

# **State Performance Plan / Annual Performance Report: Part B**

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

**For reporting on  
FFY 2021**

**North Carolina**



**PART B DUE February 1, 2023**

**U.S. DEPARTMENT OF EDUCATION  
WASHINGTON, DC 20202**

# Introduction

## Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for 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

#### Additional information related to data collection and reporting

NC uses the term Public School Unit (PSU) to represent Local School Agency (LEA).

#### Number of Districts in your State/Territory during reporting year

330

#### General Supervision System:

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

Under its general supervision authority, the NCDPI-Office of Exceptional Children (OEC) is required to monitor the implementation of all special education programs for all eligible students with disabilities in the state. The federal Office of Special Education Programs (OSEP) monitors the OEC to ensure that processes and procedures are in place to meet the state's general supervision requirements. To comply with the requirements of the Individuals with Disabilities Education (IDEA) Act, the OEC has reviewed the mechanisms for monitoring and developed a comprehensive general supervision system.

The system:

- Supports practices that improve educational results and functional outcomes for children and youth with disabilities;
- Uses multiple methods to identify, correct, and verify correction of noncompliance as soon as possible but no later than one year after noncompliance is identified; and
- Utilizes mechanisms to encourage and support improvement and enforce compliance.

#### COMPONENTS OF NORTH CAROLINA'S GENERAL SUPERVISION SYSTEM

There are eight components of the General Supervision System, including:

- 1) State Performance Plan (SPP) and Annual Performance Report (APR)
- 2) Policies, Practices, and Procedures
- 3) Dispute Resolution System
- 4) Data Collection
- 5) Policy Monitoring Activities
- 6) Improvement, Correction, Incentives, and Sanctions
- 7) Targeted Technical Assistance
- 8) Fiscal Management

Each component, while separate in its description, connects to form a comprehensive system. Through the triangulation of these activities the OEC complies with federal regulations. Descriptions of the components are included in the North Carolina Department of Public Instruction Office of Exceptional Children General Supervision Position Paper that is posted on the division website (<https://www.dpi.nc.gov/media/11981/open>).

#### Technical Assistance System:

**The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.**

For the purposes of this report, North Carolina has combined the information about its Technical Assistance/Support and Professional Development Systems. The OEC organized its infrastructure to provide technical assistance/support and professional development to Public School Units (PSUs) in various ways through multiple teams, committees, groups, and individuals. Certain technical assistance (e.g. responding with information to requests by phone, bi-monthly EC Directors' webinars or on-site at Regional EC Directors quarterly meetings) and professional development (Annual EC Directors' Institutes, Annual Conference on Exceptional Children for more than 3,000 participants, multi-day and weeklong Summer Institutes) and other topical institutes have been consistently provided by the OEC over the years.

When the OEC developed its Strategic Vision, it reviewed its processes for technical assistance and professional development. As a result, some specific needs were identified, including a need for:

- Common processes for TA requests, follow up, and impact assessment
- Refinement of systems to use/align tiered systems of support
- Fidelity measures for all initiatives
- Stronger alignment with grade-level standards
- Additional support for developing and providing Specially Designed Instruction and progress monitoring for training, implementation, fidelity checks and evaluation of effectiveness
- Professional Development aligned to identified state and local priorities
- Program implementation, including TA, coaching, and program evaluation
- Relationship to State Board of Education Goals and the OEC Strategic Vision
- Use of SiMR-Self Assessment (SiMR-SA) data to drive universal, tailored, and customized support

The OEC maintains a tiered system of technical assistance and professional development by including universal, tailored, and customized support for PSUs. With a clearly articulated and understood definition of universal supports to PSUs, the OEC can effectively and sustainably leverage the existing

support system to the greatest extent possible.

The revised SiMR-SA process places an emphasis on data-driven decision making, and provides information that is both useful to PSUs in supporting their own improvement and providing the OEC the information needed to provide more customized support and identify statewide trends/needs for technical assistance. The SiMR Self-Assessment process does not replace required monitoring activities under General Supervision; rather, it is complementary and non-evaluative by design to support PSUs in reflecting on their strengths and needs. Through the North Carolina Department of Public Instruction's (NCDPI) partnership with the National Implementation Research Network (NIRN) and the State Implementation and Scaling-up of Evidence-based Practices Center (SISEP), there was an emphasis on ensuring that implementation science informed the work of the entire agency. This included alignment of any new work with the OEC strategic plan and other agency priorities.

The SiMR-SA process provides more accessible and actionable data to PSUs; a tool for reviewing and assessing current practice; and a structure for problem identification, priority setting, solution identification and selection, improvement planning, and installation. This information describing how a PSU is working to implement evidence-based practices facilitates the OEC's identification of the specific types and levels of support a PSU requires. Information gleaned from OEC reviews of the SiMR-SA data and improvement activities selected by the PSUs will drive how the OEC allocates time and resources to support PSUs through technical assistance and professional development. With the revised SiMR-SA, the OEC has been more systematic in structuring a continuum of support for PSUs -- providing universal support to all PSUs and customized support to those PSU with student outcome data that demonstrates more intensive needs. Comprehensive professional development (e.g., training and coaching) and technical assistance at the intensity level needed to address the PSUs compliance and/or implementation needs will ultimately improve outcomes for students with disabilities. With the implementation of the SiMR-SA process, the OEC will continue to use the results to drive support for each PSU.

The OEC provides universal and customized support through regional staff and teaming structures. The OEC expects ongoing system refinements to result in improved provision of services for PSUs, strengthened systems of support for students and families, and improved outcomes for students with disabilities.

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

In an effort to improve data quality in North Carolina, the OEC consultants participated with the IDEA Data Center (IDC) to take part in the State Performance Plan/Annual Performance Report (SPP/APR) Data Quality Peer Group (DQPG), the IDC Cross-Role Data Quality Peer Group, the IDC Data Manager Data Quality Peer Group, the annual IDC Interactive Institute in Nashville, TN, the IDC SPP/APR Summit in Lexington, KY, as well as participated in monthly Special Education Data Manager Accountability Group (SEDMAG) calls. OEC Consultants collaborated with the Center for Learning and Development - SRI Education on the Child Outcomes Local Data Use Cohort Cross-State Collaborative to improve outcomes for preschool students in NC. OEC Special Programs and Data staff participated and were copresenters at the 2022 Improving Data, Improving Outcomes (IDIO) Conference as part of the 619 Data Linking Cohort led by DaSY. As a result of participating in these collaboratives, North Carolina has increased technical assistance to PSUs around Indicators 11, 12, 8 and 14 and has seen positive outcomes from the additional support specifically in Indicators 11 and 12 in our increased state rate and in Indicators 8 and 14 in the engagement of districts in the new TA opportunities. All of these indicators are still critically in need of support from the decline that NC experienced with COVID-19, however we are optimistic about the gains in this reporting year.

In addition, OEC Consultants participated with the National Center for Systemic Improvement (NCSI) Cross-State Learning Collaboratives (CSLC). North Carolina also included NCSI and IDC staff on external stakeholder meetings, as well as NC State Systemic Improvement Plan (SSIP) work groups and requested feedback and support around the SPP/APR. Actions taken as a result of this technical assistance include: refinements to Indicator 17 LEA/SiMR Self-Assessment phases and activities, including increased support to LEAs related to data access, analysis, and sharing with local stakeholders; continuous improvement of monitoring protocols for Indicators 4, 9, 10, and significant disproportionality; and, significantly enhanced collaboration with general education offices within NCDPI, including Accountability, Academic Standards, Regional Support, and the Office of Early Learning, which has modeled and supported local general and special education collaborations.

Participation in the NCSI Results Based Accountability Collaborative has contributed to the analysis of the State's General Supervision System with efforts taken to streamline program and fiscal monitoring activities.

North Carolina has also participated in activities facilitated by CADRE to review and revise its dispute resolution system using the self-assessment provided by the Office of Special Education Programs. Efforts have been made to ensure dispute resolution mechanisms continue to be accessible and internal procedures for investigating state complaints are clear and concise.

### **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.**

Please see the Technical Assistance System Section for North Carolina's combined information about its technical assistance/support and professional development systems.

### **Broad Stakeholder Input:**

**The mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 17, the State's Systemic Improvement Plan (SSIP).**

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 involvement from introduction to all Part B results indicators (y/n)**

YES

**Number of Parent Members:**

15

## **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.**

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants met with both internal and external stakeholders twice monthly to review progress on Indicators, specifically Indicator 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, Technical Assistance partners and Parent Advocacy groups.

The NCDPI OEC staff engaged parents from the Council on Educational Services for Exceptional Children, the State Advisory Panel and Exceptional Children Assistance Center (ECAC) by sharing the invitations to monthly stakeholder meetings. The meeting invitations were also sent on the monthly parent listserv from the OEC parent liaison.

## **Stakeholder Engagement in Selecting New SiMR Targets and Improvement Strategies**

North Carolina started a new 5-year cycle of our SPP/APR in February 2022. The OEC partnered with stakeholders--especially parents of students with disabilities--to set the new indicator targets and write our new plan. Further, several parents of SWD are contributing members on the OEC's three SPP work groups: Data Literacy, Research-informed Practices, and Stakeholder and Family Engagement.

Family Support representatives included information about the SPP/APR Stakeholder meetings in the Parent to Parent Family Support Network of the High Country's newsletter in our section on "Your voice matters". They also emailed to our total list Services and added it to their Facebook page and sent out to Family Support Network (FSN) of NC, FSN of Central Carolina, FSN of Eastern NC, Inc., FSN of Greater Forsyth, FSN of Northeastern NC, FSN of Region A, FSN of Southern Piedmont, FSN of the Greater Triangle, FSN of Trusted Parents, FSN of Western NC and FSN/HOPE so that they each could send out to their families.

Parent stakeholders who attended meetings participated in all activities, including reviewing the historical data, considering baselines (where applicable) and targets and providing feedback on improvement strategies. Parents tended to be the more vocal, interested stakeholders and allowed for rich discussion about North Carolina data.

## **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.**

To engage diverse groups of parents, each web meeting offered closed captioning in any language, Spanish speaking translators, as well as American Sign Language Interpreters. Staff took time to walk through and explain each topic addressed, provide trend data in easy to read charts and allow time and activities for discussion. This allowed stakeholders to understand the data and see where North Carolina has been and create a strong plan for where we want to go in the future with the new SiMR. Time was made available at each meeting to encourage discussion and verbal feedback on outcomes for students with disabilities and parent stakeholders reported in evaluations of the meetings that they felt included and their voices were heard when providing feedback during the sessions.

## **Soliciting Public Input:**

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

The OEC maintains ongoing EC Director communications in the form of bi-monthly webinars, weekly updates in the form of an emailed newsletter, Directors Advisory Council meetings, and quarterly regional EC Director/Charter Coordinator meetings that keep local EC leaders engaged throughout the year and strongly encourages all PSU leaders to share these communications with their district and school leaders. The OEC also engaged our state 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) and Parent Advisory Council in the analysis and development of improvement strategies and evaluating progress.

## **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 staff created a website to share all timelines, meeting information, data, improvement strategies and stakeholder feedback results with the public. This website is updated at least monthly with new information as meetings are held and data and resources are gathered. The website can be accessed at (<https://www.smcore.com/kt1ru>). In addition to the website, OEC staff created and shared data dashboards to assist PSUs in their data analysis for the SiMR Self-Assessment.

## **Reporting to the Public**

**How and where the State reported to the public on the FFY 2020 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 2020 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 revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.**

The North Carolina Department of Public Instruction (NCDPI), OEC reported to the public on the progress and/or slippage in meeting the measurable and rigorous targets of its SPP/APR. The SPP/APR was posted on the NCDPI OEC web page and distributed to the PSUs. In addition, it was made available to the media. The Office of Exceptional Children also reported on the performance of each PSU on the targets in the SPP/APR by June 1, 2022. The reports were posted on the Office's website, and a link to the reports was provided to the PSUs, and distributed to local and regional media.

([https://bi.nc.gov/t/DPI-ExceptionalChildren/views/ECAnnualReport\\_IndicatorsDashboard\\_LEADeterminations/ReportDashboard?:showAppBanner=false&:display\\_count=n&:showVizHome=n&:origin=viz\\_share\\_link](https://bi.nc.gov/t/DPI-ExceptionalChildren/views/ECAnnualReport_IndicatorsDashboard_LEADeterminations/ReportDashboard?:showAppBanner=false&:display_count=n&:showVizHome=n&:origin=viz_share_link) )

## **Intro - Prior FFY Required Actions**

None

## **Intro - OSEP Response**

The State's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2022 determination letter informed the State that it must report with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

OSEP issued a monitoring report to the State on May 14, 2021. OSEP is reviewing documents the State has already submitted and will review any additional documents the State wishes to submit that address the outstanding findings. Longstanding noncompliance (from unresolved findings issued by OSEP during and prior to FFY 2020) may be a factor in the Department's 2024 determinations.

## **Intro - 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.

# 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 EDFacts 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 2021 SPP/APR, use data from 2020-2021), and compare the results to the target. Provide the actual numbers used in the calculation.

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	77.08%

FFY	2016	2017	2018	2019	2020
Target >=	80.00%	80.00%	80.00%	80.00%	77.02%
Data	68.90%	70.32%	69.06%	72.51%	83.92%

**Targets**

FFY	2021	2022	2023	2024	2025
Target >=	78.27%	79.52%	80.77%	82.02%	83.27%

**Targets: Description of Stakeholder Input**

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	9,172
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	628

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	49
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	1,737

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
9,172	11,586	83.92%	78.27%	79.16%	Met target	No Slippage

**Graduation Conditions**

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

All public high school students must meet minimum state graduation requirements to earn a diploma and graduate. These graduation requirements are considered the Future-Ready Course of Study (FRC) requirements and prepare students for post-secondary success.

All students must earn at least 22 credits in the FRC to graduate from high school. The FRC graduation requirements ensure that a student is prepared for life and whatever pathway they choose after they graduate, workplace, colleges/university or the military. Below are the specific course requirements.

The Occupational Course of Study 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. Below are the specific course requirements.

Although the state requires a designated number of courses and credits for students to graduate high school, local school districts and other public school units may require additional courses and credits to graduate. Families and students are strongly encouraged to check with their high school to determine if their district and/or school have additional requirements for students to earn a high school diploma. For more information on graduation in North Carolina see the following link. (<https://www.dpi.nc.gov/districts-schools/high-school-graduation-requirements>)

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

NO

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

In calculating data and setting baseline and targets for Indicator 1, NC recognized that graduation for this school year would decrease significantly due to COVID-19 and the governor's order to close schools in March of 2020 and accept grades in the first quarter of the second semester as final. In the FY2020 SPP/APR, NC saw a 4.76% decrease in graduation percentage as students came back to school both in-person and virtual in SY 2020-21.

**1 - Prior FFY Required Actions**

If the State chooses to revise its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table. Additionally, the State must provide targets through FFY 2025 and ensure that its FFY 2025 target reflects improvement over its baseline data.

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

NC updated the Baseline year from the FY2020 SPP/APR to 2019 based on the SY 2018-19 data for Indicator 1 during the clarification period. This update was accepted.

**1 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

**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 EDFacts file specification FS009.

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

#### 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 data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), 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.

Use the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data.

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
2019	17.07%

FFY	2016	2017	2018	2019	2020
Target <=	3.50%	3.50%	3.00%	3.00%	18.75%
Data	4.07%	3.95%	4.02%	3.73%	11.44%

### Targets

FFY	2021	2022	2023	2024	2025
Target <=	17.07%	16.62%	16.17%	15.72%	15.27%

### Targets: Description of Stakeholder Input

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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
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SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	628



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**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,737	11,586	11.44%	17.07%	14.99%	Met target	No Slippage

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

The definition for dropout in North Carolina is an individual who: 1) was enrolled in school at some time during the previous school year; and 2) was not enrolled at the beginning of the current school year; and 3) has not graduated from high school or completed a State or district-approved educational program; and 4) does not meet any to the following exclusionary conditions: a) transfer to another public school district, private school, or State or district-approved educational program (including correctional or health facility programs); b) temporary absence due to suspension or school-excused illness; or c) death.

**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 calculating data and setting baseline and targets for Indicator 2, NC recognized that drop out for this school year would increase significantly due to COVID-19 and the governor's order to close schools in March of 2020 and accept grades in the first quarter of the second semester as final. From the FY2020 SPP/APR, NC saw a 3.55% increase in dropout percentage as students came back to school both in-person and virtual in SY 2020-21.

**2 - Prior FFY Required Actions**

If the State chooses to revise its baseline in the FFY 2021 SPP/APR, the State must ensure that the data in the Historical Data table are consistent with the data in the SPP/APR Data table. Additionally, the State must provide targets through FFY 2025 and ensure that its FFY 2025 target reflects improvement over its baseline data.

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

NC updated the Baseline year from the FY2020 SPP/APR to 2019 based on the SY 2018-19 data for Indicator 2. The targets were calculated based on this data and approved by stakeholders. In initial calculations, data from NC student information system was used which were slightly off from final EdFacts submitted data. This correction has been made using 2018-19 data File Spec 009 from EdFacts.

**2 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State revised its targets for this indicator, and OSEP accepts those targets.

**2 - Required Actions**

## Indicator 3A: Participation for Children with IEPs

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

### Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts 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	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%

**Targets: Description of Stakeholder Input**

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

04/05/2023

**Reading Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	16,156	15,778	13,510
b. Children with IEPs in regular assessment with no accommodations	6,060	4,753	4,218
c. Children with IEPs in regular assessment with accommodations	8,740	9,284	7,534
d. Children with IEPs in alternate assessment against alternate standards	1,191	1,299	1,013

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

04/05/2023

**Math Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	16,157	15,776	5,284
b. Children with IEPs in regular assessment with no accommodations	5,349	4,018	1,292
c. Children with IEPs in regular assessment with accommodations	9,448	10,002	2,588
d. Children with IEPs in alternate assessment against alternate standards	1,183	1,291	820

\*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.

**FFY 2021 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	15,991	16,156	93.07%	95.00%	98.98%	Met target	No Slippage
B	Grade 8	15,336	15,778	88.95%	95.00%	97.20%	Met target	No Slippage
C	Grade HS	12,765	13,510	88.89%	95.00%	94.49%	Did not meet target	No Slippage

**FFY 2021 SPP/APR Data: Math Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	15,980	16,157	92.91%	95.00%	98.90%	Met target	No Slippage
B	Grade 8	15,311	15,776	88.96%	95.00%	97.05%	Met target	No Slippage
C	Grade HS	4,700	5,284	96.60%	95.00%	88.95%	Did not meet target	Slippage

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

The reduction in students participating in FY2021 is due to lack of testing in 2019-20 due to COVID. Many students who did not test in 2019-20 were in 11th grade in 2021-22 and do not have a test on record. North Carolina uses a cohort based system in order to bank test scores from prior years depending on the student. For students who would have taken their 10th grade math assessment in 2019-2020 but opted out due to the waiver, we did not have a score for them in 11th grade, resulting in the 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.**

Public reports of assessment data can be found here under the heading End of Year Report - 2021-22 - Assessment (<https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#EndofYearReports-2824>)

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

North Carolina saw an increase in participation from the FY2020 data which was significantly impacted by COVID due to school closures and waivers in 2019-20. NC is still seeing the impact of the closures and waivers on high school data due to the use of banked scores as explained under reason for slippage.

**3A - Prior FFY Required Actions**

None

**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 participating in regular assessments, and the number of those children who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments, and, if any, the number of children with disabilities 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 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.

## 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 EDFacts 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	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	16.12%	18.83%	21.54%	24.25%	26.95%
Reading	B >=	Grade 8	11.13%	14.32%	17.51%	20.70%	23.89%
Reading	C >=	Grade HS	13.53%	17.21%	20.89%	24.57%	28.25%
Math	A >=	Grade 4	14.99%	17.42%	19.85%	22.28%	24.73%
Math	B >=	Grade 8	7.25%	8.58%	9.91%	11.24%	12.57%
Math	C >=	Grade HS	11.50%	13.86%	16.22%	18.58%	20.94%

#### Targets: Description of Stakeholder Input

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

04/05/2023

**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 regular assessment	14,800	14,037	11,752
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,924	920	868
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	802	876	1,028

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

04/05/2023

**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 regular assessment	14,797	14,020	3,880
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,921	616	218
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,089	663	263

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	2,726	14,800	15.07%	16.12%	18.42%	Met target	No Slippage
B	Grade 8	1,796	14,037	11.41%	11.13%	12.79%	Met target	No Slippage
C	Grade HS	1,896	11,752	15.07%	13.53%	16.13%	Met target	No Slippage

**FFY 2021 SPP/APR Data: Math Assessment**

<b>Group</b>	<b>Group Name</b>	<b>Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards</b>	<b>Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment</b>	<b>FFY 2020 Data</b>	<b>FFY 2021 Target</b>	<b>FFY 2021 Data</b>	<b>Status</b>	<b>Slippage</b>
A	Grade 4	3,010	14,797	14.01%	14.99%	20.34%	Met target	No Slippage
B	Grade 8	1,279	14,020	5.60%	7.25%	9.12%	Met target	No Slippage
C	Grade HS	481	3,880	15.53%	11.50%	12.40%	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.**

Public reports of assessment data can be found here under the heading End of Year Report - 2021-22 - Assessment (<https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#EndofYearReports-2824>)

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

North Carolina saw an increase in participation and performance from the FY2020 data which was significantly impacted by COVID due to school closures and waivers in 2019-20. NC is still seeing the impact of the closures and waivers on high school data due to the use of banked scores which also resulted in lower performance in Math for high school.

### 3B - Prior FFY Required Actions

None

### 3B - 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 regular assessments at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

### 3B - 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.



# 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 EDFacts 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	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	44.50%	45.50%	46.50%	47.50%	48.50%
Reading	B >=	Grade 8	42.00%	43.00%	44.00%	45.00%	46.00%
Reading	C >=	Grade HS	44.21%	45.25%	46.25%	47.25%	48.25%
Math	A >=	Grade 4	7.50%	8.50%	9.50%	10.50%	11.50%
Math	B >=	Grade 8	7.00%	8.00%	9.00%	10.00%	11.00%
Math	C >=	Grade HS	38.03%	38.95%	39.93%	40.91%	41.89%

**Targets: Description of Stakeholder Input**

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

04/05/2023

**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	1,191	1,299	1,013
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	476	509	359

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

04/05/2023

**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	1,183	1,291	820
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	475	415	381

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	476	1,191	36.30%	44.50%	39.97%	Did not meet target	No Slippage
B	Grade 8	509	1,299	39.73%	42.00%	39.18%	Did not meet target	No Slippage
C	Grade HS	359	1,013	37.21%	44.21%	35.44%	Did not meet target	Slippage

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

North Carolina has found that in addition to less high school students having a test on file for FY 2021, many students suffered learning loss due to COVID-19. Students taking the reading exam in 10th grade would have been virtual in 9th grade which contributed to the lack of understanding of core

concepts required for college and career readiness. Many students that take the alternate assessment have severe health problems and families were not comfortable sending them to school. PSUs reported that virtual students had difficulty accessing and understanding the content.

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	475	1,183	35.65%	7.50%	40.15%	Met target	No Slippage
B	Grade 8	415	1,291	33.55%	7.00%	32.15%	Met target	No Slippage
C	Grade HS	381	820	44.97%	38.03%	46.46%	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.

Public reports of assessment data can be found here under the heading End of Year Report - 2021-22 - Assessment (<https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting#EndofYearReports-2824>)

Provide additional information about this indicator (optional)

The OEC will be gathering stakeholders to review targets for Indicator 3C in the 2022-23 SY. Targets for 3C Reading are rigorous but may be attainable while targets for 3C Math are too low and need to be revised based on more current data.

**3C - Prior FFY Required Actions**

None

**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.

**3C - 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.

# 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 EDFacts 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 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 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 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 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	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	27.44	24.39	21.34	18.29	15.24
Reading	B <=	Grade 8	32.02	28.46	24.90	21.34	17.78
Reading	C <=	Grade HS	36.85	32.76	28.76	24.58	20.49
Math	A <=	Grade 4	9.93	8.83	7.73	6.63	5.53
Math	B <=	Grade 8	9.40	8.36	7.32	6.28	5.24
Math	C <=	Grade HS	10.66	9.47	8.28	7.09	5.90

### Targets: Description of Stakeholder Input

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

<b>Group</b>	<b>Grade 4</b>	<b>Grade 8</b>	<b>Grade HS</b>
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	111,704	120,565	110,792
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	14,800	14,037	11,752
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	54,869	58,761	63,328
d. All students in regular assessment with accommodations scored at or above proficient against grade level	2,557	2,400	2,716
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,924	920	868
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	802	876	1,028

**Data Source:**

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

<b>Group</b>	<b>Grade 4</b>	<b>Grade 8</b>	<b>Grade HS</b>
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	111,663	120,052	51,814
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	14,797	14,020	3,880
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	51,957	48,781	32,569
d. All students in regular assessment with accommodations scored at or above proficient against grade level	3,810	1,986	884
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,921	616	218
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,089	663	263

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	18.42%	51.41%	30.10	27.44	32.99	Did not meet target	Slippage
B	Grade 8	12.79%	50.73%	36.85	32.02	37.93	Did not meet target	Slippage
C	Grade HS	16.13%	59.61%	43.37	36.85	43.48	Did not meet target	No Slippage

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

North Carolina set attainable but rigorous targets for reducing the gap between all students and SWD in FY2020. In the 2022-23 school year, the OEC will be gathering stakeholders to review these targets and determine if they need to be reset based on more current data. Although SWD increased their proficiency rate from FY2020 to FY2021 (15.07% to 18.42%), All students increased at a much higher rate than expected, (45.18% to 51.41%) which increased the gap.

**Provide reasons for slippage for Group B, if applicable**

North Carolina set attainable but rigorous targets for reducing the gap between all students and SWD in FY2020. In the 2022-23 school year, the OEC will be gathering stakeholders to review these targets and determine if they need to be reset based on more current data. Although SWD increased their proficiency rate from FY2020 to FY2021 (11.41% to 12.79%), All students increased at a much higher rate than expected, (48.26% to 50.73%) which increased the gap.

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	20.34%	49.94%	23.84	9.93	29.60	Did not meet target	Slippage
B	Grade 8	9.12%	42.29%	27.11	9.40	33.16	Did not meet target	Slippage
C	Grade HS	12.40%	64.56%	41.21	10.66	52.17	Did not meet target	Slippage

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

North Carolina set rigorous targets for reducing the gap between all students and SWD in FY2020. In the 2022-23 school year, the OEC will be gathering stakeholders to review these targets and determine if they need to be reset based on more current data. Although SWD increased their proficiency rate from FY2020 to FY2021 (14.01% to 20.34%), All students increased at a much higher rate than expected, (37.85% to 49.94%) which increased the gap. In the FY2022 SPP/APR NC anticipates reporting new targets for Indicator 3D Math.

**Provide reasons for slippage for Group B, if applicable**

North Carolina set rigorous targets for reducing the gap between all students and SWD in FY2020. In the 2022-23 school year, the OEC will be gathering stakeholders to review these targets and determine if they need to be reset based on more current data. Although SWD increased their proficiency rate from FY2020 to FY2021 (5.60% to 9.12%), All students increased at a much higher rate than expected, (32.71% to 42.29%) which increased the gap. In the FY2022 SPP/APR NC anticipates reporting new targets for Indicator 3D Math.

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

North Carolina set rigorous targets for reducing the gap between all students and SWD in FY2020. In the 2022-23 school year, the OEC will be gathering stakeholders to review these targets and determine if they need to be reset based on more current data. SWD decreased their proficiency rate from FY2020 to FY2021 (15.53% to 12.40%), while All students increased at a much higher rate than expected, (56.74% to 64.56%) which increased the gap. In the FY2022 SPP/APR NC anticipates reporting new targets for Indicator 3D Math.

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

### **3D - Prior FFY Required Actions**

In its FFY 2021 SPP/APR, the State must report baseline data that has been calculated consistent with the Measurement Table. Additionally, the State must provide through FFY 2025 and ensure that its FFY 2025 target reflects improvement over baseline.

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

Using 2018-19 EdFacts Data, North Carolina calculated the proficiency gap between All students and SWD on each assessment by grade. Baseline was set using the 2018-19 Gap between proficiency for all students and SWD, and targets set were intended to reduce the gap in each test and grade level by at least half over the next 6 years as selected by stakeholders.

#### **3D - OSEP Response**

The State has established the baseline for this indicator, using data from FFY 2018, and OSEP accepts that data.

The State provided targets for this indicator, and OSEP accepts those targets.

#### **3D - Required Actions**

## Indicator 4A: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

**Results Indicator:** Rates of suspension and expulsion:

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

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

#### Data Source

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs 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 2021 SPP/APR, use data from 2020-2021), 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 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 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 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts 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 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) Memorandum 09-02, dated October 17, 2008.

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, etc.) and any enforcement actions that were taken.

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

### 4A - Indicator Data

#### Historical Data

Baseline Year	Baseline Data
2020	52.17%

FFY	2016	2017	2018	2019	2020
Target <=	2.50%	2.50%	2.50%	2.00%	52.17%
Data	0.00%	0.00%	0.00%	0.64%	52.17%



**Targets**

FFY	2021	2022	2023	2024	2025
Target <=	47.17%	42.17%	37.17%	32.17%	27.17%

**Targets: Description of Stakeholder Input**

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
4	4	52.17%	47.17%	100.00%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

In reviewing and analyzing the FY2021 discipline data, slippage was most attributed to the low discipline rates statewide for the 2020-21 school year. Students were almost completely virtual in 2020-21 due to COVID-19. North Carolina had only four PSUs that met the state established minimum cell size and 4 PSUs that met the definition of significant discrepancy. Because states must exclude PSUs who do not meet the cell size, this resulted in an increased percentage.

**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**

North Carolina met with stakeholders and revised its definition of Significant Discrepancy in FY2020. For indicator 4a, North Carolina's definition of "significant discrepancy" with regard to suspensions/expulsions for students with IEPs is greater than 2.5x the rate of suspensions/expulsions of students without IEPs and a minimum Cell Size of > 5 SWD.

Significant Discrepancy Definition Rate Ratio Method –

Step 1: Calculate % of Students with Disabilities Suspended/Expelled > 10 days by PSU  
 (Special Ed Students Suspended/Expelled > 10 days/SWD in PSU child count)= PSUSWD %

Step 2: Calculate % of Non-Disabled Students Suspended/Expelled > 10 Days by PSU  
 (General Ed Students Suspended > 10 days/General Ed Students in PSU)= PSU Non-SWD %

Step 3: Calculate Rate Ratio by PSU:  
 (PSU % of SWD Suspended > 10 days /PSU % of Non-SWD Suspended > 10 days) = PSU Rate Ratio

Step 4: Determine Cell Size for 4A & 4B: > 5 SWD Suspended/ Expelled > 10 days

Step 5: Determine Significant Discrepancy: PSUs with Rate Ratio > 2.5 (percent of SWD suspended/Expelled > 10 days is at least 2.5 x greater than the Percent of non-disabled Suspended/Expelled > 10 days)

Step 6: Calculate 4a Significant Discrepancy: Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs  
 (# of Districts with Rate Ratio > 2.5 the rate of suspensions/expulsions of Non-SWD and a minimum Cell Size of > 5 SWD/# of PSUs in the state with a minimum Cell Size of > 5 SWD)

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

SY 2020-21 most schools were fully virtual due to COVID-19 and North Carolina saw the decrease in out-of-school suspensions in PSUs across the state contributed to most PSUs not meeting the minimum cell size requirements for this indicator. NC analyzes all districts in Indicator 4b. Our minimum cell size is 5 for our accepted methodology for SWD suspended or expelled greater than 10 days. The percent included are the LEAs that met the minimum cell size. North Carolina does not use a minimum N size to ensure that all its public school units are included to the maximum extent possible. A minimum cell size allows North Carolina to analyze its data more carefully given the number of public school units that have small numbers of students

with disabilities in their child counts. Cell size allows for a comparison to overall child count in order to determine whether findings for this indicator are systemic in nature.

**Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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.**

For the FY2021 data, if a PSU had a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs greater than 2.5x the rate of suspensions/expulsions of students without IEPs, the EC Division analyzed data for patterns of systemically problematic policies, procedures and practices that contributed to the significant discrepancy.

North Carolina revised the method of review of policies, procedures and practices for Indicator 4a/b. For the FY2021 APR submission, the OEC moved this review to a collaborative assessment process which includes a tool to walk PSU's through state and IDEA requirements around discipline and disciplinary actions for SWD. The tool is intended for the PSU team to gather evidence that they are implementing the requirement, providing the needed training, technical assistance and support to appropriate parties and that the process of carrying out the requirement in the school or individual instance is done with fidelity. The OEC has conducted an analysis of discipline data and identified PSUs required to complete submission of a guided, collaborative, assessment review that includes coaching and conversations with OEC staff. All PSUs in the state were trained in use of the review process tools in the Spring of 2022 with follow up training and technical assistance provided to identified PSUs. Face to face meetings with PSU teams and OEC teams were conducted in Spring/Summer of 2022. PSUs were encouraged to select a team of individuals to conduct the review that includes individuals from cross disciplines, such as district and school administrators, EC Directors, Curriculum Leads, Equity Officers, MTSS Coordinators, guidance counselor, social worker, special education teacher, general education teacher, parent of a student with a disability and a school psychologist. OEC staff teams were cross sectional and included, leadership team members on each team and Integrated Academic & Behavior Systems (IABS) consultants.

The review tool includes the following instructions and activities:

Review the district's written procedures for Discipline. Determine if administrators and teachers are complying with all the components of the Discipline Regulations (i.e. Parent notification, manifestation determinations, change of placement). Determine if students with disabilities of all racial and ethnic groups, and particularly students of the identified group(s), are disciplined equitably.

NC 1504-2 Discipline Procedures

NC 1504-2 Authority of School Personnel

Guidance Manual for Homebound Placement

North Carolina School Discipline Laws and Regulations - March 2021

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 2020**

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

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

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

**4A - Prior FFY Required Actions**

None

**4A - OSEP Response**

In the FFY 2021 SPP/APR the State included a very low percentage of the State's LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "SY 2020-21 most schools were fully virtual due to COVID-19 and North Carolina saw the decrease in out-of-school suspensions in PSUs across the state contributed to most PSUs not meeting the minimum cell size requirements for this indicator." OSEP reminds the State that if the examination for significant discrepancies in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State's chosen methodology is not reasonably designed to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

**4A - 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.

## 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 2021 SPP/APR, use data from 2020-2021), 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 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 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 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 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 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 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) Memorandum 09-02, dated October 17, 2008.

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, etc.) and any enforcement actions that were taken.

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

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	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	17.86%

**Targets**

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	1	17.86%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

**State's definition of "significant discrepancy" and methodology**

For Indicator 4b, North Carolina's definition of "significant discrepancy" with regard to suspensions/expulsions for students with IEPs is greater than 2.5x the rate of suspensions/expulsions of students without IEPs and a minimum Cell Size of > 5 SWD in each racial ethnic group.  
Significant Discrepancy Definition Rate Ratio Method – For Each Racial/Ethnic Group

Step 1: Calculate % of Students with Disabilities Suspended/Expelled > 10 Days by PSU and Race  

$$\left(\frac{\text{RACE} \text{ Special Ed Students Suspended/Expelled } > 10 \text{ days}}{\text{RACE} \text{ Special Ed Students in PSU}}\right) = \text{PSU SWD } \%$$

Step 2: Calculate % of Non-Disabled Students Suspended/Expelled > 10 Days by PSU  

$$\frac{\text{General Ed Students Suspended } > 10 \text{ days}}{\text{General Ed Students in PSU}} = \text{PSU Non-SWD } \%$$

Step 3: Calculate Rate Ratio by PSU:  

$$\left(\frac{\text{PSU } \% \text{ of (RACE) SWD Suspended } > 10 \text{ days}}{\text{PSU } \% \text{ of Non-SWD Suspended } > 10 \text{ days}}\right) = \text{PSU Rate Ratio}$$

Step 4: Determine Cell Size for 4B: > 5 SWD Suspended/ Expelled by Race/Ethnicity > 10 days

Step 5: Determine Significant Discrepancy: PSUs with Rate Ratio > 2.5 (Percent of SWD Suspended/Expelled > 10 days is at least 2.5 x greater than the Percent of non-disabled Suspended/Expelled > 10 days)

Step 6: Calculate 4b Significant Discrepancy: Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs by each of the seven Race/Ethnicity categories.  
 (# of Districts with Rate Ratio > 2.5 the rate of suspensions/expulsions of Non-SWD/# of Districts in the state with >5 SWD SUSPENDED Expelled by Race)

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

SY 2020-21 most schools were fully virtual due to COVID-19 and North Carolina saw the decrease in out-of-school suspensions in PSUs across the state contributed to most PSUs not meeting the minimum cell size requirements for this indicator. NC analyzes all districts in Indicator 4b. Our minimum cell size is 5 for our accepted methodology for SWD suspended or expelled greater than 10 days. The percent included are the LEAs that met the minimum cell size. North Carolina does not use a minimum N size to ensure that all its public school units are included to the maximum extent possible.

A minimum cell size allows North Carolina to analyze its data more carefully given the number of public school units that have small numbers of students with disabilities in their child counts. Cell size allows for a comparison to overall child count in order to determine whether findings for this indicator are systemic in nature.

**FFY 2020 Data Note**

For the 10 public school units (PSUs) identified in FFY2020 that had policies, procedure or practices that contributed to the significant discrepancy, the OEC piloted the new Indicator 4 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 disciplinary actions involving SWD. As a result of these intense reviews, PSUs were given recommendations on strengthening their processes. There were no findings of noncompliance.

**Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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.**

For the FY2021 data, if a PSU had a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs greater than 2.5x the rate of suspensions/expulsions of students without IEPs, the EC Division analyzed data for patterns of systemically problematic policies, procedures and practices that contributed to the significant discrepancy.

North Carolina revised its method of review of policies, procedures and practices for Indicator 4a/b. For the FY2021 APR submission, the OEC moved this review to a collaborative assessment process which includes a tool to walk PSU's through state and IDEA requirements around discipline and disciplinary actions for SWD. The tool is intended for the PSU team to gather evidence that they are implementing the requirement, providing the needed training, technical assistance and support to appropriate parties and that the process of carrying out the requirement in the school or individual instance is done with fidelity. The OEC has conducted an analysis of discipline data and identified PSUs required to complete submission of a guided, collaborative, assessment review that includes coaching and conversations with OEC staff. All PSUs in the state were trained in use of the review process tools in the Spring of 2022 with follow up training and technical assistance provided to identified PSUs. Face to face meetings with PSU teams and OEC teams were conducted in Spring/Summer of 2022. PSUs were encouraged to select a team of individuals to conduct the review that includes individuals from cross disciplines, such as district and school administrators, EC Directors, Curriculum Leads, Equity Officers, MTSS Coordinators, guidance counselor, social worker, special education teacher, general education teacher, parent of a student with a disability and a school psychologist. OEC staff teams were cross sectional and included, leadership team members on each team and Integrated Academic & Behavior Systems (IABS) consultants.

The review tool includes the following instructions and activities:

Review the district's written procedures for Discipline. Determine if administrators and teachers are complying with all the components of the Discipline Regulations (i.e. Parent notification, manifestation determinations, change of placement). Determine if students with disabilities of all racial and ethnic groups, and particularly students of the identified group(s), are disciplined equitably.

NC 1504-2 Discipline Procedures

NC 1504-2 Authority of School Personnel

Guidance Manual for Homebound Placement

North Carolina School Discipline Laws and Regulations - March 2021

Phase 2 of the targeted monitoring process, beginning in the Spring/Summer of 2023 and continuing, includes a student record review protocol to ensure that the PSUs are implementing its policies, practices, and procedures in compliance with the requirements. During Phase 2, PSUs that have practices that are determined to be noncompliant will be issued a finding with a corresponding corrective action timeline and a verification process to ensure that the practice determined to be noncompliant is corrected and determined not ongoing. Phase 2 of the targeted monitoring process complies with the requirements of the 09-02 Memorandum.

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 2020**

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

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

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

**4B - Prior FFY Required Actions**

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the districts identified with noncompliance in FFY 2020 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (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 2020.

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

After significant internal and external stakeholder input, the NC OEC provided multiple statewide trainings on Indicators 4, 9 and 10 and the new review process related to these Indicators. The NC OES teams met in person with PSU teams in each district that was identified as having Significant Discrepancy in FFY 2020 and completed a review process of policies, practices and procedures. This review required the PSUs to submit evidences of meeting state and federal policies in their local policies, practices and procedures. Recommendations for systemic improvements around disciplinary practices were made to the districts during the collaborative review process however no district was identified with findings of noncompliance.

**4B - OSEP Response**

In the FFY 2021 SPP/APR the State included a very low percentage of the State's LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "SY 2020-21 most schools were fully virtual due to COVID-19 and North Carolina saw the decrease in out-of-school suspensions in PSUs across the state contributed to most PSUs not meeting the minimum cell size requirements for this indicator." OSEP reminds the State that if the examination for significant discrepancies, by race and ethnicity, in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State's chosen methodology is not reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

**4B- 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.

## 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 EDFacts 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	2016	2017	2018	2019	2020
A	2020	Target >=	65.30%	65.20%	65.00%	65.50%	68.70%
A	68.70%	Data	66.80%	66.85%	67.51%	67.81%	68.70%
B	2020	Target <=	15.20%	15.10%	15.00%	14.50%	12.03%
B	12.03%	Data	13.98%	14.02%	13.94%	13.27%	12.03%
C	2020	Target <=	2.00%	2.00%	2.00%	2.00%	1.68%
C	1.68%	Data	1.83%	1.81%	1.78%	1.73%	1.68%

#### Targets

FFY	2021	2022	2023	2024	2025
Target A >=	68.75%	68.80%	68.85%	68.90%	68.95%
Target B <=	12.00%	12.00%	11.50%	11.50%	11.25%
Target C <=	1.63%	1.58%	1.53%	1.48%	1.43%

#### Targets: Description of Stakeholder Input

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 Child Count/Educational Environment	07/06/2022	Total number of children with IEPs aged 5 (kindergarten) through 21	184,459

Source	Date	Description	Data
Data Groups (EDFacts file spec FS002; Data group 74)			
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	128,437
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	21,299
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,644
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	195
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	804

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 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	128,437	184,459	68.70%	68.75%	69.63%	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	21,299	184,459	12.03%	12.00%	11.55%	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]	2,643	184,459	1.68%	1.63%	1.43%	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 – 6A, 6B

Part	FFY	2016	2017	2018	2019	2020
A	Target >=	37.30%	37.60%	38.00%	38.00%	29.64%
A	Data	35.86%	34.93%	34.64%	30.59%	29.64%
B	Target <=	20.00%	19.70%	19.40%	19.40%	26.84%
B	Data	21.73%	21.91%	21.80%	23.74%	26.84%

### Targets: Description of Stakeholder Input

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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	2021	2022	2023	2024	2025
Target A >=	29.60%	29.70%	29.80%	29.90%	30.00%
Target B <=	26.25%	26.00%	25.75%	25.50%	25.25%

**Inclusive Targets – 6C**

FFY	2021	2022	2023	2024	2025
Target C <=	2.40%	2.35%	2.30%	2.25%	2.20%

**Prepopulated Data**

**Data Source:**

SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

**Date:**

07/06/2022

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	3,406	5,676	1,728	10,810
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	695	1,855	651	3,201
b1. Number of children attending separate special education class	1,200	1,439	363	3,002
b2. Number of children attending separate school	49	77	26	152
b3. Number of children attending residential facility	1	0	0	1
c1. Number of children receiving special education and related services in the home	84	93	32	209

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 2021 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 2020 Data	FFY 2021 Target	FFY 2021 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	3,201	10,810	29.64%	29.60%	29.61%	Met target	No Slippage

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B. Separate special education class, separate school or residential facility	3,155	10,810	26.84%	26.25%	29.19%	Did not meet target	Slippage
C. Home	209	10,810	2.42%	2.40%	1.93%	Met target	No Slippage

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

6B Slippage: For FFY2021, PSUs reported that more children were identified as having intensive needs than in previous years. PSUs shared that this increase seems related to fewer children ages 0-3 receiving regular healthcare and educational services during the height of the COVID-19 pandemic as well as a lack of identification at an earlier age. Factors impacting these circumstances included lockdowns, community child care centers with restricted access and/or closures, virtual health appointments, family choice, etc.

**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 2 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	2016	2017	2018	2019	2020
A1	2013	Target >=	82.50%	82.50%	82.55%	83.00%	84.04%
A1	82.34%	Data	84.85%	84.82%	84.92%	84.00%	84.77%
A2	2013	Target >=	35.20%	35.20%	35.40%	35.50%	38.16%

Part	Baseline	FFY	2016	2017	2018	2019	2020
A2	35.08%	Data	34.73%	37.90%	38.72%	37.76%	38.02%
B1	2013	Target >=	82.52%	82.52%	82.60%	83.00%	83.67%
B1	82.52%	Data	82.96%	82.89%	83.40%	83.27%	83.64%
B2	2013	Target >=	34.46%	34.46%	34.50%	35.00%	38.50%
B2	34.24%	Data	34.14%	37.40%	36.95%	38.10%	37.93%
C1	2013	Target >=	82.00%	82.00%	82.20%	83.00%	82.51%
C1	81.81%	Data	84.01%	83.55%	84.02%	82.11%	82.99%
C2	2013	Target >=	52.17%	52.17%	52.20%	53.00%	54.35%
C2	52.05%	Data	50.69%	54.12%	53.95%	53.95%	53.30%

#### Targets

FFY	2021	2022	2023	2024	2025
Target A1 >=	84.28%	84.48%	84.68%	84.88%	85.08%
Target A2 >=	38.56%	38.96%	39.36%	39.76%	40.16%
Target B1 >=	84.07%	84.47%	84.87%	85.27%	85.67%
Target B2 >=	38.90%	39.30%	39.70%	40.10%	40.50%
Target C1 >=	82.91%	83.31%	83.71%	84.11%	84.51%
Target C2 >=	54.75%	55.11%	55.55%	55.95%	56.35%

#### Targets: Description of Stakeholder Input

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2021 SPP/APR Data

##### Number of preschool children aged 3 through 5 with IEPs assessed

5,696

##### 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	68	1.19%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	756	13.27%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,702	47.44%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,749	30.71%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	421	7.39%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the	4,451	5,275	84.77%	84.28%	84.38%	Met target	No Slippage

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <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>	2,170	5,696	38.02%	38.56%	38.10%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	69	1.21%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	789	13.85%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,666	46.80%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,801	31.62%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	371	6.51%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	4,467	5,325	83.64%	84.07%	83.89%	Did not meet target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,172	5,696	37.93%	38.90%	38.13%	Did not meet 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	74	1.30%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	740	12.99%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,882	33.04%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,141	37.59%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	859	15.08%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	4,023	4,837	82.99%	82.91%	83.17%	Met 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>	3,000	5,696	53.30%	54.75%	52.67%	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 Form (COS) process? (yes/no)**

YES

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

Public School Units (PSUs) used the Child Outcomes Summary Form (COSF) to collect "entry" and "exit" data regarding outcomes for preschool children aged 3 through 5 with IEPs. PSUs then submitted their data using the Every Child Accountability and Tracking System (ECATS), the State's 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 PSUs.

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

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 PSUs 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 has partnered 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 the Collaborative for Academic, Social, and Emotional Learning (CASEL) and ECTA/DaSy Centers. CASEL is providing targeted TA to NC to align MTSS efforts with school wide Social Emotional Learning (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 Program policy, monitoring (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 2 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 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023**, 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 FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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	2016	2017	2018	2019	2020
Target >=	50.00%	50.00%	50.00%	50.00%	45.17%
Data	43.43%	44.24%	43.98%	49.36%	45.17%



**Targets**

FFY	2021	2022	2023	2024	2025
Target >=	49.36%	50.00%	51.00%	52.00%	53.00%

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,808	3,729	45.17%	49.36%	48.48%	Did not meet 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.**

The North Carolina Department of Public Instruction (NCDPI) used a 17-item survey with a Likert scale for responses. The 17 items were previously developed and validated by the National Center for Special Education Accountability (NCSEAM) as part of a 25-item survey for parents of children ages 5-21. For parents of preschool children, NCDPI used a corresponding 17-item survey with a Likert scale for responses. The 17 items were previously developed and validated by the National Center for Special Education Accountability (NCSEAM) as part of a 25-item survey for parents of preschool children. Each family selected to participate in the annual sample is sent a letter explaining the importance of the survey and guaranteeing the confidentiality of the parent’s responses. The letter includes a web-based link to be used to complete the survey. Parents also have the option of receiving a printed copy of the survey to complete and return. The items on each survey were fully equated so that they have the same meaning, the same standard applies, and measures from the two surveys can be and were aggregated by NCDPI.

When analyzing and reporting the data, North Carolina used a percentage calculation of parents’ responses of "strongly agree" and "very strongly agree" for a simple majority of survey items indicating their perception that schools facilitated their involvement. The calculation was similar to the standard used in previous years for the 25-item survey and yielded similar results.

**The number of parents to whom the surveys were distributed.**

85,032

**Percentage of respondent parents**

4.39%

**Response Rate**

FFY	2020	2021
Response Rate	4.65%	4.39%

**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 OEC will work with PSUs to ensure that pre-survey highlights are included in newsletters and via email to notify parents of the coming survey. There is also consideration from the OEC to provide parents with the link to the survey instrument at the annual review in the sample districts. This face-to-face interaction at the time of the meeting may increase responses from underrepresented populations. For example, parents with limited access to the internet could have an opportunity to complete surveys after meetings, and families who may need a translator who might already be present for the meeting would have them available. In addition, the OEC is collaborating with parent advocacy groups across the state to include notices of the surveys and instructions on how to complete the survey for parents in their native language. Currently the surveys are available in both English and Spanish however the OEC is working to make them available in other languages.

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

The OEC staff analyzed the non-response data to determine the subgroups where parents of SWD were not responding. In FY2021 the districts in the sample were instructed to send letters with links to the survey instrument to their entire special education student population on the December child count to elicit a wider range of responses from parents. In the Spring of 2022, the OEC also held training webinars for districts with tips and practices to increase parent engagement, including various communication methods, use of district staff and local school meetings to encourage responses to the survey. To increase responses among Hispanic parents, the OEC provided form letters to the PSUs which included QR codes for easy access to the survey instrument in both English and Spanish.

The OEC will implement a process to monitor responses as they come in and increase efforts to include subgroups of non-responders. The OEC has completed an analysis of the rate of engagement by subgroups to assess significance of differences in response rates when controlling for the state population.. The OEC is exploring the option with the Indicator 8 data analysis contractor of applying weighting to assess overall responses in parent involvement and in order to assess for the potential of nonresponse bias.

**Include the State’s analyses of the extent to which the demographics of the parents responding 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.**

A total of 85032 parent surveys (school-age and preschool) were instructed to be distributed among PSUs in the sample. A total of 3729 surveys were completed and returned for a response rate of 4.39% which was lower than the previous year.

a) Distribution by Race

The OEC analyzed the Indicator 8 sample data by race. In FY2021 White students were underrepresented by 6%. In North Carolina in the past, Black students have been underrepresented, however in FY2021, black students were overrepresented by 4.5%. North Carolina has increased representation for black students by instructing PSU's to send survey links to their entire child count.

For respondents, parents of Black students were underrepresented by 9.87% while parents of Hispanic students were underrepresented by 5.31%. Parents of white students were overrepresented by 13.12%.

b) Distribution by Disability Category

The OEC analyzed the Indicator 8 sample and response data by disability category.

In North Carolina in the past, students with other health impairments, and specific learning disabilities were under-represented. Also students in other disability categories were slightly over-represented, however in FY2021, students by disability were not over or underrepresented. North Carolina has increased representativeness for all students by instructing PSU's to send survey links to their entire child count.

For respondents, parent responders of students with Autism (11%), Multiple Disabilities (5.5%) and Speech Language Impairment (3.08%) were overrepresented while parents of students with Learning Disabilities (18.3%) and Other Health Impairments (8.4%) were underrepresented. There were also 3.4% of respondents who chose not to report disability. Percentage points over and under represented are noted after each disability category.

\*Difference (percentage points) between the percentage of surveys distributed and the percentage of responders in the sample who completed the survey. The acceptable range of over/under-representation is +/-3 percentage points and was used to determine representativeness.

**The demographics of the parents 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**

A comparison of the respondents in the annual sample to the representative survey distribution, suggests that certain response groups, as noted in the section about the State's analyses, did not match the representative sample surveyed indicating non-response bias in certain race and disability types. However, these percentages were impacted by the fact that parents selected the race/ethnicity and disability category of their children rather than tracking surveys to identify students/children. Thus, survey responses may not directly correspond to the race/ethnicity or disability category of the children and also account for missing information when a parent chose not to respond to the questions about race/ethnicity or disability category. For future surveys, the State will consider the possibility of tracking surveys to identified students/children in the sample.

In addition, North Carolina is working with the SSIP Stakeholder and Family Engagement workgroup to analyze the FY 2020 and FY 2021 Indicator 8 survey data and reports to engage families and districts in use of the data. The NC SSIP Stakeholder and Family engagement workgroup has developed resources and tools to share with families to reduce bias and promote response from a broad cross section of parents of children with disabilities. These resources include an infographic explaining Indicator 8 data, how it is used for improvement and why parents should submit a response and the importance of submitting valid responses. In the FY2022, Information about Indicator 8 will be shared through Parent newsletters from the department and from district and school level list serves. The OEC will work with PSU's to ensure that pre-survey highlights are included in newsletters and via email to notify parents of the coming survey. There is also consideration from the OEC to provide parents with the link to the survey instrument at the annual review in the sample districts. This face-to-face interaction at the time of the meeting may increase responses from underrepresented populations. The OEC is also collaborating with parent advocacy groups across the state to include notices of the surveys and instructions on how to complete the survey for parents in their native language.

In December of 2022, the OEC met with stakeholders to discuss moving to census data collection rather than sampling for Indicator 8. This potential change would include a required checkbox on the IEP ensuring that parents were provided an opportunity to respond to the survey at the end of an annual review or Initial IEP. As of the date of the SPP/APR submission, stakeholders have positively reacted to changing to census collection for this indicator not only to increase ease of use and understanding between PSU staff and parent stakeholders but to decrease non-response bias and increase accuracy and validity of the survey responses.

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

\*Difference (percentage points) between the percentage of surveys distributed and the percentage of responders in the sample who completed the survey. The acceptable range of over/under-representation is typically +/-3 percentage points and was used to determine representativeness. Some percentages may not add to 100 due to rounding.

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 conducts an OSEP approved sampling of Public School Units (PSUs), charter schools and State-Operated Programs (SOPs). A sampling calculator was used to establish representative samples through fiscal year 2025-26. PSU level information was entered into the Sampling Calculator and a sampling of PSUs, based on a multi-way cluster model, was produced. Samples were equivalent for size of PSU, percentage of males and females, students with disabilities, and minority race. All PSUs are sampled at least once every five years. The five PSUs with an Average Daily Membership (ADM) of 50,000 or more are sampled each year with certain high schools selected on a five (5) year rotation.. For each PSU in the sample, PSUs were required to include all students with IEPs who were on the December 2021 child count.

As noted above, in December of 2022, the OEC met with stakeholders to discuss moving to census data collection rather than sampling for Indicator 8. This potential change would include a required checkbox on the IEP ensuring that parents were provided an opportunity to respond to the survey at the end of an annual review or Initial IEP. As of the date of the SPP/APR submission, stakeholders have positively reacted to changing to census collection for this indicator not only to increase ease of use and understanding between PSU staff and parent stakeholders but to decrease non-response bias and

increase accuracy and validity of the survey responses. North Carolina anticipates moving to annual review/IEP collection in the 2023-24 school year however the decision on whether or not to move fully to reporting census or continuing with the PSU sample has not been confirmed.

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 2021 SPP/APR, the State must report whether its FFY 2021 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.

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 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.

In the FFY 2021 SPP/APR, the State must analyze the response rate to identify potential non-response bias and identify steps taken to reduce any identified bias to promote response from a broad cross section of parents of children with disabilities, as required by the Measurement Table.

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

North Carolina addressed representativeness and potential non-response bias and described the analysis of each in the FY2021 SPP/APR

**8 - OSEP Response**

OSEP's response to the State's initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover.

**8 - 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.

## 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, etc. 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 2021 reporting period (i.e., after June 30, 2022).

#### 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.

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

### 9 - Indicator Data

#### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

#### Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

#### FFY 2021 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.

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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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
5	0	323	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).

In North Carolina, disproportionate representation of racial and ethnic groups in special education is defined as a risk ratio of  $\geq 3.0$ . The minimum n-size is 30 and minimum cell size is 10.

For students aged 5 and in Kindergarten through age 21, NC uses one year of data, the current year for the target and comparison group being examined. The target group is SWD in the child count in the racial/ethnic group being analyzed and the comparison group is total enrollment for all other racial/ethnic groups.

Rules:

If there are fewer than 10 students in the target group for a PSU and less than 30 for a particular race no calculation is computed.

When minimum cell and n sizes are met for both target and comparison groups, a Weighted Risk Ratio is computed.

When minimum cell and n sizes are met by the target group but the minimum cell and/or n sizes are not met by the comparison group an Alternate Risk Ratio is computed.

A PSU will need to complete a review of policies, practices and procedures for disproportionate representation if the calculated weighted or alternate risk ratio is 3.0 or higher for a particular racial/ethnic group in which there are at least 10 students in the special education population.

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.

In FY2021 North Carolina implemented a change in process at the state level to get a more in depth view of how PSUs are identifying students with disabilities. All PSUs with disproportionate representation were required to participate in a collaborative review of policies, practices and procedures and meet face to face with OEC staff.

During the review process, OEC staff made recommendations on systemic changes the PSU should make in regards to policies, procedures, training, monitoring and evaluation of SWD. PSUs were required to submit progress towards these recommendations prior to Jan 2023.

Provide additional information about this indicator (optional)

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

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

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

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

**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 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, etc. 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 2021 reporting period (i.e., after June 30, 2022).

### 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.

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 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, etc.) and any enforcement actions that were taken.

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

## 10 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

### Historical Data

Baseline Year	Baseline Data
2020	2.90%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	2.90%

**Targets**

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

**FFY 2021 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.**

7

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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
52	0	323	2.90%	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).**

In North Carolina, disproportionate representation of racial and ethnic groups in special education is defined as a risk ratio of => 3.0. The minimum n-size is 30 and minimum cell size is 10.

For Indicator 10:

- Six major disability categories are examined.
- Intellectual Disability (IDMI, IDMO, IDSE)
- Specific Learning Disability (LD)
- Speech and/or Language Impairment (SI)
- Emotional Disability (ED)
- Other Health Impairment (OH)
- Autism (AU)

For students aged 5 and in Kindergarten through age 21, NC uses one year of data, the current year for the target and comparison group being examined.

Target group is Child Count by PSU: # of SWD in the disability category being examined in the racial/ethnic group being analyzed  
 Comparison group is Enrollment by PSU: total enrollment by all other racial/ethnic groups.

Rules:

- If there are fewer than 10 students in the target group for a PSU and less than 30 for a particular race no calculation is computed.
- When minimum cell and n sizes are met for both target and comparison groups, a Weighted Risk Ratio is computed.
- When minimum cell and n sizes are met by the target group but the minimum cell and/or n sizes are not met by the comparison group an Alternate Risk Ratio is computed.

A PSU will need to complete a review of policies, practices and procedures for disproportionate representation if the calculated weighted or alternate risk ratio is 3.0 or higher for a particular racial/ethnic group in which there are at least 10 students in the special education population.

**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.**

In FY2021 North Carolina implemented a change in process at the state level to get a more in depth view of how PSUs are identifying students with disabilities. All PSUs with disproportionate representation were required to participate in a collaborative review of policies, practices and procedures and meet face to face with OEC staff.

During the review process, OEC staff did not identify noncompliance however made recommendations on systemic changes the PSU should make in regards to policies, procedures, training, monitoring and evaluation of SWD. PSUs were required to submit progress towards these recommendations prior to Jan 2023.

The OEC has analyzed the data from the review process and will create a plan in FY2022 to prioritize and address systemic issues at the state level that can be addressed via training, technical assistance and coaching to support improvement in PSUs.

Phase 2 of the targeted monitoring process, beginning in the Spring/Summer of 2023 and continuing, includes a student record review protocol to ensure that the PSUs are implementing its policies, practices, and procedures in compliance with the requirements. During Phase 2, PSUs that have practices that are determined to be noncompliant will be issued a finding with a corresponding corrective action timeline and a verification process to



ensure that the practice determined to be noncompliant is corrected and determined not ongoing. Phase 2 of the targeted monitoring process complies with the requirements of the 09-02 Memorandum.

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

FFY 2020 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 2020**

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

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

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

**10 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the nine districts identified in FFY 2020 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (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 2020.

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

After significant internal and external stakeholder input, the NC OEC provided multiple statewide trainings on Indicators 4, 9 and 10 and the new review process related to these Indicators. The NC OES teams met in person with PSU teams in each district that was identified as having Disproportionate Representation in FFY 2020 and completed a review process of policies, practices and procedures. This review required the PSUs to submit evidences of meeting state and federal policies in their local policies, practices and procedures. Recommendations for systemic improvements around identification practices were made to the districts during the collaborative review process however no district was identified with findings of noncompliance.

**10 - OSEP Response**

**10 - Required Actions**

## 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 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, etc.) and any enforcement actions that were taken.

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

### 11 - Indicator Data

#### Historical Data

Baseline Year	Baseline Data
2005	84.62%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	91.98%	90.22%	88.99%	84.13%	59.11%

#### Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

#### FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
44,765	30,453	59.11%	100%	68.03%	Did not meet target	No Slippage

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

14,312

**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 - 1559  
6-15 days - 1999  
16-25 days - 1402  
26-35 days - 1005  
36-45 days - 820  
46 days or more - 7527  
Total - 14312

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

Referral paperwork not processed in a timely manner - 6531  
Excessive student absences - 355  
Weather delays - 53  
Delay in getting parent consent for evaluation - 3506  
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) - 2908  
COVID-19 - 959  
Total - 14312

**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 2021 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)**

COVID-19 continues to significantly impact data collection for Indicator 11. North Carolina has seen a decrease in the number of staff available to conduct evaluations. As a result, the number of children for whom the state's referral to placement timeline remains lower than pre-COVID years. Because NC's 90-day timeline ends with the placement decision, this is documented in ECATS according to the parent's written response to the PSU's request for initial placement. NC attributes the initial dip in its Indicator 11 data to the data management errors in documenting the parent's response in ECATS. Since this documentation is required to close the initial referral timeline, PSUs may have met the regulatory requirements for the Indicator 11 and obtained the parent's written response; however, failed to appropriately document the end of the process within ECATS. Additionally, given the shift to alternative means of participation in IEP Team meetings during and post-COVID, obtaining written consent for initial placement introduced the need for additional practices to be implemented at the local level to ensure written parental consent were obtained after virtual meetings and documented in ECATS. As a result, extensive technical assistance activities regarding data management were initiated statewide.

To mitigate the impact of COVID-19 on data collection, the State took the following steps:

- Held Monthly Office Hour WebEx Meetings to provide technical assistance for Indicator 7, 11, 12, and Child Count collections. Streamlined all technical assistance materials for monitoring and reporting Indicator 11 data.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
257	235	0	22

**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 257 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 257 PSUs with findings of non-compliance, the OEC verified that 235 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 257 PSUs with non-compliant findings had 13071 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 13071 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, that the remaining 22 PSUs with child-specific instances of non-compliance had been corrected.

**FFY 2020 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 FFY2020 in May of 2022. Therefore, the 22 findings of noncompliance subsequently corrected is considered pending as the PSUs are still within their one year of correction. For these 22 findings of noncompliance, the state will be undertaking the same actions described above for Prongs 1 and 2.

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

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	36	36	0

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

The 36 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 36 PSUs with findings of non-compliance, the OEC verified that all 36 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 36 PSUs with non-compliant findings had child-specific findings of non-compliance in 2019-20. 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 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 36 uncorrected findings of noncompliance identified in FFY 2019 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019 : (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 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

NC has reported on FY2020 correction of noncompliance in the FFY2021 SPP/APR

**11 - OSEP Response**

**11 - 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.

## 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 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, etc.) and any enforcement actions that were taken.

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

### 12 - Indicator Data

#### Not Applicable

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

NO

#### Historical Data

Baseline Year	Baseline Data
2005	48.40%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	96.48%	86.03%	89.60%	70.42%	46.46%

#### Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

#### FFY 2021 SPP/APR Data

Part C to B Timely Transition		Number of Students
a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.		4,434
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.		474

Part C to B Timely Transition	Number of Students
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,420
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.	729
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	117
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 2020 Data	FFY 2021 Target	FFY 2021 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.	2,420	3,114	46.46%	100%	77.71%	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**  
694

**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) - 53
- b. Child Circumstance (e.g. child was sick) - 9
- c. Part B Circumstance (e.g. delays completing evaluations, timely meetings, arranging transportation, enrollment, etc.) - 221
- d. Part C Circumstance (e.g. delays in notifying or issuing transition planning meeting invitation) - 21
- COVID Delay - 390
- TOTAL - 694

Number of students with delays by days beyond third birthday:

- 1 to 5 days - 38
- 6 to 15 days - 69
- 16 to 25 days - 40
- 26 to 35 days - 57
- 36 to 45 days - 38
- 46 days or more - 452
- TOTAL - 694

**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.**

The data used to report on this indicator includes statewide data that are inclusive of every school district in the state that provides special education and related services to the preschool-age population. Data were not obtained by sampling. The Department created Excel spreadsheets with the required data collection fields which automatically calculated the percentage of timely transitions. Each PSU was required to have its Exceptional Children Director sign an assurance as to the accuracy of the data. Spreadsheets were submitted electronically to the Department. The Department also created an optional spreadsheet to assist PSUs in tracking the referral and placement dates for each student. The Part C system begins notifying Part B of children starting at 2 years, 3 months of age. The transition process is outlined in a Guiding Practices Document and local interagency plans; and additional technical assistance is provided by numerous supporting documents (<http://nceln.fpg.unc.edu/node/315>).

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

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
283	283	0	0

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

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

The 283 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 283 PSUs with findings of non-compliance, the OEC verified that all 283 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 283 PSUs with non-compliant findings had 1620 child-specific findings of non-compliance in 2020-21. 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 1620 child-specific instances of non-compliance had been corrected.

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

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	3	3	0

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

The three 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 three PSUs with findings of non-compliance, the OEC verified that all three 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 three PSUs with non-compliant findings had 1039 child-specific findings of non-compliance in 2019-20. 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 the child-specific instances of non-compliance had been corrected.

**12 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 3 uncorrected findings of noncompliance identified in FFY 2019 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (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 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

NC has reported on FY2020 correction of noncompliance in the FFY2021 SPP/APR

**12 - OSEP Response**

**12 - 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.

## 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 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, etc.) and any enforcement actions that were taken.

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

### 13 - Indicator Data

#### Historical Data

Baseline Year	Baseline Data
2009	94.70%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	85.35%	85.45%	80.84%	56.42%	60.74%

#### Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

#### FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
366	606	60.74%	100%	60.40%	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 FFY2021, 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 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 FFY2021, NCDPI OEC reviewed 606 transition aged student records and identified 240 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 60.40 % falls short of the target of 100%. \*However, for FFY 2021 NCDPI OEC has determined that no slippage has occurred based upon the small percentage decrease of less than one half of one percent (FFY2021 60.40%, FFY2020 60.74%), which seems to be a reasonable consideration for a margin of error.

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 2020**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
192	192	0	0

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

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

Prong 1 and Prong 2 activities were required for each PSU that was monitored in FFY2020 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 (Prong 2) review of student records was completed. During the Prong 2 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.

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

NCDPI OEC staff conducted Prong 1 reviews for all PSUs that had findings of non-compliance in one or more student secondary transition records. Prong 1 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.

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

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

**13 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.

In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

NC has reported on FY2020 correction of noncompliance in the FFY2021 SPP/APR

**13 - OSEP Response**

**13 - 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.

## Indicator 14: Post-School Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

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

#### Instructions

*Sampling of youth who had IEPs and are no longer in secondary school is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See [General Instructions](#) on page 2 for additional instructions on sampling.)*

Collect data by September 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 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, etc.).

#### 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 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, 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	2016	2017	2018	2019	2020
A	2009	Target >=	39.50%	39.75%	40.00%	40.00%	40.51%
A	39.00%	Data	27.27%	27.01%	29.48%	28.51%	19.64%
B	2009	Target >=	62.50%	62.75%	63.00%	63.00%	71.00%
B	62.00%	Data	62.51%	62.83%	63.07%	69.99%	50.90%
C	2009	Target >=	73.50%	73.75%	74.00%	76.00%	81.76%
C	73.00%	Data	78.14%	77.70%	79.05%	80.76%	57.98%

### FFY 2020 Targets

FFY	2021	2022	2023	2024	2025
Target A >=	41.51%	42.50%	43.00%	43.50%	44.00%
Target B >=	73.00%	75.00%	77.00%	79.00%	81.00%
Target C >=	83.75%	85.75%	87.75%	89.75%	91.75%

### Targets: Description of Stakeholder Input

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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 2021 SPP/APR Data**

Total number of targeted youth in the sample or census	5,289
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,017
Response Rate	19.23%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	229
2. Number of respondent youth who competitively employed within one year of leaving high school	434
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)	6
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).	56

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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Enrolled in higher education (1)	229	1,017	19.64%	41.51%	22.52%	Did not meet target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	663	1,017	50.90%	73.00%	65.19%	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)	725	1,017	57.98%	83.75%	71.29%	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	2020	2021
Response Rate	42.28%	19.23%

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

North Carolina trains PSUs in the sampling plan annually in the Spring prior to the data collection period. The training includes an overview of the Indicator 14 data collection and the calculation, where and how to access the exiting data for the students included in the collection, access to the survey collection tool, and training and instruction for how to ask questions and glean information from students and family. The training materials are posted on the OEC website so that PSUs can train staff. In FY2021 PSUs attempted to contact over 5,000 students however 1186 students were marked as "Student Declined to Comment " or "Could not reach student". There were 292 respondents that were unengaged in any post school activities. To reach groups that are underrepresented, the OEC will include in the training to PSUs the need to utilize staff who may be familiar with the students such as high school teachers, counselors and administrative personnel as well as bilingual staff to ensure that communication with non-English speaking

responders can participate. PSUs also will be prompted and provided with templates to use post card mailers, social media, email and QR codes to contact students and engage with them as many students do not answer phone calls.

Finally, PSU's will be encouraged to meet with students and families near the time the student graduates or exits to ensure they have the most updated and current contact information possible and to make it a practice to collect this information during the student's exit IEP meetings or meetings when the Summary of Performance is completed.

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

The OEC staff analyzed the non-response data to determine the subgroups where SWD were not responding. In FY2021 the districts in the sample were instructed to contact all students meeting the exit criteria on the previous exit count to elicit a wider range of responses. In the Spring of 2022, the OEC also held training webinars for districts with tips and practices to increase student response rate, including various communication methods, use of district staff and local school meetings to encourage responses to the survey.

Of the youth who are no longer in secondary school and had IEPs in effect at the time they left school that were sampled (5,289) and a response was NOT recorded (4,272), the percent of minority students who did not respond (2,880) was 67.42% while the percent of white students who did not respond (1,392) was 32.58% suggesting that minority students are at a higher risk for not responding or having non-response bias.

The OEC will implement a process to monitor responses as they come in and increase efforts to include subgroups of non-responders. The OEC has completed an analysis of the rate of engagement by subgroups in order to identify strategies to increase representativeness. The OEC is exploring the option with the Indicator 14 data analysis of applying weighting to assess overall responses and determine where the non-response bias is most impacting the data.

**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.**

In FY2021 the OEC analyzed the representation and response data by race/ethnicity and disability. Minority students in NC public schools represent 54.11% of the total student population. White students represent 45.89% of the total student population. In the districts sampled in FY2021, for youth who are no longer in secondary school and had IEPs in effect at the time they left school (5,289) minority students in the sample (3,417) represented 64.61% and white students in the sample (1,872) represented 35.39%.

Of the youth who are no longer in secondary school and had IEPs in effect at the time they left school that were sampled and a response was recorded (1017), the percent of minority students who responded (537) was 52.80% while the percent of white students who responded (480) was 47.20%.

As noted above, Of the youth who are no longer in secondary school and had IEPs in effect at the time they left school that were sampled (5,289) and a response was NOT recorded (4,272), the percent of minority students who did not respond (2,880) was 67.42% while the percent of white students who did not respond (1,392) was 32.58% suggesting that minority students are at a higher risk for not responding or having non-response bias.

For disability category, youth who are no longer in secondary school and had IEPs in effect at the time they left school when broken down by disability category for FY2021 data; the analysis of the sample data compared to the total exit count for the state showed that students with Learning Disability were overrepresented in the sample by 13.97% and students identified with Other Health Impairment were overrepresented by 6.65%. No disability category showed underrepresentation that met the acceptable range of over/under-representation.

Of the youth who are no longer in secondary school and had IEPs in effect at the time they left school who responded to the survey, students with Learning Disability were overrepresented in the response data by 12.25% and students identified with Other Health Impairment were overrepresented in the response data by 5.13%. No disability category showed underrepresentation in the response data that met the acceptable range of over/under-representation.

**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.**

In addition to the strategies noted above to ensure that will increase the response rate for underrepresented populations, the OEC will make an effort to provide the instructions for accessing data and training earlier to PSUs with more opportunities to access multiple ways to engage in the training content. The number of sample records where PSUs did not submit a response at all is concerning so the OEC is considering a mandatory selection in the Indicator 14 data that notes whether or not the PSU reached out to the student at all. FY2021 is the first year that PSUs submitted Indicator 14 Survey data in the state IEP system ECATS. The survey is directly associated with a student record which allows for accurate exit and demographic data however the newness of the system, training timeline and timeframe in which the data is collected may have impacted the quality of the PSU data entry.

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

The range of over/under-representation of +/-3 percentage points was used to determine representativeness.

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 conducts a sampling of it's public school units (PSUs), charter schools and State-Operated Programs (SOPs). A sampling calculator developed by the National Post-school Outcomes Center was used to establish representative samples through fiscal year 2025-26. PSU level information was entered into the Sampling Calculator and a sampling of PSUs, based on a multi-way cluster model, was produced. Samples were equivalent for size of PSU, percentage of males and females, students with disabilities, and minority race. All PSUs are sampled at least once every five

years. The five PSUs with an Average Daily Membership (ADM) of 50,000 or more are sampled each year with certain high schools selected on a five year rotation. Students in the sample for each PSU, include all students with IEPs who graduated with a regular diploma, aged out, received a certificate, or dropped out.

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**

None

**14 - OSEP Response**

OSEP’s response to the State’s initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover.

**14 - 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.

## 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 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	31
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	11

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 FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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	2016	2017	2018	2019	2020
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00%-85.00%	75.00%-85.00%
Data	38.46%	47.37%	34.21%	21.05%	12.50%



**Targets**

FFY	2021 (low)	2021 (high)	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%	75.00%	85.00%

**FFY 2021 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
11	31	12.50%	75.00%	85.00%	35.48%	Did not meet target	No Slippage

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

NC's data did not meet the target for successful resolution meetings. However, many parties may engage in multiple dispute resolution mechanisms to resolve their disagreements (i.e. facilitated IEP Team meetings or mediation) made available at no charge by NCDPI. At other times, the parties engage in mediation that is outside of the NCDPI Dispute Resolution System. The NCDPI hypothesizes that parties in dispute use multiple meetings to resolve their disagreements given the few number of Due Process petitions that end in a formal hearing.

**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 resolution 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 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	69
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	27
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	9

**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 FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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	2016	2017	2018	2019	2020
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00%-85.00%	75.00%-85.00%
Data	78.95%	54.55%	62.50%	64.47%	46.03%

**Targets**

FFY	2021 (low)	2021 (high)	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%	75.00%	85.00%

**FFY 2021 SPP/APR Data**

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
27	9	69	46.03%	75.00%	85.00%	52.17%	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 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) for Children with Disabilities.

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

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

### Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

#### Phase I: Analysis:

- Data Analysis;
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Children with Disabilities;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

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

- Infrastructure Development;
- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and
- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

#### Specific Content of Each Phase of the SSIP

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

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

#### Phase III: Implementation and Evaluation

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

##### A. Data Analysis

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

##### B. Phase III Implementation, Analysis and Evaluation

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

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

and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

### C. Stakeholder Engagement

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

#### Additional Implementation Activities

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

## 17 - Indicator Data

### Section A: Data Analysis

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

NC will reduce the 6.83% point gap between students of color (SoC) with disabilities (4.19% career and college ready; CCR) and white students with disabilities (11.02% CCR) by 90% in the 40 public school units (PSUs) with <25% all-student proficiency in 4th grade reading that opted-in as SiMR Support partner PSUs.

#### 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.

INFRASTRUCTURE ANALYSIS – This was conducted in summer 2021 with full Office of Exceptional Children (OEC) staff participation. We created our own reflection tool based on the NCSI's eight-component General Supervision framework. This analysis illuminated both strengths and opportunities for growth in OEC resources, organization, talent, and processes. The full analysis can be viewed at:

<https://docs.google.com/document/d/15WLFd6nfRAnlcfTYnDBTnbMWHLkbf4PK/edit?usp=sharing&oid=114466409737524691690&rtpof=true&sd=true>

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

- Longitudinal 4th and 8th grade reading and math end-of-grade assessment data
- Longitudinal SWD graduation data
- SEA and PSU demographic and geographic data
- Discipline and attendance data; School Report Card data
- Significant Disproportionality and Indicator 4/9/10 data
- PSU Determinations
- EC Director and Teacher Attrition data
- Teacher Demographic data

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

In collaboration with our stakeholders, including our external evaluator and national TA center state leads, the OEC conducted multiple analyses in determining whether to continue with the original graduation-focused SiMR or identify a new area of focus. NC made significant progress on the original SiMR, and as presented in the FY2020 Indicator 17 response several factors (i.e., adverse impacts of lost instructional time during COVID, SWD outcome data from statewide assessments, shifting agency priorities to early elementary literacy, and opportunities for better alignment with NCDPI's Every Student Succeeds Act Consolidated State Plan), led all stakeholders to look for a new, more relevant SiMR. Beginning with longitudinal analyses of Indicator 1 and 3 data, the OEC followed stakeholder preference/interests in narrowing the investigation to reading outcomes for SWD. Stakeholders selected 4th grade reading as the target for improvement over the course of four meetings in summer/fall 2021. In 2022, the OEC conducted several more rounds of analysis, disaggregating SEA and PSU data by racial subgroups, region, charter/traditional PSU, etc. The OEC determined we could make significant improvement on Indicator 3b/4th grade reading by focusing efforts on PSUs (97 of 294 submitting data in 2020-21) with <25% of all students scoring in the College and Career Ready (CCR) range (a score of 4 or 5 on EOG). Additional analyses were then run with these 97 PSUs to determine if any opportunity gaps existed in 4th grade reading and found that within the SWD subgroup we had a 6.35% point gap between non-white and white SWD. (The OEC later ran this battery of analysis on all NC PSUs to be able to track PSU and SEA progress over time). After identifying the intervention group of PSUs for the new SSIP (via 40 of the 97 PSUs opting in as SiMR-Support PSUs), the OEC recalculated the opportunity gap among the 40 PSUs to arrive at the final SiMR.

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

As described above, the OEC has been in consistent and close contact with stakeholders since summer 2021 related to the SiMR change. In addition to participation in bi-monthly open EC stakeholder meetings in 2022, stakeholders contributed to the SiMR decision via participation on three SPP work groups which include multiple internal and external stakeholders, including parents of SWD, parent TA center representatives, PSU staff, and advocacy organizations. Along with Regional Data Teams (RDTs), these work groups design and implement SSIP priorities. Notably, one of the work groups with stakeholder membership is focused on Data Literacy; this group coordinated and presented most of the SiMR-related analyses with all other stakeholders. In addition, external stakeholders are the intended audience for NCDPI SPP/APR website (<https://www.dpi.nc.gov/districts-schools/classroom-resources/exceptional-children/program-and-fiscal-monitoring/federal-reporting/state-performance-plan-spp-annual-performance-report-apr#:~:text=The%20NCDPI%20State%20Performance%20Plan,outcomes%20for%20students%20with%20disabilities.>), as well, which provides current information about the SSIP and all other indicators.

The OEC also maintains ongoing EC Director communications in the form of monthly webinars, weekly emails, Directors Advisory Council meetings, and quarterly regional EC Director meetings keep local EC leaders engaged in SSIP implementation (e.g., SiMR selection process) throughout the year. The OEC also engaged our state 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) in the SiMR decision-making process.

#### 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.

40 PSUs that opted in as SiMR-Support partners from a group of 97 invited PSUs with <25% of all students scoring in the College and Career Ready (CCR) on the 2020-21 4th grade reading state assessment. Within these 40 PSUs, no more than six elementary schools will be selected as targeted intervention/pilot sites.

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

YES

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

The OEC modified the SSIP Theory of Action (ToA) to reflect what we learned from our infrastructure analysis and our initial, state-level root cause analysis of opportunity gaps in 4th grade reading among SWD racial subgroups. Where the previous ToA relied heavily on OEC-supported identification and implementation of evidence-based practices to improve graduation rates for SWD, the revised ToA incorporates a broader application of the whole general supervision system to support local improvement. By strategically coordinating OEC talent and resources in three lanes of effort—Data, Accountability, and Capacity-building—we anticipate providing more specific and customized support to our SiMR Support PSUs and more actionable/relevant universal support to all PSUs. Further, in targeting two main constructs as the path to improvement—early elementary literacy and beliefs systems involving SWD and students of color—we anticipate a more efficient and coherent installation and monitoring of local supports.

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

<https://docs.google.com/presentation/d/1V8ABYbJdn12i0DJgw66ifyWsmw7SXX5onxJO0e3OCLY/edit?usp=sharing>

**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	2021	2022	2023	2024	2025
Target>=	6.00%	8.50%	11.00%	12.50%	15.00%

**FFY 2021 SPP/APR Data**

SWD of Color in SiMR Support PSUs Who Scored at Career and College Ready on 2020-21 4th Grade Reading State Assessment	SWD of Color in SiMR Support PSUs Who Took the 2020-21 4th Grade Reading State Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
49	1,224	74.51%	6.00%	4.00%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

Although there is a slight reduction (less than 1% point) in our data for the new SiMR, the table above is comparing FFY2021 Data for the new SiMR for NC to our FFY2020 data from our previous SiMR (Graduation) automatically. This comparison is not accurately reflecting the data for the current SiMR.

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

DATA SOURCE FOR FFY 2021 - 2021-22 4th Grade End of Grade Reading data for SiMR Opt-In PSUs

DATA SOURCE FOR FFY 2021 - 2021-22 4th Grade End of Grade Reading data for SiMR Opt-In PSUs

Based on OSEP's guidance for Indicator 17, NC is reporting only on Career and College Ready progress in performance for SWD of Color in 4th grade reading in the SPP/APR table above.

The definition of SoC in North Carolina's SiMR is all non-white students.

The NC SiMR is looking to reduce the gap between white SWD and students of color (SoC) SWD in 4th Grade Reading for districts that have less than 25% College and Career Ready for all students and have opted-in to receive support from the OEC.

The formula is: 4th Grade Reading data for SiMR Opt-In PSUs - % WHITE SWD CCR - % SoC SWD CRR = GAP

The actual percentage point gap data for FY2021 is

%White CCR:12.34%

%SoC CCR:4.00%

FFY2020 Percentage Point Difference: 6.83

FFY2021 Percentage Point Difference: 8.34

Status: Did Not Meet Target

North Carolina has established decreasing percentage point gap targets to significantly reduce the gap between SWD of Color and White SWD over the next 5 years. The targets are:

FFY 2021 - 6

FFY 2022 - 5

FFY 2023 - 3.5  
FFY 2024 - 2.0  
FFY 2025 - .68

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

4th grade reading end-of-grade assessment data are collected from our statewide accountability system and transferred to an internal NCDPI data warehouse (CEDARS). The OEC extracts the file from CEDARS and disaggregates/compares the 4th grade reading data by PSU, region, PSU type, race, gender, disability status, and disability category, at minimum. We also calculate compounding effects of two or more of these conditions (e.g., race x disability status) to determine magnitude of risk for different subgroups. PSUs may also request customized analysis for their unique context (e.g., military affiliation). For the SiMR, we compare white SWD and non-white SWD 4th grade reading CCR status at the district and school level. From there, we can calculate the size and magnitude of opportunity gaps among subgroups which allow for more strategic selection of intervention schools and EBPs.

For the purposes of SPP/APR Reporting, NC will report the College & Career Ready percent of SWD of Color each year with the goal of increasing the percent College and Career Ready as defined in the targets.

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

NO

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

NO

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

NO

**Section B: Implementation, Analysis and Evaluation**

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

FY 2021 SSIP Evaluation Plan - [https://docs.google.com/document/d/1\\_iGuokd857I-WIX515OSWcb5HO\\_Se7fv/edit?usp=sharing&oid=114466409737524691690&rtfpof=true&sd=true](https://docs.google.com/document/d/1_iGuokd857I-WIX515OSWcb5HO_Se7fv/edit?usp=sharing&oid=114466409737524691690&rtfpof=true&sd=true)

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

YES

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

The SSIP evaluation plan for the new SiMR is a complete overhaul from the original graduation-focused plan. The new evaluation plan uses a quasi-experimental design comparing intervention schools from the 40 SiMR support PSUs to schools from the 57 control PSUs over time. The comparison is designed to determine the impact of intensive and collaborative support between the SiMR Support PSUs and the OEC. A more focused SiMR allows for more focused evaluation, with the new plan using just three summative metrics and a much smaller array of formative metrics.

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

The evaluation plan changed because the SiMR changed. The new SiMR has completely different measures of success (4th grade reading), different targets for improvement (select PSUs/schools), different interventions strategies (intensive TA and coaching teams assigned to SiMR support PSUs), and different SWD being positively impacted by improvement efforts (elementary students). As such, we built a new evaluation plan from the ground up in collaboration with our external evaluator at UNC Charlotte over the past six months.

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

Cycle of Local EC Capacity-building Supports – the OEC coordinates a series of capacity-building activities for local systems improvement which includes:

- Quarterly EC Regional Directors meetings
- Bi-Monthly EC Director/Coordinator webinars
- Weekly EC communications & memos
- Monthly and ad hoc topical office hours
- Quarterly statewide EC webinars
- Web-based toolkits, professional learning, data dashboards, and other resources
- Annual EC Conference, March EC Administrator Institute, and EC Summer Institutes

EC Regional Data Teams (RDT) - OEC staff are assigned to 1 of these 4 teams, which are primary implementing unit of SSIP; RDTs analyze regional- and PSU-level root cause of SWD performance across indicators; implement/support universal SSIP outputs; provide tailored and customized data-based support, problem-solving, and coaching; provide forum for PSUs to collaborate through regional EC Director meetings and new director cohorts

SSIP Work Groups - Data Literacy, Stakeholder & Family Engagement, Research-informed Practices, and Systems Coherence groups produce deliverables in alignment with SSIP priorities identified by stakeholders. External stakeholders, including parents of students with disabilities, are key participants in work groups.

Every Child Accountability and Tracking System (ECATS) – this central data support in NC's infrastructure for special education is in its 3rd year of operation and enhancements continue; MTSS module and early warning system now live. Since its launch in 2019, the ECATS system has documented nearly one million IEP meetings, 180,0856 referral meetings, 15,251 manifestation determination meetings, and 2.7 million EC progress reports. Additionally, the use of the online professional learning series supporting the use of ECATS for meaningful IEP processes continues. The Early Warning System( EWS) within the MTSS Module of ECATS allows for viewing and analyzing multiple pieces of data for systematic, data-driven problem solving. The recommended way to look at data gathered from universal screening is within the context of an Early Warning System or EWS. An early warning system is a place that houses multiple sources and types of data. The data are generally designed around research-based, highly predictive, risk indicators of student performance in the areas of academics, behavior and attendance.

NC State Improvement Project (SIP) – Through 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.

Facilitated Assessment of MTSS-District Level (FAM-D and FAM-S) – NC MTSS measures saturation, implementation, and growth on two self-rating tools: the Facilitated Assessment of MTSS - School Level (FAM-S) and the Facilitated Assessment of MTSS - District Level (FAM-D). Both tools are recommended to complete with a facilitator to guide team conversations. Both tools engage implementation teams - the FAM-S at the school level and the FAM-D at the district level.

The FAM-S is intended to be used within a facilitated administration setting which allows district personnel to review evidence to support the school team's proposed score. Participation in the FAM-S is optional. NC DPI recommends an annual facilitated administration between April and June. The facilitated administration is led by the district MTSS/PBIS Coordinator and/or another member of the District MTSS Team. The instrument can be used at any time as an implementation self-report and guide for school leadership teams. District and school teams can utilize the tool to support and align with school improvement planning.

The state NC MTSS team analyzes the 41 items of the FAM-S to identify statewide trends, strengths, and weaknesses. In 2021-22 the highest rated items on the FAM-S (75% or more of school teams rated as either operationalizing (2) or optimizing (3)) included the following items (item content summarized below, full items and rubric are available in the FAM-S:

1. Principal actively involved
3. Teaming structures
21. Engage students, families, stakeholders in MTSS
29. Core Academic Practices
30. Core Behavior Practices

In addition to the item strengths, IABS also identifies areas for improvement. In 2021-22, the following items were rated by 10-13% of schools as not implementing:

10. PD/Coaching is provided to school staff on multiple tiers of instruction and intervention
19. Staff provided data on implementation and outcomes
33. Supplemental behavior and social-emotional practices
34. Intensive academic practices
35. Intensive behavior/social and emotional practices

The FAM-D measures district implementation of the NC MTSS framework. Data from the FAM-D assists district-level personnel to identify and prioritize implementation steps. The instrument contains 25 items in 6 critical components (Leadership, Building Capacity/Implementation Infrastructure, Communication and Collaboration, Problem-Solving Process, Multi-Tiered Instruction/Intervention Model, and Data/Evaluation). Each item is rated using a rubric with the following responses: Not Implementing, Emerging/Developing, Operationalizing, Optimizing.

The FAM-D was developed and validated by the NC MTSS team during the 2020-21 school year. 2021-22 is the first year of available FAM-D data.

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

Cycle of Local EC Capacity-building Supports – (addressed GOVERNANCE/DATA/PROFESSIONAL DEVELOPMENT/TECHNICAL ASSISTANCE) In FY 2021, the focus for local SiMR-related capacity-building has been on orientation to the new SiMR, the new SiMR Self-Assessment (SiMR-SA; see new infrastructure improvement strategies section below), and the Phase I local 4th grade reading data analysis. Spring and Fall 2022 Administrator institutes, regional meetings, and webinars included intensive sessions for PSU EC Directors and their teams to build common language and understanding around opportunity gaps, systemic and structural inequity, belief systems, and courageous conversations when looking at subgroup data. Retention and recruitment of local EC leadership was also a priority, using the community of practice model to strengthen resilience and relationships at the regional level. The outcome of this strategy is that local EC leadership is equipped to engage in Phase I Data Analysis of the SiMR-SA with their stakeholders.

EC Regional Data Teams (RDT) - (addressed DATA/PROFESSIONAL DEVELOPMENT/TECHNICAL ASSISTANCE) highlights of work in FY2021 include data analysis and PSU reviews of educational equity indicators (4, 9, 10), SiMR-focused EBP/improvement strategy inventory, orientation to SiMR Data Analysis, internal systems-level coaching capacity building, PSU EC staffing recruitment and retention, and establishing/strengthening regional communities of practice with local EC Directors. The outcome of this strategy is increasing collaboration between NCDPI and PSUs and between general and special education leaders at the local level.

SPP Work Groups – (addressed GOVERNANCE/DATA/PROFESSIONAL DEVELOPMENT /TECHNICAL ASSISTANCE); five work groups—Data Literacy, Stakeholder & Family Engagement, Research-informed Practices, Educational Equity, and Systems Coherence—were extremely productive in FY 2021. Each group started the year identifying priorities based on findings from the 2021 OEC Infrastructure analysis. Data Literacy coordinated multiple state, district and school-level analyses for the SiMR and led capacity-building sessions for local EC leadership across a variety of meetings and platforms. Stakeholder & Family Engagement developed multiple IEP resources for parents in collaboration with our EC parent TA center and partnered with NCPTA's EC subcommittee on multiple presentations. They also supported development and analysis of the Indicator 8 survey, which will serve as a formative measure for one of the SSIP evaluation plan goals. Research-informed Practices supported literature reviews and maintenance of the professional learning library. Educational Equity continued internal capacity-building for OEC staff on belief systems, biases, and disproportionality. Systems Coherence continued to coordinate all internal and external stakeholder meetings, OEC and RDT capacity-building related to the new SiMR, and development of the annual Indicator 17 report. The outcome of this strategy is increased stakeholder engagement, increased collaboration within NCDPI, and more efficient and meaningful development of resources for PSUs.

Every Child Accountability and Tracking System (ECATS) - (addressed GOVERNANCE/DATA/ACCOUNTABILITY) – The outcome of this strategy is



that user satisfaction with ECATS continues to grow and utilization of the required IEP module is robust. System repairs are conducted in a timely manner and feedback cycles from field to DPI and back support system maintenance/currency with policy and practice changes. For the ECATS MTSS Early Warning System (EWS), we adopted the common measures at the high school level and then adapted what we know about academic screening indicators to provide indicators at the middle and elementary levels. With the data available in a state-wide EWS, we will be able to refine the indicators and cut points on a regular basis to better predict students who may require intervention. The early warning indicators in ECATS MTSS include attendance, behavior data in the form of office discipline referrals and In-School Suspension/Out of School Suspensions, and academic indicators. The academic indicators include historical information such as grades and end of year test scores as well as universal screening results from third party vendors. The indicators are associated with risk levels. These risk levels are informed by research, national guidance, and third party vendor recommendations. The Attendance indicators are triggered by attendance data – excused & unexcused absences; attendance data is the single data source that informs the attendance indicator in the EWS; the Behavior indicators are triggered by discipline data – in school and out of school suspension; behavior incidents and in-school/out of school suspension incidents are the data source that informs the behavior indicator in the EWS; the attendance and behavior indicators are the most straightforward and align most closely with the original design of an early warning system. For academics, we have a variety of measures that may inform the indicator in the EWS. In order to prevent over identification of students at-risk these measures fire in a hierarchical fashion based on what we know are the most accurate indicators. Across all grades, if districts are using one of the third party screening tools that will feed into ECATS, the cut points for risk associated with the assessment will inform the EWS. Generally, screening and progress monitoring measures are well researched and the cut points are an accurate predictor of later success in the associated academic area.

NC State Improvement Project (SIP) - (addressed DATA/FINANCE/QUALITY STANDARDS/PROFESSIONAL DEVELOPMENT/TECHNICAL ASSISTANCE) North Carolina State Improvement Project (NC SIP) is the professional development and technical assistance branch of our systems framework addressing achievement gaps for SWD to promote evidence-based practices in literacy and mathematics instruction. FFY2021 outcomes include launch of Asynchronous Online Course for All Leaders aimed at building district and school administrators capacity to dig deeper using Implementation Science to support improvement of core content instruction and achievement of SWDs; expansion of Institutes of Higher Education partners from seven to ten to include representation of every region across the state; inclusion of representatives from the Office of Academic Standards, English Language Arts consultants, on the Adolescent Literacy Planning team. The outcome of this project is that more SWD have increased access to a teacher trained in the science of reading and foundations of math.

Facilitated Assessment of MTSS-District Level (FAM-D and FAM-S) - (addressed DATA/QUALITY STANDARDS/PROFESSIONAL DEVELOPMENT/TECHNICAL ASSISTANCE) - see FAM-D/S description in previous item for outcomes.

THIS SECTION IS CONTINUED IN ADDITIONAL INFO AT THE BOTTOM OF THE INDICATOR.

**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.**

Given the work groups are the main design structures for the SSIP, new improvement strategies are organized by each group's new output for FY 2021 below:

- Data Literacy – developed the SiMR Self-Assessment website and associated resources, including multiple interactive data dashboards for PSUs as they conduct the phase I data analysis; completed and delivered to PSUs a school-level subgroup gap analysis for 4th grade reading. The outcome of this effort is that PSUs are engaging in focused data and root cause analysis of SWD opportunity gaps in early elementary reading.
- Stakeholder & Family Engagement - created data sharing templates for PSUs to use with local stakeholders. No outcomes yet due to the early stage of implementation.
- Research-informed Practices – designed and delivered for OEC capacity-building a Systems-Level Coaching Practice Profile which will guide activity and assessment of OEC SiMR Support teams. No outcomes yet due to the early stage of implementation.
- Educational Equity – coordinated monthly statewide equity speaker series webinars. No outcomes yet due to the early stage of implementation.
- Systems Coherence – designed the new SiMR Self-Assessment, replacing the previous PSU Self-Assessment; designed online workspaces and submission portal for SiMR Self-Assessment, Phase I Data Analysis submission. The outcome of this effort is that PSUs are engaging in focused data and root cause analysis of SWD opportunity gaps in early elementary reading.

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

Cycle of Local EC Capacity-building Supports – for FY 2022, the OEC will be supporting local capacity to conduct root cause analysis of 4th grade reading outcomes and opportunity gaps with a major emphasis on stakeholder partnerships. Spring Administrator Institutes will prepare local EC leaders to conduct root cause analysis and respond via relevant/district and school wide improvement planning channels. OEC SiMR Support teams will model and coach local stakeholder data reflection and problem-solving meetings. We will continue to expand/evolve the SiMR Self-Assessment website as we move into subsequent phases of the project. Anticipated outcomes are local district and school improvement planning will be more inclusive of SWD/special education programs and problem-solving will target systemic inequities in opportunities to learn.

EC Regional Data Teams (RDT) – RDTs will review PSU submissions of SiMR data analysis, root cause analysis, and improvement plans; RDT members will provide universal support to PSUs in each region via regional meetings, webinars, and conferences. Anticipated outcomes are the OEC will design and deliver support based on local strengths and needs.

SPP Work Groups – Work groups will be developing tools and resources for PSUs, SiMR Support teams, and RDTs as each phase of the SiMR Self-Assessment is implemented. PSUs will continue to be provided tools and resources for completing each phase of the SiMR Self-Assessment via the capacity-building activities described above. Anticipated deliverables for RDTs include review tools for data and root cause analysis, as well as data for formative assessment of progress on SSIP evaluation goals. SiMR Support teams will be equipped with coaching logs, implementation planning templates, and reflection tools to use in their work with SiMR Support PSUs. Anticipated outcomes are local district and school improvement planning will be more inclusive of SWD/special education programs and problem-solving will target systemic inequities in opportunities to learn.

Every Child Accountability and Tracking System (ECATS) – Our goal is to integrate identified third party vendors screening and progress monitoring data to increase the data in the EWS to help districts, charters and state operated programs to inform their core and intervention planning, problem solving and progress monitoring within this system.

NC State Improvement Project (SIP) – Through Priority 3 work, NC SIP staff and PSU partner have identified and invited a high needs school (Low Performing School within a Low Performing District) to participate in a focused support to improve achievement of students with disabilities through a selection of evidence-based professional development. After a data analysis, the identified school has chosen to focus their professional development and coaching support around literacy and family engagement. The NC SIP State Team is currently working on improvement and extension of our data collection system to include a student engagement measure for the project and data visualizations of submitted data per PSU. These improvements/enhancements will promote improved analysis and data-driven problem solving /improvement planning for literacy and mathematics instruction across partnering PSUs.

Systems-level Coaching Practice Profile – as mentioned above, we will be developing a coaching log and reflection tool for each systems-level coaching session held with OEC and PSUs SiMR Support teams. Given the fundamental ‘intervention’ in our SSIP evaluation strategy is intensive coaching and TA for SiMR Support PSUs, PSUs experience/assessment of OEC support will be one important aspect of determining intervention effectiveness.

Facilitated Assessment of MTSS-District Level (FAM-D and FAM-S) - As in the past, we are using this data and other data to tailor our statewide support. We are leveraging the strengths demonstrated in teaming structures and core and academic practices to strengthen our areas of opportunities. Therefore, we are supporting district and school teams with supplemental and intensive academic and behavioral practices and support, creating implementation plans, using and analyzing data for problem solving. This statewide support is happening during Regional, Statewide Networking Sessions and through district and school team and coordinator/stakeholder technical assistance and coaching. We anticipate seeing increased implementation of all essential elements and critical components of NC MTSS.

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

While the OEC will continue to implement many of the EBPs associated with/documented in the previous SSIP, we are excited to create more focus and alignment with other NCDPI literacy efforts in this more streamlined array of EBPs for early elementary reading. The relevant EBPs for achieving the new 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 - This project is designed to help improve child outcomes for preschool children with disabilities and to increase opportunities for instruction in the least restrictive environment (LRE). Based on the preschool pyramid model, developed by the Center on the Social and Emotional Foundations for Early Learning, this tiered framework of evidence-based practices promotes healthy social-emotional development for ALL children birth through 5 years of age. The Preschool Pyramid Model (PPM) promotes strategies to help teaching staff 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 PPM 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 PPM effectively promotes—is a strong predictor of early elementary literacy success.

#### **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 SWD scoring at College/Career-Ready level 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 College/Career-Ready level 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 tested in multiple research projects and has shown evidence for promoting young children’s social and emotional skills and decreasing child challenging behavior; PPM implementation increases the likelihood of kindergarten readiness for SWD and creates conditions favoring SWD access to structure literacy learning environments.

#### **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/Teacher Reflection Tool used at all NC SIP sites

-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 - Teaching Pyramid Observation Tool (TPOT) provides practitioner coaches concrete information as to how teachers are implementing Pyramid practices in the classroom; used at all NC PPM sites; NC Early Learning Network (NC-ELN) project staff provided a total of 963 technical assistance (TA) contacts to both PPM and non-PPM PSUs; these TA contacts were requested by 95 PSUs and provided by NC-ELN project staff, with an average of 10 TA contacts provided to each of the PSUs requesting support. The project also developed content for, organized, and presented a total of 32 professional development events that were attended by 769 educators from across the state. ELN staff also participated in a total of 121 project implementation planning and data meetings to support, track and report progress on the contract scope and related work. Of those meetings, 34 included the Part B 619 Coordinators.

**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.**

This is our first year of implementation of this SSIP, so we do not yet have progress monitoring data to use for EBP continuation decisions.

**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) - currently working on improvement and extension of our data collection system to include a student engagement measure and data visualizations of submitted data per PSU. The anticipated outcome is that these enhancements will promote improved analysis and data-driven problem solving /improvement planning for literacy and mathematics instruction across partnering PSUs.

-LETRS – continue statewide 3-cohort training model implementation

-Literacy Instruction Standards (LIS) – create/disseminate crosswalks with LIS and High-Leverage Practices, explicit instruction, and specially designed instruction principles

-Preschool Pyramid Model – continue reviewing and updating content and trainer materials to include new research and clarification, as well as a number of facilitated Stakeholder meetings to review and inform the newly developed Foundations for Early Learning and Development/Pyramid Tier III Practices modules.

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

YES

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

This is our first year of implementation of this SSIP, so we do not yet have evaluation data to use for continuous improvement.

## **Section C: Stakeholder Engagement**

### **Description of Stakeholder Input**

In FY2021, the OEC continued to engage stakeholders in the review and revision of the State Systemic Improvement Plan (SSIP), data analysis and target setting around the new State Identified Measurable Result (SiMR). OEC consultants and leadership met with both internal and external stakeholders twice monthly to review progress on all Indicators, with a focus on Indicators 3, 4, 9 and 10 and the new collaborative review process as well as engage in resource gathering, training on data analysis and vetting of tools in preparation for the new SiMR Self Assessment. The external SSIP team includes representation from across the agency as well as, The Council on Educational Services for Exceptional Children, PSU EC Directors, Coordinators and administrators, OSEP funded technical Assistance Centers and Parent Advocacy groups. Additional 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).

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

In addition to the stakeholder engagement strategies described in the introduction, SSIP work groups membership includes multiple internal and external stakeholders, including parents of SWD, parent TA center representatives, PSU staff, and advocacy organizations. Along with RDTs, these work groups design and implement SSIP priorities (see description of work group activity in the Infrastructure improvement section above). Notably, one of the work groups is focused on Stakeholder and Family Engagement; this group has conducted surveys with parents and created educational resources (in English and Spanish) re: the IEP process, discipline for SWD, etc.

External stakeholders are the intended audience for the NCDPI SPP/APR website, as well, which provides current information about the SSIP and all other indicators.

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., PSU 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 EC Division; 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.**

1. Universal and intensive support for PSUs' completion of SiMR Data Analysis
2. OEC Review of PSUs' submitted SiMR Data Analysis
3. Universal and intensive support for PSUs' completion of SiMR Root Cause Analysis
4. OEC Review of PSUs' submitted SiMR Root Cause Analysis
5. Universal and intensive support for PSUs' aligned early elementary literacy improvement/intervention plan

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

1. Universal and intensive support for PSUs' completion of SiMR Data Analysis – Jan, 2023; submissions will be collected via Qualtrics; will inform state and local root cause analysis of opportunity gaps for SWD in early elementary literacy
2. OEC Review of PSUs' submitted SiMR Data Analysis – Feb-Mar, 2023; thematic analysis of review data will inform both universal and customized OEC coaching, professional learning, and technical assistance with PSUs re: data literacy and root cause investigation
3. Universal and intensive support for PSUs' completion of SiMR Root Cause Analysis Mar-June, 2023; submissions will be collected via Qualtrics; will ensure stakeholder participation/perspective in identifying local drivers of inequity in opportunity and outcome for SWD in early elementary literacy
4. OEC Review of PSUs' submitted SiMR Root Cause Analysis – July-Aug, 2023; thematic analysis of review data will inform OEC coaching, professional learning, and technical assistance with PSUs re: coherent improvement planning for SWD in early elementary literacy
5. Universal and intensive support for PSUs' aligned early elementary literacy improvement/intervention plan, Fall, 2023; data will be collected from revised local Literacy Intervention Plans and will drive state and local collaboration between general and special education programs to ensure SWD access to general education curriculum in early elementary literacy

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

None in addition to what we reported in FY 2021 (i.e., EC staffing crisis and impact on opportunities to learn for SWD)

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

CONTINUED: 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.

In addition to the item strengths, IABS also identifies areas for improvement. In 2021-22, the following items were rated by 10-13% of schools as not implementing:

10. PD/Coaching is provided to school staff on multiple tiers of instruction and intervention
19. Staff provided data on implementation and outcomes
33. Supplemental behavior and social-emotional practices
34. Intensive academic practices
35. Intensive behavior/social and emotional practices

As with the FAM-S, the FAM-D results are analyzed to determine areas of strength and opportunity. In 2021-22 the highest rated items on the FAM-D (55-75% or more of district teams rated as either operationalizing (2) or optimizing (3)) included the following items (item content summarized below, full items and rubric are available in the FAM-D:

1. MTSS is evident in district policy
2. There is a district team leading MTSS
5. The essential elements of MTSS are understood by district staff
9. The district ensures school schedules provide adequate time for implementation of multiple tiers of instruction and intervention
16. Core Academic practices
22. A comprehensive assessment plan exists

The following items were most frequently rated as "not implementing" by district MTSS teams:

3. A 3-5 year MTSS implementation plan exists
4. District staff receive professional learning related to MTSS
14. Student outcome data is problem-solved
15. Implementation data is problem-solved
21. Intervention protocols are evident for behavior/social and emotional learning

## **17 - Prior FFY Required Actions**

None

## **17 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision. OSEP notes that the FFY 2020 data in the FFY 2021 data table reflects a different data source than the FFY 2021 data.

The State revised its FFY 2021-2025 targets for this indicator, and OSEP accepts those targets.

OSEP notes that the State reported "SWD of Color in SiMR Support PSUs Who Scored at Career and College Ready on 2020-21 4th Grade Reading State Assessment" as the numerator, and "SWD of Color in SiMR Support PSUs Who Took the 2020-21 4th Grade Reading State Assessment" as the

denominator in its calculation of the SiMR. However, the State reports the SiMR is, "NC will reduce the 6.83% point gap between students of color (SoC) with disabilities (4.19% career and college ready; CCR) and white students with disabilities (11.02% CCR) by 90% in the 40 public school units (PSUs) with <25% all-student proficiency in 4th grade reading that opted-in as SiMR Support partner PSUs." Therefore it is unclear whether the State has revised its SiMR.

### **17 - 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.

## 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:**

Kelley Blas

**Title:**

IDEA Technical Analyst

**Email:**

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**Phone:**

919-464-4029

**Submitted on:**

04/27/23 3:00:31 PM

## Determination Enclosures

### RDA Matrix

## 2023 Part B Results-Driven Accountability Matrix

### Results-Driven Accountability Percentage and Determination<sup>1</sup>

Percentage (%)	Determination
68.75%	Needs Assistance

### Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
<b>Results</b>	24	15	62.50%
<b>Compliance</b>	20	15	75.00%

### 2023 Part B Results Matrix

#### Reading Assessment Elements

Reading Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	92%	2
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	89%	1
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	23%	1
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	91%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	24%	1
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	87%	1

#### Math Assessment Elements

Math Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	92%	2
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	89%	1
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	35%	0
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	91%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	19%	1
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	93%	1

<sup>1</sup> For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B."

**Exiting Data Elements**

<b>Exiting Data Elements</b>	<b>Performance (%)</b>	<b>Score</b>
<b>Percentage of Children with Disabilities who Dropped Out</b>	15	1
<b>Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**</b>	79	1

\*Due to privacy concerns the Department has chosen to suppress this calculation.

\*\*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."



## 2023 Part B Compliance Matrix

Part B Compliance Indicator <sup>2</sup>	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	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.	0.00%	N/A	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.00%	N/A	2
Indicator 11: Timely initial evaluation	68.03%	NO	0
Indicator 12: IEP developed and implemented by third birthday	77.71%	YES	1
Indicator 13: Secondary transition	60.40%	YES	0
Timely and Accurate State-Reported Data	95.24%		2
Timely State Complaint Decisions	96.00%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

<sup>2</sup> The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: [https://sites.ed.gov/idea/files/2023\\_Part-B\\_SPP-APR\\_Measurement\\_Table.pdf](https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR_Measurement_Table.pdf)

Data Rubric

FFY 2021 APR<sup>3</sup>

Part B Timely and Accurate Data -- SPP/APR Data		
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1

APR Indicator Calculation	Subtotal
	21

APR Score Calculation	Timely Submission Points and Grand Total	Total
	<b>Timely Submission Points</b> - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	<b>Grand Total</b> - (Sum of Subtotal and Timely Submission Points) =	26

<sup>3</sup> 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 <sup>4</sup>			
Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 4/6/22	1	1	1	3
Personnel Due Date: 11/2/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Discipline Due Date: 11/2/22	1	1	1	3
State Assessment Due Date: 12/21/2022	1	0	1	2
Dispute Resolution Due Date: 11/2/22	1	1	1	3
MOE/CEIS Due Date: 5/4/22	1	0	1	2

618 Score Calculation			Calculation Type	Score
			Subtotal	19
			Grand Total (Subtotal X 1.23809524) =	23.52

<sup>4</sup> 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	Indicator Calculation Score
A. APR Grand Total	26
B. 618 Grand Total	23.52
C. APR Grand Total (A) + 618 Grand Total (B) =	49.52
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
<b>Denominator</b>	52.00
D. Subtotal (C divided by Denominator*) =	0.9524
E. Indicator Score (Subtotal D x 100) =	95.24

**\*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.**

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

**DATE: February 2023 Submission**

### SPP/APR Data

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

### Part 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	1 <sup>st</sup> Wednesday in April
Part B Personnel	C070, C099, C112	1 <sup>st</sup> Wednesday in November
Part B Exiting	C009	1 <sup>st</sup> Wednesday in November
Part B Discipline	C005, C006, C007, C088, C143, C144	1 <sup>st</sup> Wednesday in November
Part B Assessment	C175, C178, C185, C188	Wednesday in the 3 <sup>rd</sup> week of December (aligned with CSPR data due date)
Part B Dispute Resolution	Part B Dispute Resolution Survey in EMAPS	1 <sup>st</sup> Wednesday in November
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in EMAPS	1 <sup>st</sup> Wednesday in May

**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



## How the Department Made Determinations

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

<https://sites.ed.gov/idea/how-the-department-made-determinations/>