC anticipates that its continued work to align its activities and explicitly communicate the alignment with data from the SPP/APR will support local leaders in prioritizing its engagement with the OEC. Overall, this strengthens the targeted assistance component of NC's General Supervision system while leveraging multiple components of the same system (i.e., fiscal, policy, SPP, monitoring, etc.).

NC State Improvement Project (NC SIP) – Based upon the proposed revision to NC's SiMR and the positive collaboration with the Office of Early Learning to embed SiMR strategies in local literacy plans, the OEC is exploring the option of scaling up the SiMR work concurrently with the NC SIP work. The anticipated outcomes are two-fold: (1) increasing the successful completion of Reading Research to Classroom Practice courses by exceptional children teachers along with other project initiatives, thereby improving special education services in reading statewide; (2) leveraging the work of statewide reading initiatives with SiMR improvement strategies emphasizes the integration and coordination of systemic improvement activities and reduces work in isolation while maximizing local teaming structures. This reinforces special education strategies that support involvement in the general curriculum while strengthening specially designed instruction in reading. NC's Indicator 3 data demonstrates the need for improvement for all CWD in reading. Therefore, improvement efforts have the potential to be more cohesive when paired with CWD of color and proficiency in 4th grade reading. In summary, universal support and customized support remains a priority for reading while targeted support can prioritize the performance of the subgroup of CWD of color. PLEASE NOTE: NC has participated in technical assistance calls hosted by OSEP regarding this possibility.

Strategy 2: Effective Teaming Structures

EC Regional Data Teams and Educational Equity Team – In NC's proposed revision to its SiMR, CWD of color and performance on 4th grade reading is more clearly articulated as it relies upon the same denominator for Indicator 3B – Group A Reading. The revision also highlights the significant amount of work necessary to improve outcomes for this subgroup and CWD in general. Since the OEC has participated in a book study regarding disproportionality and achieving equity, the next step is to apply the strategies highlighted in the text to improve our systems-level coaching with LEAs. To accomplish this and since these two teams are internal to the OEC, the application phase has already begun with an internal reflection of our own policies, practices and procedures and the work of each section within the OEC. This teaming structure will be integral to the planning of the OEC Activities Guide for 2024-2025 to ensure our TA/PA aligns with priority areas. Connections to the overall SPP/APR data statewide and problem-solving essential questions for accessing core and high quality specially designed instruction continue to be a priority. Lastly, the teaming structure has the opportunity to expand to problem-solving with NCDPI federal programs and the NC ESSA State Plan, specifically to support LEAs in which special education is the subgroup in need of intervention. The anticipated outcomes are increased systems-alignment, maximizing human capital with cohesive improvement planning, and increasing the performance of CWD.

Strategy 3: Data Systems

Every Child Accountability and Tracking System (ECATS) – The OEC will continue to leverage the data available in a statewide system to progress monitor for high quality individualized education programs with rigorous and appropriately ambitious IEP goals. Desktop auditing for compliance indicators have a connection to missed opportunities for learning (i.e., Indicator 3, 4, 5, 6, 7, 11, 12) to problem-solve the essential questions of where and when specially designed instruction is provided. Further, analyzing local practices of providing services to support and not supplant core instruction is critical to problem-solving for improvement. Therefore, the next steps are to scale up the usage of data readily available to local leaders to progress monitor the health of local programming for CWD. Using these data along with SPP/APR data is anticipated to support the identification of root causes for poor outcomes and provide a data set that can be replicated and considered to evaluate broader district improvement activities over time.

List the selected evidence-based practices implement in the reporting period:

- The relevant EBPs for achieving SiMR targets are:
- Reading Research to Classroom Practice (RRtCP)
 - Language Essentials for Teachers of Reading and Spelling (LETRS)
 - Literacy Instruction Standards
 - Preschool Pyramid Model

Provide a summary of each evidence-based practices.

Reading Research to Classroom Practice (RRtCP) - this course provides educators and administrators with foundational knowledge needed to support students with persistent challenges in reading, including dyslexia. Course utilizes evidence-based strategies along with a comprehensive assessment system to guide instructional planning and delivery.

Language Essentials for Teachers of Reading and Spelling (LETRS) addresses four critical outcomes for effective literacy instruction: understanding the

science of reading, converting research to practice, enhancing teacher effectiveness, and transforming instruction. By understanding the “why” behind science and evidence-based research, educators can effectively know how to aid students in learning to read.”

Literacy Instruction Standards - On October 7, 2021, the North Carolina State Board of Education approved the Literacy Instruction Standards (LIS) as outlined in Section V of SB 387: Excellent Public Schools Act of 2021. The LIS serves as a framework for the development and alignment of curriculum and instruction for all public schools. These standards are defined as a level of quality and equity to be used consistently within core literacy instruction statewide. While the NC Standard Course of Study (NCSCOS) sets student expectations, the LIS and their associated instructional practices set expectations for teaching literacy. The LIS are organized by grade-band and can be used to ensure that all teachers across North Carolina have a common understanding and delivery of literacy instruction.

Preschool Pyramid Model - Pyramid Model - This project is designed to support improved child outcomes for young children with disabilities and to increase opportunities for instruction in the least restrictive environment (LRE). The Pyramid Model framework was originally developed by the Center on the Social and Emotional Foundations for Early Learning and is supported by the National Center for Pyramid Model Innovations (<https://challengingbehavior.org/>), an OSEP-funded technical assistance center. This tiered framework of evidence-based practices promotes healthy social-emotional development for ALL children ages birth through five. In North Carolina, the Pyramid Model in Preschool (PM-P) project promotes strategies to help school leaders and teaching teams build positive relationships with and among children by creating supportive learning environments, teaching children to understand and express their emotions, and use problem solving skills. The PM-P aligns with school-age Positive Behavior Intervention and Supports (PBIS), which is integrated in NC’s MTSS framework. The rationale for this EBP as it relates to 4th grade reading outcomes for SWD is that kindergarten readiness—which the PM-P effectively promotes—is a strong predictor of early elementary literacy success. Further, PM-P is strongly aligned with and supports the LETRS professional learning implementation as adopted by NC. In 2022-2023, we used ESSER III funding to initiate a Pyramid Model in Kindergarten (PM-K) with support from Vanderbilt University’s Hemmeter Lab (<https://lab.vanderbilt.edu/hemmeter-lab/>). This framework is in the research phase and includes teaching practices that are Pyramid Model aligned and appropriate for kindergarten settings. One LEA began implementation with five LEAs slated to begin in 2023-2024.

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.

Reading Research to Classroom Practice (RRtCP) - improved instructional efficacy in reading leads to greater student engagement and success in early elementary grades, increasing likelihood of CWD scoring at or above proficient on 4th grade reading state assessment.

LETRS - When general education and EC teachers learn and apply the information contained in LETRS and when a supportive context is in place, such substantive professional development has been shown to have powerful beneficial effects on student learning. Overall achievement levels increase and fewer children experience reading difficulties. Students—and especially students with disabilities—experiencing instruction based on science of reading have increased likelihood of scoring at or above proficient on 4th grade reading state assessment

Literacy Instruction Standards – The LIS are a set list of literacy instruction practices that have the potential to positively impact students’ literacy achievement in K-12. New literacy research could modify and/or add to the instructional practices listed.

Preschool Pyramid Model (PPM) – The Pyramid Model has been evaluated through multiple research projects and has shown evidence for promoting young children’s social and emotional skills and decreasing child challenging behavior; PM-P implementation increases the likelihood of kindergarten readiness for SWD and creates conditions favoring SWD access to appropriate literacy learning environments. The PM-K framework is new and still in the research phase with strong evidence of success. NC partners with Hemmeter Lab, the lead research organization to support implementation.

The strategies listed above are intended to impact the SiMR by improving teacher/provider practices and child outcomes.

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

The SiMR-aligned literacy EBPs being implemented in NC/listed above include fidelity monitoring as follow:

Reading Research to Classroom Practice (RRtCP) - RRtCP Observation and Teacher Reflection Tool used at all NC SIP sites The RRtCP Classroom Fidelity Observation can be used as a fidelity observation tool or self-reflection tool. All NCSIP PSU partners are required to submit at least 2 external observations of at least 2 eligible teachers per year. An eligible teacher is defined as someone who has successfully completed RRtCP or LETRS (Units 1-8) prior to the first observation. To be an external observer, they should, at a minimum, have successfully completed RRtCP, LETRS(Units 1-8) or All Leaders: FoM and RRtCP Overview.

LETRS and Literacy Instruction Standards – K-5 Literacy Look-fors Toolkit is designed to support school leaders (e.g. instructional coaches, principals, assistant principals, etc.) conduct productive learning walks and coaching cycles to observe alignment to the NC Literacy Instruction Standards and accompanying research-based practices. The tool includes a pre-walkthrough conversation guide, Look-For indicators, a post-walkthrough reflection guide, and a post-walkthrough conversation guide; going forward, use will be actively supported in the 40 SiMR Support PSUs and universally endorsed for all PSUs

Preschool Pyramid Model – The research-based Teaching Pyramid Observation Tool (TPOT) is used by all PM-P sites and provides practitioner coaches specific and objective information regarding the implementation of Pyramid practices in preschool classrooms. The Teaching Pyramid Observation Tool in Kindergarten (TPOT-K) is in the research phase of development and is used by all PM-K pilot sites and provides practitioner coaches specific and objective information regarding the implementation of Pyramid practices in kindergarten classrooms.

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.

When recalculating NC’s SiMR for its proposal to change the baseline and targets for CWD of color in reading, the following data reinforces that NC has much work to do continue to improve results in reading:

- Indicator 3b: FFY2020 (15.07%), FFY2021 (18.42%) and FFY2022 (19.61%) demonstrate that at or above proficiency on grade level standards by CWD is improving, though slowly, and NC has met the targets it established for this indicator. The EBDs described above were either already implemented or newly implemented during this time period. The data suggests that when combined with effective teaming structures, these promising practices are likely to continue increasing outcomes for CWD.

- Indicator 17: When recalculating percentage of CWD of color at or above proficiency on grade level standards using FFY2022 proposed revision to reestablish the baseline for 2020, CWD of color at or above proficiency on grade level standards for 4th grade reading was 4.42% (FFY2020). Scaling

up the improvement strategies listed above, paired with a SiMR data set more aligned with Indicator 3b, NC expects the comparison of subgroups to be more clearly aligned for targeted intervention with continued use of its current EBPs.

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

Reading Research to Classroom Practice (RRtCP) - Due to significant improvements in data collection methods, NC SIP staff and the evaluators will monitor real time data collection for events, participant lists, course evaluations, and fidelity observations with a quarterly analysis, and begin investigating ways to track longitudinal data of student outcomes of teachers who have participated in RRtCP & FoM across the state. Anticipated outcomes for this increased analytic power are more targeted OEC supports for participating LEAs and increased accuracy of problem-solving at the LEA, school, and classroom level. As a result, reading proficiency rates for SWD should increase.

-LETRS – complete statewide 3-cohort training model implementation in Spring 2024 Anticipated outcomes for this full implementation of this EBP are for all students to meet grade-level reading proficiency in grades K-4.

-Literacy Instruction Standards (LIS) – create/disseminate crosswalks with LIS and High-Leverage Practices, explicit instruction, and specially designed instruction principles. Anticipated outcomes for initial implementation of this EBP are for all students to meet grade-level reading proficiency in grades K-4.

-Preschool Pyramid Model – We will continue to review and update content and trainer materials to include new research and clarification. Consideration will be given to lessons learned from the impact of the pandemic, workforce needs, a reported increase in developmental needs and challenging behaviors as well as content delivery and ongoing support design. With a shift to an internal team, we are also intentionally designing our state implementation team to include partners from related teams including the Office of Early Learning, the Office of Federal Programs, the Office of Career and Technical Education and the Integrated Academic and Behavior Systems team. We will also ensure our state implementation team seamlessly supports PM-P and PM-K implementation with intentional effort towards sustaining and growing our PM-K project. Further, we will continue to build and leverage statewide implementation support with our cross-sector NC State Leadership Team. Anticipated outcomes for full implementation of this EBP are improved readiness and social skills, and decreased problem behaviors for SWD entering kindergarten, which will increase opportunities to access early elementary literacy instruction, curriculum, and environments.

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.

During the FFY2021 APR clarification period and in consultation with the IDC, NC reviewed its SiMR to determine whether it clearly articulated a multi-year plan for improving results for CWD and whether the methodology selected reflects what is measured in the SPP/APR data table. NC also reviewed: (1) the effectiveness of its SiMR customized support in comparison with SiMR-Support PSUs and universal support statewide; (2) collective impact on the number of students potentially benefiting from customized support in SiMR-Support PSUs; (3) transparency of the data to stakeholders when reporting on “gap-closing growth”; and (4) systems-alignment with improving literacy statewide by embedded SiMR improvement strategies within district school improvement activities.

Previously, NC reported the number of CWD of Color in SiMR Support LEAs Who Scored at Career and College Ready on 4th Grade Reading State Assessment and divided that number by the total CWD of Color in SiMR Support LEAs Who Took the 4th Grade Reading State Assessment to yield a percentage proficient. Had NC continued this methodology for FFY2022, only 59 CWD of color out of 1125 CWD of color in SiMR Support LEAs would have been proficient. Further, the calculation used was not an accurate calculation of closing the proficiency gap. It only represented the percentage of the CWD of color that were considered proficient (5.24%) when compared to the same subgroup (CWD proficient). As a result, NC’s targets were not commensurate with the requirements in the APR measurement table, did not accurately measure what was intended by improving outcomes for CWD of color in 4th grade reading, and did not reflect improvement commensurate with the investment of statewide resources focused in this area.

During FFY2022, 40 LEAs opted in as SiMR-Support partners from a group of 97 invited LEAs with <25% of all students scoring in the College and Career Ready (CCR) on the 2020-21 4th grade reading state assessment. This subset only represents approximately 12% of all LEAs. When coupled with NC’s Indicator 3B target (18.83%) for CWD scoring at or above proficient against grade level academic standards in 4th grade reading, the relative impact for improvement overall was low. Therefore, NC is not choosing to use a subset of the population (SiMR Support PSUs) in its SiMR reporting for FFY2022 in favor of expanding focus statewide for increasing proficiency in 4th Reading for all CWD of color.

NC’s review of the system analysis activities yielded the following: (1) over time and commensurate with staff turnover in PSUs, the number of SiMR-support PSUs voluntarily engaging in customized support decreased (96 originally meeting selection criteria to 40 currently); (2) sessions with SiMR support PSUs generally resulted in affirming outcomes from universal support not necessarily yielding new or different strategies; (3) gap-closing growth terminology was challenging to explain and visually represent to stakeholder groups as it was not a clear numerator and denominator one-step calculation; (4) partnership with the NC Office of Early Learning (OEL) yielded successful systems-alignment activities as SiMR strategies for improving reading were easily embedded in or enhanced by merging with district literacy plans and improvement activities.

At this time, NC is revising its SiMR calculation to measure the desired outcome more accurately. Given the desired outcome, improving proficiency for CWD of color in 4th grade reading, has not changed, improvement strategies will continue. Over the next reporting year, NC will review and revise its data collection for EBD to ensure that metrics are in alignment with the revised SiMR so that reporting progress with stakeholders is consistently described and analyzed.

Section C: Stakeholder Engagement

Description of Stakeholder Input

In FY2022, OEC consultants and leadership met with both internal and external stakeholders on multiple occasions to review progress on all indicators. Stakeholder groups include representation from across the NCDPI, as well as, The Council on Educational Services for Exceptional Children PSU EC Administrators, OSEP funded TA centers and parent advocacy groups. External feedback is routinely solicited from the EC Directors’ Advisory Council, the NC Council of Administrators of Special Education, national technical assistance centers, and content experts at state institutions of higher education (IHEs).

During FFY2021 and FFY2022, stakeholders were provided updates regarding SiMR support PSUs. While the number of external stakeholders varied and were few in number, NC observed that little to no questions or feedback was given regarding SiMR targets and data. NC hypothesizes that this could be attributed to the complexity of the current data calculation as stakeholders have consistently supported the overall focus on CWD of color and improving literacy. In the most recent stakeholder meeting, OEC staff shared preliminary data expected to be reported in the FFY2022 APR. Within the

discussion, OEC staff raised concern about the proficiency of all CWD of color in 4th grade reading and the declining numbers of SiMR support PSUs engaged in customized activities. Stakeholders did not raise questions or concerns with the consideration for expanding the SiMR to a statewide focus on improving proficiency for CWD of color in 4th grade reading and refining our data collection to display increasing percentage proficient.

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

The OEC leverages its partnerships with parent advocacy groups, its parent training and information center (ECAC), our parent advisory council, and local school leaders to gather input on the SSIP. Opportunities for engagement are customized to the audience but maintain the same purpose across settings. The following examples describe the composition and function of the varied stakeholder groups from which the OEC gathers input.

Ongoing EC Director communications in the form of monthly webinars, weekly emails, Directors Advisory Council, and quarterly regional EC Director meetings keep local EC leaders engaged in SSIP implementation (e.g., SiMR Self-assessment process) throughout the year.

Council on Educational Services for Exceptional Children - advises the NC State Board of Education on unmet needs of SWD and in development/implementation of policies related to coordination of services for SWD. The Council also advises the SBOE on developing evaluations, reporting on data, and developing corrective action plans to address findings in federal monitoring reports. Currently consists of 25 members - 20 appointees and 5 ex-officio. Members are appointed for 4 -year terms by the Governor, President Pro Tem of the Senate, Speaker of the House, and the SBOE. Appointees represent SWD from the ranks of parents, teachers, higher education, public and private schools, business/vocational community, and charter schools. A majority of representatives are persons with disabilities or parents of children with disabilities. The SPP team brings data analyses, proposals, reports, and resources to the Council (many of which are requested by the Council) for input quarterly.

Parent Liaison - employed by OEC; collaborates with community partners; develops/posts a parent newsletter 2x/mo; shares announcements from partner agencies; hosted Family Engagement webinar series to build local capacity for engaging families, specifically through parent liaison positions and special education advisory councils.

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

NO

Additional Implementation Activities

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

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

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

The newest identified barrier was the method in which we collected data for this indicator and shared with stakeholders. The steps for addressing this barrier have been described in the previous components for this indicator.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must ensure that its SiMR reflects what is being measured in the SPP/APR data table.

Response to actions required in FFY 2021 SPP/APR

NC's SiMR was amended to include the following:

NC will increase the percentage of CWD of color determined at or above proficient when compared to all CWD with a valid proficiency score against grade level academic standards in 4th grade reading.

NC is requesting that its baseline year for 2020 be revised to report the percentage of CWD of color determined at or above proficient on grade level academic standards in 4th grade reading when compared/divided with all CWD with a valid proficiency score on grade level academic standards in 4th grade reading. Then, all targets will be in alignment to show increasing percentages to accurately report annually the improvement for CWD of color.

17 - OSEP Response

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:

Khalilah O'Farrow-Boulware

Title:

Consultant for IDEA Fiscal and Systems Support

Email:

khalilah.ofarrow@dpi.nc.gov

Phone:

984-236-2641

Submitted on:

04/24/24 5:44:54 PM

Determination Enclosures

RDA Matrix

North Carolina 2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
62.50%	Needs Assistance

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	13	65.00%
Compliance	20	12	60.00%

(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	98%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	23%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	91%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	24%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	87%	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	98%	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	91%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	19%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	93%	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	19	1
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	75	1

**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.	Not Valid and Reliable	N/A	0
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.	4.26%	N/A	2
Indicator 11: Timely initial evaluation	71.54%	NO	0
Indicator 12: IEP developed and implemented by third birthday	76.91%	YES	1
Indicator 13: Secondary transition	61.67%	YES	0
Timely and Accurate State-Reported Data	92.31%		1
Timely State Complaint Decisions	95.93%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

(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 $\geq 5\%$ and $< 10\%$ for Indicators 4B, 9, and 10, and $\geq 90\%$ and $< 95\%$ for Indicators 11, 12, and 13.

**Data Rubric
North 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	0	0
3C	0	0
3D	0	0
4A	1	1
4B	0	0
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	17
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) =	22

(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	1	3
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	21
Grand Total (Subtotal X 1.23809524) =	26.00

(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	22
B. 618 Grand Total	26.00
C. APR Grand Total (A) + 618 Grand Total (B) =	48.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator) (3) =	0.9231
E. Indicator Score (Subtotal D x 100) =	92.31

(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 *EDFacts* files or the entire *EMAPS* survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EDFacts Files/ EMAPS 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 <i>EMAPS</i>	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in <i>EMAPS</i>	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 *EDFacts* aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in *EMAPS*. 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

North 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.	233
(1.1) Complaints with reports issued.	172
(1.1) (a) Reports with findings of noncompliance	126
(1.1) (b) Reports within timelines	161
(1.1) (c) Reports within extended timelines	4
(1.2) Complaints pending.	1
(1.2) (a) Complaints pending a due process hearing.	1
(1.3) Complaints withdrawn or dismissed.	60

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	143
(2.1) Mediations held.	104
(2.1) (a) Mediations held related to due process complaints.	72
(2.1) (a) (i) Mediation agreements related to due process complaints.	54
(2.1) (b) Mediations held not related to due process complaints.	32
(2.1) (b) (i) Mediation agreements not related to due process complaints.	21
(2.2) Mediations pending.	15
(2.3) Mediations withdrawn or not held.	24

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	116
(3.1) Resolution meetings.	19
(3.1) (a) Written settlement agreements reached through resolution meetings.	7
(3.2) Hearings fully adjudicated.	4
(3.2) (a) Decisions within timeline (include expedited).	4
(3.2) (b) Decisions within extended timeline.	0
(3.3) Due process complaints pending.	31
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	81

Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)

(4) Total number of expedited due process complaints filed.	7
(4.1) Expedited resolution meetings.	1
(4.1) (a) Expedited written settlement agreements.	0
(4.2) Expedited hearings fully adjudicated.	0
(4.2) (a) Change of placement ordered	0
(4.3) Expedited due process complaints pending.	2
(4.4) Expedited due process complaints withdrawn or dismissed.	5

State Comments:

State Complaints - 1 pending state complaints was set aside for due process and parent voluntarily withdrew the due process on October 3, 2023 and the report will be issued on or before November 20, 2023. Mediation - Since 6/30/22 15 mediations were held: 7 successful, 5 unsuccessful, 3 mediations were cancelled. Due Process - after 6/30/2023 - 3 final decisions were issued and 22 were voluntary dismissed and withdrawn.

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:

North 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/>



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

Final Determination Letter

June 21, 2024

Honorable Catherine Truitt
State Superintendent
North Carolina Department of Public Instruction
6301 Mail Service Center
Raleigh, NC 27699

Dear Superintendent Truitt:

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 North Carolina needs assistance in implementing the requirements of Part B of the IDEA. This determination is based on the totality of North 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.

North 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 North 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 North Carolina's SPP/APR and other relevant data by accessing the EMAPS SPP/APR reporting tool using your North Carolina-specific log-on information at <https://emaps.ed.gov/suite/>. When you access North 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 North Carolina is required to take. The actions that North 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) North Carolina's RDA Matrix;
- (2) the HTDMD [link](#);

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- (3) "2024 Data Rubric Part B," which shows how OSEP calculated North 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 North Carolina's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, North 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.

North 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 North 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 North Carolina to work with appropriate entities. In addition, North 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 North 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 North Carolina to access technical assistance related to those results elements and compliance indicators for which it received a score of zero. North Carolina must report with its FFY 2023 SPP/APR submission, due February 1, 2025, on:

- (1) the technical assistance sources from which North Carolina received assistance; and
- (2) the actions North Carolina took as a result of that technical assistance.

As required by IDEA Section 616(e)(7) and 34 C.F.R. §300.606, North 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, North 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 North Carolina on the targets in the SPP/APR as soon as practicable, but no later than 120 days after North Carolina's submission of its FFY 2022 SPP/APR. In addition, North Carolina must:

- (1) review LEA performance against targets in the State's SPP/APR;

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- (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, North 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 North 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 North Carolina’s efforts to improve results for children and youth with disabilities and looks forward to working with North 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: North Carolina Director of Special Education

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