

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2024**

South Dakota



PART B DUE February 2, 2026

**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.

Number of Districts in your State/Territory during reporting year

148

General Supervision System:

The systems that are in place to ensure that the IDEA Part B requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions). Include a description of all the mechanisms the State uses to identify and verify correction of noncompliance and improve results. This should include, but not be limited to, State monitoring, State database/data system, dispute resolution, fiscal management systems as well as other mechanisms through which the State is able to determine compliance and/or issue written findings of noncompliance. The State should include the following elements:

Describe the process the State uses to select LEAs for monitoring, the schedule, and number of LEAs monitored per year.

The State Education Agency (SEA) maintains a comprehensive general supervision system designed to ensure full implementation of IDEA Part B requirements and to improve academic and functional outcomes for children with disabilities. The system integrates multiple mechanisms—including monitoring, data systems, fiscal oversight, dispute resolution, technical assistance, and enforcement—to identify, correct, and prevent noncompliance across all LEAs and approved programs. These mechanisms operate together to provide a comprehensive general supervision system as discussed below.

Accountability Reviews

The SEA conducts accountability reviews of LEAs and approved programs on a six year cycle, reviewing approximately 24 LEAs and five approved programs each year. Each review examines multiple sources of data and evidence, including child count verification, district policies and procedures along with each LEA's special education comprehensive plan, special education staff certification, representative student file reviews across disability and placement categories, and, as appropriate, reviews of private school services, service plans, assessment accommodations, and program purchases. Indicator 13 data are also collected as part of each accountability review.

In addition to the scheduled cycle, the SEA conducts focused on site or off site reviews when monitoring data or other information indicates a potential concern. Triggers for focused reviews include significant disproportionality, extraordinary cost fund review findings, potential over participation in the alternate assessment, unusual data patterns, persistent data quality issues, and follow up to findings from SPP compliance indicators, state complaints or due process hearings. The SEA also evaluates credible information from stakeholders or other sources to determine whether additional record review or monitoring is necessary. This ensures that the general supervision system is responsive to emerging concerns, even outside of the scheduled monitoring cycle.

Results Driven Accountability (RDA)

RDA is a component of the SEA's general supervision system and utilizes a risk rubric that incorporates SPP/APR performance indicators and additional results data, that focus on improving educational outcomes for students with disabilities. The rubric assigns each LEA to a support level (Level 1–3). All LEAs conduct annual internal file reviews, identify professional development areas of need, and submit these professional development areas to the SEA for statewide planning purposes. LEAs in Levels 2 and 3 participate in data retreats, receive coaching, complete internal reviews with support, and develop and implement action plans to address identified results needs that may be related to instruction, compliance, or other areas. RDA supports complement—rather than replace—other monitoring and supervision mechanisms.

State Data Systems

The SEA uses statewide data systems to assess compliance, monitor performance, identify potential issues, and guide improvement. Data systems include IDEA 618 collections, discipline data, assessment data, enrollment data, and other reporting structures. Data are reviewed for accuracy, completeness, and timeliness, and anomalies trigger follow up inquiries or monitoring. The SEA uses these data to verify required public reporting, inform LEA determinations, and identify areas requiring technical assistance or further monitoring.

Dispute Resolution

The SEA administers state complaints, mediation, and due process hearings consistent with IDEA requirements. Written decisions include findings of fact, conclusions, and required corrective actions. Corrective actions may include compensatory services, submission of corrected individual student files and subsequent systemic corrections, policy revisions, or other remedies. Dispute resolution outcomes are integrated into the general supervision

system and may lead to issuance of findings, focused monitoring, or additional oversight. The SEA monitors corrective actions to ensure full implementation and correction within required timelines.

Fiscal Monitoring

Fiscal monitoring encompasses the review and approval of all IDEA Part B 611 and 619 applications, including review of budgets for Coordinated Early Intervening Services (CEIS) and Comprehensive CEIS (CCEIS), when applicable. LEAs must maintain separate accounting for federal funds, including 611, 619, CEIS/CCEIS, and private school proportionate share. The SEA reviews accounting records, general ledger reports, reimbursement requests, and supporting documentation to ensure all expenditures align with approved budgets and IDEA requirements.

The SEA verifies alignment between federal expenditures and program implementation by reviewing time and effort records, personnel assignments, procurement documentation, and equipment purchases. Equipment purchased with IDEA funds must meet requirements for necessity and allowability and must be included in LEA property records. Through cross cutting fiscal reviews, the SEA monitors compliance with supplement not supplant requirements, checks for program income, and ensures contractors and vendors meet federal procurement standards.

Maintenance of Effort (MOE) eligibility and compliance tests are conducted annually. LEAs submit estimated expenditures for eligibility and actual expenditures for compliance. Allowable exceptions are reviewed based on proper documentation. When MOE is not met and no allowable exception applies, the SEA issues noncompliance and requires repayment of the shortfall.

If an LEA has private schools within its boundaries, the SEA verifies that the LEA conducts required consultation, expends the designated proportionate share amount, and documents the provision of equitable services. When services are provided by private school personnel, the SEA ensures these activities comply with IDEA requirements.

For LEAs identified with significant disproportionality, the SEA requires CCEIS set aside funds, including review of LEA policies, practices, and procedures and monitoring of targeted services for both students with and without IEPs.

Describe how student files are chosen, including the number of student files that are selected, as part of the State's process for determining an LEA's compliance with IDEA requirements and verifying the LEA's correction of any identified noncompliance.

Accountability Reviews

For accountability reviews, the SEA selects files to review based on a combination of data, including the December 1 child count, disability categories, least restrictive environments represented within the LEA, and current student list per case manager. The SEA identifies one student file per case manager in the LEA to complete a one-to-one file review. Files are selected from students currently attending the LEA who have had an initial evaluation or reevaluation in the past year. Additional independent desk audits are conducted to ensure all file selection criteria are met. If applicable, parentally placed private school student files are included in the review. The SEA also utilizes the LEA's special education exiter data to select files for students who graduated or aged out to ensure a parental prior written notice (PPWN) for change of placement and summary of performance document was completed.

Indicator 13 data collection and individual file reviews follow the same six-year cyclical schedule as accountability reviews. SEA file selection is based on the number of case managers overseeing transition age IEPs, out-of-district placements, and representation of students across all disability categories represented within the transition age range for each LEA. SEA ensures coverage of all areas by reviewing at minimum two files per case manager. SEA staff review individual files using the regulatory requirements in the Indicator 13 checklist, which can be located at <https://doe.sd.gov/sped/documents/I13-checklist.pdf>.

SPP/APR Indicator Data

For Indicator 4B all LEAs submit suspension and expulsion data annually. All LEAs with students suspended/expelled for greater than 10 days are considered in the SEA's state mean rate calculation. The SEA reviews a sample number of files from LEAs that exceeded the threshold for suspension/expulsion for greater than 10 days. The number of files requested by the SEA is determined by the number of students the LEA had suspended. Files were selected from students who are suspended during the data collection period. For LEAs suspending 1-5 students, one file was requested. For LEAs suspending 6-10 students, two files were requested. If a LEA has more than 10 students, additional files would be reviewed. The SEA also reviews the LEA's written policies and procedures for compliance. If noncompliance is noted, the LEA policy and procedure team participates in technical assistance training on suspension/expulsion policies, procedures, and practices. The LEA updates their policies, procedures, and practices which are reviewed by the SEA to confirm they meet regulatory requirements. The LEA then trains staff on the updated LEA policies and procedures. Each flagged LEA is required to submit one additional file for a student who had a manifestation determination since the notification of noncompliance to ensure the updated compliant policies and procedures are being implemented.

Indicator 11 and 12 data include all LEAs and all students in the LEA who have received an initial evaluation or transition evaluation during the reporting period. Data is submitted to the SEA using a SEA database. The process for validating Indicator 12 data includes a review of the Part C exiting data to verify all children receiving Part C services who turned three years old are accounted for in the LEA's submission. The SEA reviews individual student files, which may include the referral, parental prior written notice (PPWN), and eligibility documentation to determine if the LEA completed an evaluation and determined eligibility for each student file found out of compliance. To verify continued compliance, the SEA reviews the LEA's subsequent Indicator 11 and 12 data submission during the following FFY. If the LEA does not show continued compliance with the first set of submitted updated data, the LEA is required to submit additional updated data on all initial evaluations through the SEA database until the SEA has verified compliance with the regulatory requirements.

Verification of correction on noncompliance:

For all compliance indicators and accountability monitoring, if noncompliance has been identified, a finding in the form of a Corrective Action Plan (CAP) is issued by the SEA. The CAP includes each instance of identified noncompliance, data to support the finding, citation of the statute or regulation, and actions the LEA must take to meet compliance. For individual findings of noncompliance, the CAP requires the case manager, or the appropriate designated staff to correct the findings of noncompliance and receive technical assistance in the area of noncompliance. All individual corrections (immediate fixes) are submitted to the SEA, generally within 60 days from the date findings were issued, and the SEA verifies the correction. If a systemic issue is identified, the LEA will also revise or develop written procedures and submit to the SEA.

The designated LEA level staff will submit an additional file to show they are correctly implementing regulatory requirements. In some cases, for a systemic issue, all schools in the LEA will be required to submit follow up documentation to demonstrate continued compliance. If the LEA does not have another student file to demonstrate compliance, staff will be trained on the written policies and procedures or if necessary, submit a case study.

Describe the data system(s) the State uses to collect monitoring and SPP/APR data, and the period from which records are reviewed.

LEAs report student information in the State's Student Information Management System (SIMS) on an ongoing basis. Data collected in SIMS includes student demographics, educational data and special education enrollment data. The SIMS data elements are used for reporting for child count and Indicators 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, and 17. LEAs are required to verify and report data during two official collection points each fiscal year.

Launchpad is a state developed system for collecting child count data and Indicators 4, 11, 12 and 14. Child count data includes data sets for Indicator 5, 6, 9 and 10. Child count data is reviewed and verified by the SEA from December to February of each year. LEAs submit Indicator 4 data by June 30 of each year, and the SEA validates the submission from July to September. Indicator 11 data is submitted by August 1 and Indicator 12 data is submitted by September 1 of each year; the data is reviewed and verified from August to October. Indicator 14 data is collected in two parts: Appendix A exiter data and Appendix B survey data. For Appendix A exiter data, LEAs can either enter student demographic information and IEP information on exiters from August to October or the SEA will upload the student demographic information for LEAs to verify and complete in August. The Appendix A data is then used to collect Appendix B survey data from all leavers from June to October the following year. Appendix B data is uploaded into Launchpad after the collection period has ended. The SEA reviews and validates the Appendix B survey data in November.

The SD Assessment Gateway is a web-based portal for collecting student English Language Arts (ELA), Math, Science, and Science Alternate (Alt)-Assessment data for Indicator 3. ELA-Alt and Math-Alt Assessment student data is collected through the Multi-State Alternate Assessment web-based portal. Assessment data for both regular and alternate assessments are reviewed and validated by LEA and SEA staff annually between August and September.

Indicator 7 entry and exit data is entered by the LEAs throughout the school year into Riverside Score, a web-based program. The SEA extracts the prior school year data in August. After reviewing and verifying the data from August to October, the SEA uploads the data into the state's longitudinal data system (LDS), where LEA and SEA reports are generated. The SEA reviews the reports for data accuracy between October and November. The SEA completes two data pulls from Riverside Score, one in the winter and one in the spring, to conduct data review and validation. LEAs are notified if data entry errors are identified and are directed to correct the entry errors before final extraction used for Indicator 7 reporting.

Indicator 8 data is collected annually through the SD Parent Involvement Survey. The SEA distributes paper surveys to each LEA for all parents of students with disabilities receiving special education services. An online survey option is also available for all respondents. LEAs distribute the surveys throughout the reporting period from August to May. Parents can submit their survey at any time during the reporting period. Paper and online survey responses are collected by a vendor contracted by the SEA. The SEA monitors LEA response rate data throughout the school year. The SEA reviews and validates the data in August then uploads LEA reports into the state's LDS where LEAs can review their individual but not for public data reports.

Data for Indicators 15 and 16 is collected through an Excel spreadsheet that is updated and reviewed on an ongoing basis throughout the reporting year by the SEA. The data collection is part of the tracking used for all dispute resolution processes. The data collection includes the date the request was submitted, the person filing, LEA name, advocacy involvement, investigator or hearing officer assigned, findings, corrective action required, dates notification letters were issued, corrective action due dates, and completion dates.

Accountability Review System:

The accountability review system and Indicator 13 data collection utilize a secure SharePoint folder to collect and distribute information between the SEA Accountability Manager, Indicator 13 lead, SEA review team, and the LEA. The LEA uploads documentation to identify the case managers, the comprehensive plan, written procedures, individual noncompliance corrections, and documentation for verification for correction of noncompliance. The review team utilizes the Digital Compliance Review form (DCR) for reviewing student files. The DCR is a spreadsheet that collects all individual identification of noncompliance noted. Indicator 13 data is collected through the Transition Digital Compliance Review (TDCR) collection form. Both the DCR and TDCR compile accountability review information for each LEA. The SharePoint folder also houses all supporting documentation of noncompliance, CAP notification and closure letters, along with all required LEA documentation for the verification of noncompliance. Accountability reviews and Indicator 13 reviews occur from the end of September until February 1 annually. Verification of correction and implementation of regulatory requirements occurs until the LEA completes the CAP within the one-year timeline.

Describe how the State issues findings: by number of instances or by LEAs.

The SEA issues findings of noncompliance by LEA, which includes each Administrative Rule of South Dakota (ARSD) identified as noncompliant. The CAP identifies individual instances of noncompliance that must be corrected within 60 days and verification of continued compliance within one year.

If applicable, describe the adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction).

SD does not allow or have policies and procedures to allow LEAs to correct noncompliance prior to issuing a finding.

Describe the State's system of graduated and progressive sanctions to ensure the correction of identified noncompliance and to address areas in need of improvement, used as necessary and consistent with IDEA Part B's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

Generally, the SEA will follow a five-step compliance and progressive sanctions process.

STEP 1 – Technical Assistance: Technical assistance occurs continuously based on direct request by an LEA or through identification of a need by the SEA, such as missing or incomplete data submissions or providing inadequate documentation.

STEP 2 - CAP: A CAP is issued when a LEA is identified with a deficiency. LEAs will receive a report of issues or findings, and corrective actions required to come into compliance. The SEA will ensure LEAs submit the CAP requested by the deadlines and monitor the progress of each CAP.

STEP 3 – Warning Letter: The LEA will receive a notification letter informing them of the failure to provide requested information or failure to meet the CAP requirements or timelines. The letter will provide a timeline to address the original request or CAP requirements and provide a list of possible sanctions for failure to meet the timeline for correction.

STEP 4 – Letter to Initiate Sanctions: The LEA will receive a notification letter with sanctions outlined for failure to meet requirements. The letter will identify and provide the LEA with the sanction(s) DOE will implement. In addition, the letter will notify the LEA of the opportunity to request a hearing.

STEP 5 - Hearing: The DOE will hold a hearing if a hearing is requested by the LEA.

The DOE may impose sanctions which could include loss of state and federal funds and loss of accreditation for the LEA under ARSD Chapter 24:05:20. The LEA would have a right to a hearing prior to the DOE taking these actions.

The DOE may attempt to resolve noncompliance by designating the subrecipient as a “high risk grantee” and impose the specific conditions established under 2 CFR 200.208(b) and (c) as “high-risk conditions”.

The DOE will consider whether to impose specific conditions on a LEA’s subgrant. A specific condition is an extra requirement placed on a subgrant to help ensure the LEA complies with federal requirements. The DOE can impose specific conditions when: a LEA’s financial instability, management systems, grant management performance, audit history, or ability to implement federal requirements poses risks to federal funds; a LEA has a history of failing to comply with subgrant terms and conditions; a LEA fails to meet expected performance goals, or when a LEA is otherwise not responsible.

Specific conditions could include the following: requiring payments as reimbursements, rather than advance payments, require the LEA to demonstrate it performed one part of a project successfully before moving on to the next, require additional, more detailed financial reports, require additional project monitoring, requiring the LEA to get technical or management assistance, or requiring the LEA to get DOE’s prior approval before taking certain actions.

If the DOE imposes a specific condition, it must tell the LEA the following: what the condition is, why it is being imposed, what actions must happen for the condition to be removed, the timeframe the LEA has to complete any required actions, and how the LEA can request reconsideration of the requirements imposed by the condition.

The SEA will promptly remove a condition once the issue that prompted the condition has been corrected.

If noncompliance cannot be remedied by imposing additional “high risk conditions”, the DOE may take one or more of the following actions under 2 CFR 200.339 as appropriate in the circumstances; temporarily withhold grant payments pending correction of the deficiency; disallow all or part of the cost of the activity not in compliance; in whole or partly suspend or terminate the grant award; initiate suspension or debarment proceedings; withhold further federal awards for the project or program, or; take other legally available remedies.

Depending on the enforcement action taken, a LEA may be entitled to a hearing if requested under EDGAR § 76.783.

Describe how the State makes annual determinations of LEA performance, including the criteria the State uses and the schedule for notifying LEAs of their determinations. If the determinations are made public, include a web link for the most recent determinations.

Determinations of LEA performance are based on compliance indicators 9, 10, 11, 12, and 13, accountability reviews, and fiscal audit findings. Data for these indicators is collected through various means as outlined above.

Determinations of LEA performance are based on a performance of 95% to 100% to meet the compliance indicator criteria for levels of determination. This criterion is used only for determinations. LEAs are required to meet the annual compliance targets of 100% for Indicators 11, 12, 13 and accountability reviews and 0% for Indicators 9 and 10. Any LEA within the range of 95-99.9% must correct all identified noncompliance.

The SEA has created weighted point criteria for Indicators 9, 10, 11, 12 and 13, accountability reviews and fiscal audit findings. LEAs are awarded three points for reaching 95% to 100% in each of those areas; two additional points are awarded for 100% compliance or correction of all noncompliance and verification of continued compliance within 12 months of identification; and LEAs can earn one point for valid, reliable, and timely data submission. Each LEA can earn up to 42 total points.

Determination levels are: Meets Requirements for 36 to 42 points; Needs Assistance for 30 to 35 points; Needs Intervention for 22 to 29 points; and Needs Substantial Intervention with 21 or less points. The SEA’s determination of LEA performance criteria can be found at <https://doe.sd.gov/sped/SPP.aspx>.

LEAs are notified when the determination reports are posted in the state’s LDS. LEAs log into the LDS site to retrieve their determination results. Reports are available by August 1 and are not available publicly.

Provide the web link to information about the State’s general supervision policies, procedures, and process that is made available to the public.

<https://doe.sd.gov/sped/>

Technical Assistance System:

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

The SEA provides technical assistance to LEAs utilizing a variety of methods to reach as many constituents as possible in the manner that best meets their needs.

Technical assistance documents are developed and maintained to help clarify policies and procedures to assist LEAs with implementing the IDEA and state requirements. The documents are posted on the SEA webpage at <https://doe.sd.gov/sped/> and shared with constituents at conferences, during trainings, and notices of availability are sent on the weekly DOE mailing listservs and the biweekly Teach SD newsletter. Monthly special education webinars are provided, recorded, and made available for a limited time. The monthly special education webinars focus on upcoming data collections, technical assistance on areas identified through accountability reviews or complaints, and updates on policies. The SEA keeps open lines of communication with LEAs through topical listservs and assigned region representatives. This guarantees that all constituents can access timely and high-quality technical support.

In order to provide topical and in-depth assistance, the SEA utilizes a portion of the state level IDEA allocation for contracted specialists. Contractors directly support LEAs through, but not limited to, the following:

- 1) RDA Coaches. These individuals are contracted through educational cooperatives to conduct accountability reviews. They also conduct regional training around IEP procedures for students ages 3 through 21, and conduct training related to CAPs. The coaches support the implementation of RDA as outlined in the RDA manual and LEA action plan.
- 2) Transition Services Liaison Project (TSLP). This program is a collaborative partnership between the DOE and the Department of Human Services, Division of Rehabilitation Services. TSLP staff are regionally located and focus on supporting high school transition. They make one-on-one connections with high school special education teachers and personnel. They also provide technical assistance in writing compliant IEPs, identify resources for evidence-based practices, and link adult agencies with LEA personnel, students, and families.
- 3) Multi-Tiered System of Supports (MTSS) Coordinators. These individuals work directly with LEAs to implement a continuous improvement framework in which data-based problem-solving and decision-making are practiced across all levels of the educational system to support students. The coordinators are trained in Response to Intervention (RtI) and Positive Behavioral Interventions and Supports (PBIS) processes.
- 4) Educational Cooperatives, South Dakota Services for the Deaf (SDSD), and the Center for Disabilities. These entities are contracted to provide specialized training and technical assistance in areas of regional and statewide need as identified through LEA accountability reviews.
- 5) The Navigator Program. This program is contracted through South Dakota Parent Connection (SDPC), the State's OSEP funded parent training and information center (PTI). Each Navigator Program consultant serves as an objective and neutral party while assisting parents and school personnel. Navigators also assist in locating and utilizing information, improving communication, building (or rebuilding) partnerships, and making progress toward mutual agreements. SDPC develops and presents to parents and LEAs on a variety of topics based on the types of cases they are receiving and issues the SEA identifies through accountability reviews and the dispute resolution process. The SEA also analyzes the areas of concern identified by the Navigator Program to determine what technical assistance and professional development are needed for parents and LEAs.

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.

Professional development is provided in a variety of ways due to SD's large area and rural nature. SD has 77,116 square miles and 148 LEAs. The LEAs are differentiated by the total student population with 25 small LEAs that have an enrollment of 200 or less, 84 medium LEAs that have an enrollment between 201 and 600, and 39 large LEAs that have an enrollment of over 600. Training courses are offered in a variety of formats, including state level, regionally, and virtually, which allows LEA staff to access appropriate professional development. The SEA professional development revolves around data collection, the IEP process, behavior, response to intervention, instructional coaching, early childhood, and other pertinent areas. Professional development areas are identified through accountability reviews, RDA internal review feedback, dispute resolution, LEA input, and input from the stakeholder groups (including the South Dakota Advisory Panel for Children with Disabilities (SDAPCD) and SDPC).

In the fall of 2024, "Charting the Course: Special Education Eligibility to IEP Development" training was offered to all special education and general education professionals in SD. The training covered the special education process. Approximately 412 staff across SD participated in one of the virtual or in-person presentation options and 106 participants enrolled in the on-demand version. Approximately 71 participants attended the Behavior IEP workshop, which focused on the IEP process through behavior-related examples and activities.

Additional training in the area of transition and early childhood was offered. The transition IEP workshop addressed high school transition and IEP processes. The transition workshop had approximately 176 LEA staff in attendance. The early childhood workshop focuses on Part C to Part B transition, preschool outcomes, and the least restrictive environments. There were approximately 130 LEA staff that attended the early childhood workshops.

The SEA distributes special education program information such as professional development opportunities, federal updates, and data collection reminders through the weekly DOE email listserv, webpage, and the bi-weekly DOE TeachSD newsletter. A monthly special education webinar is held every third Tuesday of the month and is recorded and available for a limited time upon request. The PowerPoint and handouts are available at <https://doe.sd.gov/sped/directors.aspx>. The webinars inform special education directors and other interested parties about information and changes at the federal and state levels, initiatives, data collection, and other DOE information.

The SEA partners with Technical Assistance for Excellence in Special Education (TAESE) to offer webinar training on specialized topics. Topics included Lessons Learned from 2024 Court Cases, Mastering FAPE, IEP Progress Monitoring, and Meaningful Parent Participation and Prior Written Notice. A new special education director webinar series is conducted every two to three years to target the five areas of general supervision including the SPP/APR, budget and fiscal, dispute resolution, accountability, and child count. All TAESE webinar recordings and handouts mentioned above are posted for 90 days on the DOE Learning Platform at <https://sded.sd.gov/>. Specialized training for IEP facilitators, mediators, complaint investigators, and hearing officers is also provided through TAESE and the Center for Appropriate Dispute Resolution in Special Education (CADRE).

Professional development occurs regionally around the state and virtually throughout the school year. Training spans a variety of topics, including (but not limited to) dropout prevention, early childhood outcomes and transition, improving parent involvement in the IEP process, Core Content Connectors standards-based Instruction and IEPs, alternate assessment, and high school transition training.

The SEA sponsors speakers at conferences of partnering organizations focused on meeting the needs of students with disabilities. These include the Youth Leadership Forum (YLF), Transition Summer Institute, the Early Childhood Conference, and the SD Speech and Language Hearing Association Conference. The SEA hosts an annual Special Education Conference in the spring and partners with other divisions to offer relevant sessions and content related to students with disabilities throughout the year at a variety of conferences and events.

In collaboration with the Center for Disabilities, the SEA offers technical assistance to parents and LEAs through virtual and in-person meetings, training, conferences and other avenues that address needs identified by stakeholders, through dispute resolution trends and accountability reviews. Professional development offered includes autism evaluation and support with emphasis on the team approach to evaluation including the administration of the Autism Diagnostic Observation Schedule (ADOS) and early childhood evaluation to over 300 participants. Intensive support in Autism Spectrum Education and Resource Training (ASERT) was provided to 50 participants. Comprehensive mental and behavioral health support services and training to build local capacity to manage challenging student behaviors and complex needs were offered through a series of monthly and quarterly training and on-demand learning modules to approximately 700 participants. The annual special education conference with breakout sessions and keynote speakers was held with over 600 participants. All activities offered are eligible for continuing education contact hours or graduate credit.

The SEA partnered with the SDSA to offer a graduate credit course for general and special education teachers statewide to improve their understanding of students who are deaf and hard of hearing and to make instruction accessible based on the student's mode of communication. The course was offered in the fall and spring semesters with a total of 80 participants.

By utilizing a diverse range of technical assistance entities, delivery methods, and platforms, the SEA assures access to timely and high-quality professional development for all educators and stakeholders statewide.

Stakeholder Engagement:

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

The SEA seeks broad stakeholder representation by utilizing existing DOE stakeholder groups, other government agency groups, and conferences conducted by other educational and disability focused entities. Stakeholders are invited to serve on stakeholder groups through targeted emails, announcements in publications and webinars, and by individual invitations to LEAs, tribal education, the Head Start Collaboration Office, and Part C. The SEA collaborates with Disability Rights of South Dakota (DRSD) and SDPC to increase the involvement of parents and individuals with disabilities. Stakeholders include representatives from DOE divisions, LEA administrators, general and special education teachers, related services personnel, SDPC staff, professors, parents, educational cooperative staff, SDAPCD, and contractors. To establish a representative sample of stakeholders that reflect diversity across SD, the SEA includes stakeholders from varying demographics, geographic areas, and LEA enrollment sizes. Targeted recruitment efforts include working with LEAs to identify and directly invite stakeholders in communities with more diverse populations. Although the stakeholder participants were mainly White or American Indian, they did represent students of varying race and ethnicities by either working directly with students or providing supports to students and families. The students those stakeholders served included American Indian, White, African American, Asian, Hispanic, and Native Hawaiian or Pacific Islander. The stakeholders also represented students aged 3-21 and in the 14 disability categories.

The SEA builds capacity by educating stakeholders, including parents, on the indicators at each meeting and by presenting throughout the year on data collection and results on individual indicators. Presentations include what is being measured and how it is calculated, current results, historical data, how the data is collected, how the indicators impact each other as well as how student outcomes are impacted and areas of strength and need. Stakeholders also receive information on what can be done to improve data quality and improvement activities to address areas of need.

In addition to opportunities to share input in person, stakeholders were provided opportunities to review recommendations and proposals and provide input through email and chat during webinars.

The SEA utilizes SDAPCD quarterly meetings (September, January, April, and June) to build stakeholder capacity and gain feedback on the SPP/APR. In January, the SEA provided an overview of the SPP/APR, panel expectations and opportunities to provide feedback related to the SPP/APR, information on each indicator and the relationship to student outcomes, historical and current data, and activities occurring to improve student outcomes. In September, the SEA reviews OSEP determinations with panel members, explained what the results mean, addressed areas of strength and need, and requested stakeholder feedback. Dispute resolution information was shared with SDAPCD members, who provided feedback on how to improve practices. During the September meeting, the panel identifies a priority area to work on throughout the year based on a review of data from the SPP/APR, accountability reviews, dispute resolution, Navigator Program data, and stakeholder feedback.

The SEA met with a large stakeholder data drill down group on September 23, 2025, to review available statewide FFY 2024 data, historical data, and to gather stakeholder feedback for improvement activities. Stakeholders who attended the data drill down were provided training and information on the SPP/APR indicators, an explanation of why the indicators are important to student outcomes, historical and current data, and SEA activities to improve student outcomes. Stakeholders were provided an opportunity to review and analyze statewide data through small group activities using guided activities and feedback sheets. Information from each group was shared during the drill-down and participants had an opportunity to share additional information via email. The SEA staff used the feedback to prepare and share information with subsequent stakeholder groups.

On January 8, 2026, the SDAPCD reviewed preliminary data results of the FFY 2024 SPP/APR and provided feedback. The SDAPCD is made up of parents of children with disabilities, individuals with disabilities, administrators, DRSD, vocational rehabilitation, higher education, juvenile justice, private schools, McKinney Vento Homeless Education, and other state agencies. This meeting was broadcast live through public broadcasting and recordings are made available at <https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=16> under the "Archived Meetings" tab. The SDAPCD represents a variety of student ages, disabilities, race and ethnic backgrounds, and locations throughout the state.

The SEA also offered stakeholder opportunities throughout the year on targeted indicators.

In the fall of 2024, the SEA conducted the following activities:

Stakeholder input is obtained directly from LEAs on specific indicators through the RDA process. LEAs in levels two and three participate in a data retreat using indicator data at the LEA and the SEA level. The analysis focuses on instruction, curriculum, environment, and learner needs along with the IEP's role in improving indicator data. After analysis of the data, LEAs identify improvement strategies to support root cause areas and develop an action plan and progress measures. The SEA reviewed the LEA's data analysis and action plan to determine support needed by the LEAs.

In the Spring of 2025, the SEA conducted the following activities:

- 1) Indicator 17 State Systemic Improvement Plan (SSIP) progress and activities were reviewed with stakeholders during the SSIP stakeholder meeting.
- 2) During the SSIP stakeholder meeting, stakeholders reviewed data and progress of the MTSS initiative and participated in a facilitated feedback process for each component of the initiative in relation to Indicator 17.
- 3) During five in-person assessment workshops, LEA assessment coordinators and special education directors were asked to share input on Indicator 3, including how to increase the participation of students in statewide assessments and how to improve the proficiency of students with disabilities on both the regular and alternate assessments.
- 4) Indicator 14 data was presented to the Vocational Rehabilitation (VR) Board and during the TSLP Round Up. Current data was shared, and feedback was collected on improvement strategies and activities for secondary transition. LEAs were encouraged to begin collecting their own Indicator 14 data to help improve response rates.

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

NO

Number of Parent Members:

22

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.

Parents from the SDAPCD, SDPC, DRSD, and other parents of students with disabilities were involved in the stakeholder opportunities as described in the broad stakeholder input section above. During the stakeholder meetings, the SEA provided an overview of each of the 18 indicators, including the purpose of the data collection and how it is measured. The SEA shared improvement activities that have been conducted and provided guiding questions on indicators that need improvement. The SEA provided guiding questions to assist stakeholders with understanding the data and completing an in-depth data analysis. The guiding questions increased stakeholders' understanding and ability to provide recommendations on new or continuing improvement activities. Stakeholders worked in groups by interest area, including LEA administrators, parents, DOE staff, and others who were responsible for providing services to students with disabilities, to discuss the data and provide input on recommendations for SEA improvement activities.

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 build the capacity of diverse groups of parents during stakeholder engagement activities, the SEA provided a general overview of the SPP/APR and the indicators included in the report, an overview of where the SEA is doing well, and identified areas of need based on data collected statewide. The SEA highlighted indicators where data showed there was a need for improvement, explained supports the SEA currently provides, and discussed past feedback and improvement activities. Stakeholders receive a guided activity sheet that assisted them with analyzing the data to help identify improvement activities that the SEA should consider.

Soliciting Public Input:

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

The SEA presented available preliminary FFY 2024 SPP/APR data and FFY 2023 data to the stakeholder meeting in September 2025, in which stakeholders had an opportunity to provide input on Indicator 8 baseline and targets, as well as discuss trends in data, and provide input on improvement strategies. In January 2026, the SEA presented the preliminary FFY 2024 SPP/APR data to the SDAPCD, discussed the indicator 8 changes, and received feedback on the improvement activities identified.

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.

In February 2024, the SEA presented the final FFY 2023 SPP/APR data, results of stakeholder meetings including the target setting, data analysis, development of the improvement strategies, and evaluation of SPP/APR data on the monthly special education webinar. The webinar is converted into a pdf handout and posted on the SEA webpage located at <https://doe.sd.gov/sped/directors.aspx>. In addition to sharing the results via webinar, the SEA sends an announcement via DOE listservs, announces during the SDAPCD meeting and public notices went out alerting the public that the FFY 2023 SPP/APR would be posted, which included the final results of all stakeholder activities and input. The FFY 2023 SPP/APR was posted at <https://doe.sd.gov/sped/SPP.aspx> on June 1, 2025.

Reporting to the Public

How and where the State reported to the public on the FFY 2023 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 2023 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2023 APR in 2025, is available.

Following the submission of the SPP/APR to the U.S. Department of Education, the SEA disseminated the FFY 2023 SPP/APR and LEA public information in the following ways:

- 1) The SEA posted the final version of the FFY 2023 SPP/APR and LEA public reports on the SEA webpage at <https://doe.sd.gov/sped/SPP.aspx>. The SEA publicly reports the LEA level data as soon as practical, but no later than 120 days following the SEA's submission of its SPP/APR each year.

2) The SEA utilized the IDEA Data Center Interactive Public Reporting Engine to display the 618 public data reports. The link to the final 618 public data tables can be found on the SEA website at <https://doe.sd.gov/sped/StatePublicReports.aspx>.

3) The SEA published Public Notices via state press release that targets approximately 250 individual recipients or entities statewide that can further distribute information to include newspapers, television stations, and radio stations to notify the public of the website <https://doe.sd.gov/sped/SPP.aspx> where the SPP/APR and LEA public reports can be accessed. Hard copies of the reports are made available upon request.

The SEA disseminated the FFY 2023 SPP/APR and LEA public information in the following way:

- 1) The SEA alerted constituency groups via existing listservs, email, and workshops.
- 2) The SEA staff presented current SPP/APR preliminary data and results to the SDAPCD in January of each year.
- 3) The SEA staff presented the data and results that were submitted to OSEP on February 1 during the monthly special education webinar in February.
- 4) SDPC shared directions with parents on how to access the SEA publication of the FFY 2023 SPP/APR via their newsletter and weekly updates.
- 5) The SEA provided electronic copies to all SDAPCD members and posted it on the SDAPCD Boards and Commissions site at <https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=16>.
- 6) The SEA provided access to alternative formats of this document (e.g., Braille, large print, hard copy, or digital) on request. Alternative forms can be requested at: South Dakota Department of Education Attn: Special Education Programs, 800 Governor's Drive, Pierre, SD 57501-2294.

Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2024 and 2025 is Needs Assistance. In the State's 2025 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 2024 SPP/APR submission, due February 1, 2026, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2023 SPP/APR

As a result of the IDEA Part B determination of Needs Assistance for FFY 2023 and FFY 2024, the SEA reviewed data and sought stakeholder input 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. Based on the analysis and stakeholder input, the SEA determined Indicator 13 would be the area of focus for improvement. During FFY 2024, the SEA consulted the IDEA Data Center (IDC), the National Center for Systemic Improvement (NCSI), and the National Technical Assistance Center on Transition: The Collaborative (NTACT:C). The SEA accessed resources from the NTACT:C to develop a course of action to achieve improved compliance with Indicator 13. The SEA and partners such as the TSLP, SDPC, Department of Human Services, and Division of Vocational Rehabilitation, attended NTACT:C Capacity Building Institute. As a result of the support received and in-depth planning time, the SEA and TSLP updated and reorganized SD's transition website (<https://tslp.org>) to improve access to resources for educators and expand efforts to strengthen advocacy and leadership opportunities for youth. SEA staff attended the IDC Summit and learned strategies for analyzing data. The SEA requested and is receiving targeted assistance from NTACT:C which includes a review of noncompliant transition IEPs, a review of the roles and responsibilities of contracted TSLP staff to provide technical assistance and conduct monitoring, and an analysis of professional development opportunities. Based on the technical assistance provided by NTACT:C, the SEA is updating its in-person transition IEP workshops, developed a new on-demand transition IEP training, and revised the structure and timing of the two-day Transition Summer Institute to include an overview of the transition IEP followed by in-depth training of each of the eight sections of the transition IEP to include case studies.

Intro - OSEP Response

The State's determinations for both 2024 and 2025 were Needs Assistance. Pursuant to Section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 20, 2025 determination letter informed the State that it must report with its FFY 2024 SPP/APR submission, due February 2, 2026, 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 notes that the State did not describe a process that constitutes a reasonably designed general supervision system, consistent with OSEP QA 23-01. Specifically, the State described a process that limits the scope of its general supervisory activities to the LEA's performance on SPP/APR indicators. OSEP may follow up with the State regarding its general supervisory activities outside of the SPP/APR process.

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2024 SPP/APR, use data from 2023-2024), and compare the results to the target.

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	67.99%

FFY	2019	2020	2021	2022	2023
Target >=	85.00%	67.99%	67.99%	68.45%	68.91%
Data	72.14%	75.40%	61.06%	64.68%	68.95%

Targets

FFY	2024	2025
Target >=	71.84%	73.67%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine whether or not the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the targets for Indicator 1 will be maintained for FFY 2024.

Stakeholders analyzed the 2023-2024 school year graduation data. Stakeholders noted that when students have good attendance in school, they are more likely to graduate. Stakeholders discussed the possibility of inconsistent communication between middle school and high school staff for incoming freshmen resulting in students not being prepared to be independent in the general education classroom. Stakeholders also emphasized the importance of collaboration, ongoing training for teachers and support staff, as well as impact of individualized support decisions to ensure students remain on track toward graduation.

SEA strategies in place are to provide training and guidance for exit codes; training on the differences between accommodations and modifications; training to help LEAs connect with their students; and training on developing evidence-based transition plans.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	609
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	

Source	Date	Description	Data
(EDFacts file spec FS009; Data group 85)			
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	74
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	230

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
609	913	68.95%	71.84%	66.70%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The SEA analyzed data to determine possible reasons why the percentage for graduation rate decreased and slippage occurred. An increase of 21 more students graduating was needed to not have slippage. When analyzing the data by LEAs that had at least 10 students with disabilities in the graduation denominator, 12 had a decrease in graduation rate and 11 had an increase. Of the LEAs that had at least five students with disabilities in the graduation denominator, 25 had a decrease in the graduation rate, 13 had an increase and three had no difference. The decreases/increases were scattered across LEAs and no LEAs analyzed stood out as the leading cause of the decrease in graduation rate.

When analyzing student characteristics in graduation rates, four groups stood out:

- (1) American Indian students had a decrease in graduation rate from 47.10% to 43.80%.
- (2) Students with a cognitive disability had a decrease in graduation rate from 41.80% to 35.20%.
- (3) Students with emotional disability had a decrease in graduation rate from 59.40% to 54.20%.
- (4) Students in the resource room had a decrease in graduation rate from 67.70% to 61.20%.

Based on the analysis of data and no significant SEA policy changes, there were no specific areas identified that contributed to a specific reason for slippage.

Graduation Conditions

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

SD has one diploma with the ability to add an advanced, advanced career, or an advanced honors endorsement. The minimum requirements for receiving a diploma are established by SDCL 13-33-19 and ARSD 24:43:11:02.

ARSD 24:43:11:02. General requirements for high school graduation. The units of credit required for high school graduation must include the following:

- 1) Four units or more of language arts that must include the following:
 - a) One unit of writing;
 - b) One-half unit of speech or debate; and
 - c) One unit of literature that must include one-half unit of American literature;
- 2) Three units or more of social studies that must include the following:
 - a) One unit of U.S. history; and
 - b) One-half unit of U.S. government;
- 3) Three units or more of mathematics that must include one unit of algebra I;
- 4) Three units or more of science that must include one unit of biology;

5) One unit or more in any combination of the following:

- a) Approved career and technical education courses;
- b) A capstone experience; and
- c) World languages;

6) One-half unit of personal finance or economics;

7) One unit of fine arts;

8) One-half unit of physical education;

9) One-half unit of health or health integration; and

10) Five and one-half units of electives.

A state-approved advanced computer science course may be substituted for one unit of science, but may not be substituted for biology.

Within the coursework outlined above, a student may earn one or more advanced endorsements, but is not required to do so. A student may earn one or more of the following advanced endorsements: advanced, advanced career, and advanced honors. Substitutions for laboratory science, using a state-approved computer science course, do not apply to the advanced and advanced honors endorsements.

Students may be granted up to one credit in fine arts for participation in extracurricular activities. A maximum of one-fourth credit may be granted for each extracurricular activity each school year. To grant credit, a LEA must document the alignment of the activity with fine arts content standards as approved by the SD Board of Education.

Academic core content credit may be earned by completing an approved career and technical education course. Approval to offer credit must be obtained through an application process with the DOE. The application must include:

- 1) Course syllabus;
- 2) Standards based curriculum;
- 3) Teacher certification;
- 4) Assessment of standards by methods including end-of-course exams, authentic assessment, project-based learning or rubrics.

The IEP team has the authority to modify the specific credits required for graduation. The IEP team must take into consideration the student's postsecondary goals along with the nature of the student's disability, which prevents the student from accessing the same curriculum as general education peers with accommodations and supports. If a student has modified course requirements, they are not considered to have met the regular graduation diploma requirements and their eligibility for FAPE does not end.

Graduation information may be found on the DOE website at <https://doe.sd.gov/gradrequirements/>.

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)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2024 SPP/APR, use data from 2023-2024), and compare the results to the target.

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	19.35%

FFY	2019	2020	2021	2022	2023
Target <=	2.40%	19.35%	19.35%	18.38%	17.40%
Data	2.55%	18.17%	31.49%	27.78%	23.16%

Targets

FFY	2024	2025
Target <=	14.60%	10.70%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine whether or not the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the targets for Indicator 2 will be maintained for FFY 2024.

SEA strategies in place are to provide training and guidance for exit codes; training on the differences between accommodations and modifications to help students succeed toward earning a high school diploma, training to help LEAs connect with their students, and training on the impact of developing strong transition plans to reduce dropout. SEA initiatives that support student engagement include of Check and Connect, Positive Behavior Intervention and Support, and Jobs for America's Graduates.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	609
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2023-24 Children with Disabilities (IDEA) Exiting	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	

Source	Date	Description	Data
Special Education (EDFacts file spec FS009; Data group 85)			
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	74
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	230

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
230	913	23.16%	14.60%	25.19%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The SEA disaggregated the data to determine why the percentage for dropout rate increased and slippage occurred. An increase of 19 more students not dropping out was needed to not have slippage.

Of the LEAs that had at least 10 students with disabilities in the dropout denominator, 12 had an increase in dropout rate, seven had an increase, and four had no change. Of the LEAs that had at least five students with disabilities in the dropout denominator, 20 had an increase in dropout rate, 11 had a decrease, and 10 had no difference. The decreases/increases were scattered across LEAs and no one LEA stood out as the leading cause of the decrease in dropout rate.

When analyzing student characteristics in dropout rates, two groups stood out:

- (1) Students with a cognitive disability had an increase in dropout rate from 28.20% to 39.10%.
- (2) Students in the resource room had an increase in dropout rate from 20.50% to 28.10%.

Based on the analysis of data, there were no specific areas identified that contributed to specific reason for slippage.

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

The following criteria are used when counting youth as dropping out:

- 1) Was enrolled in school at some time during the school year;
- 2) Was not enrolled on the last day of school;
- 3) Has not graduated from high school or completed a state approved program;
- 4) A student who has moved and is not known to continue in another LEA;
- 5) Does not meet any of the following exclusionary conditions: Transfer to another accredited education program, Temporary absence due to suspension or illness, Excused from public school attendance (SDCL 13-27-3), or 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).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using *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 C.F.R. §300.160(f), i.e., a link to the Web site where these data are reported.

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

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	95.52%
Reading	B	Grade 8	2020	92.13%
Reading	C	Grade HS	2020	93.28%
Math	A	Grade 4	2020	95.20%
Math	B	Grade 8	2020	91.50%
Math	C	Grade HS	2020	92.97%

Targets

Subject	Group	Group Name	2024	2025
Reading	A >=	Grade 4	96.74%	98.00%
Reading	B >=	Grade 8	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%
Math	A >=	Grade 4	97.80%	98.00%
Math	B >=	Grade 8	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine if the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the FFY 2023 data and SDAPCD discussion, it was determined that the targets for Indicator 3A will be maintained for FFY 2024.

Based on a review and analysis of data, stakeholders expressed that high attendance correlates with high assessment participation. Stakeholders noted that the SEA historically meets this target due to the SEA policy of not having an opt-out option on the state assessment; students can only be excused from state testing if they submit and receive approval for a medical exemption.

Based on this stakeholder input, the SEA will continue training LEAs on the SEA policy of having all students participate in state assessments and will review medical exemption applications as needed.

FFY 2024 Data Disaggregation from EDFacts

Data Source:

SY 2024-25 Assessment Participation in Reading/Language Arts (EDFacts file spec FS188; Data Group: 882, 883)

Date:

01/07/2026

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	2,378	1,529	1,089
b. Children with IEPs in regular assessment with no accommodations (3)	2,081	1,314	919
c. Children with IEPs in regular assessment with accommodations (3)	184	119	74
d. Children with IEPs in alternate assessment against alternate standards	106	84	72

Data Source:

SY 2024-25 Assessment Participation in Mathematics (EDFacts file spec FS185; Data Group: 880, 881)

Date:

01/07/2026

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	2,380	1,529	1,087
b. Children with IEPs in regular assessment with no accommodations (3)	1,856	1,162	924
c. Children with IEPs in regular assessment with accommodations (3)	409	270	69
d. Children with IEPs in alternate assessment against alternate standards	106	84	71

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

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

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

FFY 2024 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	2,371	2,378	Not Valid and Reliable	96.74%	99.71%	Met target	N/A
B	Grade 8	1,517	1,529	Not Valid and Reliable	95.00%	99.22%	Met target	N/A
C	Grade HS	1,065	1,089	Not Valid and Reliable	95.00%	97.80%	Met target	N/A

FFY 2024 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	2,371	2,380	Not Valid and Reliable	97.80%	99.62%	Met target	N/A

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
B	Grade 8	1,516	1,529	Not Valid and Reliable	95.00%	99.15%	Met target	N/A
C	Grade HS	1,064	1,087	Not Valid and Reliable	95.00%	97.88%	Met target	N/A

Regulatory Information

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

Public Reporting Information

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

To access report information to fulfill requirements in CFR 300.160(f):

- 1) Go to <https://sdschools.sd.gov/#/home>
- 2) To explore State results, click on the "State" icon. To explore School or District results, click on the "Schools" or "Districts" icon, then click on the school or district name.
- 3) Click on "Student Performance".
- 4) Scroll down to the "Performance by Student Population" section.
- 5) Click the green "View Details" button and select "Students With Disabilities".
- 6) Below the "Interactive Analysis" title, click the tab labeled "Table".
- 7) The data can be filtered and explored by proficiency, participation, grade level, subject, regular or alternate assessment, and with or without accommodations. To view full results, scroll to the bottom of the table and drag the slide bar to the right.
- 8) To export data, go to the upper-right corner of the Student Performance Table. Hover the cursor over the three dots, select "Export," and select a document type.
- 9) To view data from previous years, go to the upper-right corner of the screen. Click the red "Options" menu and select "Prior Year Report Cards".

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

OSEP notes that the State submitted verification that the attachments comply with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 3A attachments included in the State's FFY 2023 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachments available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2023 SPP/APR

The SEA verified the documents were 508 compliant and made the Indicator 3A attachment available to the public within 120 days after the date of the determination letter. To view the attachment:

- 1) Go to <https://doe.sd.gov/sped/SPP.aspx>
- 2) Under "FFY 2023 State Performance Plan (Reported Feb. 1, 2025)," choose the link "FFY 2023 Indicator 3A"

3A - OSEP Response

3A - Required Actions

Indicator 3B: Proficiency for Children with IEPs Against 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	2020	18.51%
Reading	B	Grade 8	2020	10.53%
Reading	C	Grade HS	2020	15.95%
Math	A	Grade 4	2020	20.58%
Math	B	Grade 8	2020	6.71%
Math	C	Grade HS	2020	3.48%

Targets

Subject	Group	Group Name	2024	2025
Reading	A >=	Grade 4	21.01%	23.51%
Reading	B >=	Grade 8	12.03%	13.53%
Reading	C >=	Grade HS	17.45%	18.95%
Math	A >=	Grade 4	23.15%	25.58%
Math	B >=	Grade 8	8.21%	9.71%
Math	C >=	Grade HS	4.98%	6.48%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine if the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the FFY 2023 data and SDAPCD discussion, it was determined that the targets for Indicator 3B will be maintained for FFY 2024.

Based on a review and analysis of data, stakeholders identified that the least restrictive educational placements correlate with higher proficiency on the state assessment. LEA stakeholders who use interim assessments as instructional tools throughout the school year stated that their use of interim assessments has increased their students' comfort level with the assessment platform and digital tools. This comfort level helped remove barriers to proficiency. Stakeholders expressed a need for training on how to implement accommodations on state assessments.

Based on this stakeholder input, the SEA developed an on-demand training on assessment accommodations, which will be available to LEA staff during the 2025-2026 school year. The SEA will continue to train and encourage LEAs to use interim assessments throughout the school year. The SEA Office

of Assessment continues to notify and monitor any LEAs that do not meet assessment proficiency thresholds. The SEA will continue providing targeted RDA coaching to LEAs identified as needing support and SSIP supports and trainings directly to LEAs to improve assessment proficiency and outcomes for students with disabilities.

FFY 2024 Data Disaggregation from ED Facts

Data Source:

SY 2024-25 Academic Achievement in Reading/Language Arts (ED Facts file spec FS178; Data Group: 876, 877)

Date:

01/07/2026

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	2,266	1,433	993
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	518	179	183
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	14	7	6

Data Source:

SY 2024-25 Academic Achievement in Mathematics (ED Facts file spec FS175; Data Group: 874, 875)

Date:

01/07/2026

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	2,266	1,432	993
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	541	126	53
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	18	6	1

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

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	532	2,266	Not Valid and Reliable	21.01%	23.48%	Met target	N/A

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
B	Grade 8	186	1,433	Not Valid and Reliable	12.03%	12.98%	Met target	N/A
C	Grade HS	189	993	Not Valid and Reliable	17.45%	19.03%	Met target	N/A

FFY 2024 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	559	2,266	Not Valid and Reliable	23.15%	24.67%	Met target	N/A
B	Grade 8	132	1,432	Not Valid and Reliable	8.21%	9.22%	Met target	N/A
C	Grade HS	54	993	Not Valid and Reliable	4.98%	5.44%	Met target	N/A

Regulatory Information

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

Public Reporting Information

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

To access report information to fulfill requirements in CFR 300.160(f):

- 1) Go to <https://sdschools.sd.gov/#/home>
- 2) To explore State results, click on the "State" icon. To explore School or District results, click on the "Schools" or "Districts" icon, then click on the school or district name.
- 3) Click on "Student Performance".
- 4) Scroll down to the "Performance by Student Population" section.
- 5) Click the green "View Details" button and select "Students With Disabilities".
- 6) Below the "Interactive Analysis" title, click the tab labeled "Table".
- 7) The data can be filtered and explored by proficiency, participation, grade level, subject, regular or alternate assessment, and with or without accommodations. To view full results, scroll to the bottom of the table and drag the slide bar to the right.
- 8) To export data, go to the upper-right corner of the Student Performance Table. Hover the cursor over the three dots, select "Export," and select a document type.
- 9) To view data from previous years, go to the upper-right corner of the screen. Click the red "Options" menu and select "Prior Year Report Cards".

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

OSEP notes that one or more of the Indicator 3B attachments included in the State's FFY 2023 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 attachments available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2023 SPP/APR

The SEA verified the documents were 508 compliant and made the Indicator 3B attachment available to the public within 120 days after the date of the determination letter. To view the attachment:

1) Go to <https://doe.sd.gov/sped/SPP.aspx>

2) Under "FFY 2023 State Performance Plan (Reported Feb. 1, 2025)," choose the link "FFY 2023 Indicator 3B"

3B - OSEP Response

3B - Required Actions

Indicator 3C: Proficiency for Children with IEPs Against 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	2020	38.00%
Reading	B	Grade 8	2020	33.33%
Reading	C	Grade HS	2020	56.32%
Math	A	Grade 4	2020	54.00%
Math	B	Grade 8	2020	39.18%
Math	C	Grade HS	2020	56.98%

Targets

Subject	Group	Group Name	2024	2025
Reading	A >=	Grade 4	40.50%	43.00%
Reading	B >=	Grade 8	34.83%	36.33%
Reading	C >=	Grade HS	57.82%	59.32%
Math	A >=	Grade 4	56.50%	59.00%
Math	B >=	Grade 8	40.68%	42.18%
Math	C >=	Grade HS	58.48%	59.98%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine if the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the FFY 2023 data and SDAPCD discussion, it was determined that the targets for Indicator 3C will be maintained for FFY 2024.

Based on a review and analysis of data, stakeholders noted that alternate assessment proficiency data may have decreased from FFY 2023 to FFY 2024 because higher-achieving alternate assessment students took the regular state assessment instead of the alternate assessment. This is the result of the SEA's increased monitoring of LEA participation percentages and increased training on the criteria for participation in alternate assessment. LEA stakeholders discussed that reading and math proficiency may have decreased due to an increase in transition programming and resources for all grade

levels, resulting in an increased instructional focus on transition skills, with less focus on math and reading alternate academic achievement standards (AAAS).

Stakeholders expressed that LEA staff need continued training on understanding and teaching the AAAS, as well as on assistive technology and augmentative and alternative communication. LEA stakeholders requested a way to network or share instructional materials between LEA staff.

Based on this stakeholder input, the SEA will provide weekly "SD 1% Community of Practice" virtual sessions during FFY 2025 to assist LEA staff in networking and sharing materials with other LEA staff who serve students participating in alternate assessment. The SEA released an Assistive Technology Technical Assistance Guide in October 2024 and continues to disseminate it. The SEA will continue to provide training opportunities and technical assistance to LEAs on how to utilize AAAS. The SEA will continue communication efforts and a listserv for teachers who instruct students with significant needs.

FFY 2024 Data Disaggregation from EDFacts

Data Source:

SY 2024-25 Academic Achievement in Reading/Language Arts (EDFacts file spec FS178; Data Group: 876, 877)

Date:

01/07/2026

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	106	84	72
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	23	17	24

Data Source:

SY 2024-25 Academic Achievement in Mathematics (EDFacts file spec FS175; Data Group: 874, 875)

Date:

01/07/2026

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	106	84	71
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	51	33	24

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	23	106	Not Valid and Reliable	40.50%	21.70%	Did not meet target	N/A
B	Grade 8	17	84	Not Valid and Reliable	34.83%	20.24%	Did not meet target	N/A
C	Grade HS	24	72	Not Valid and Reliable	57.82%	33.33%	Did not meet target	N/A

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	51	106	Not Valid and Reliable	56.50%	48.11%	Did not meet target	N/A
B	Grade 8	33	84	Not Valid and Reliable	40.68%	39.29%	Did not meet target	N/A
C	Grade HS	24	71	Not Valid and Reliable	58.48%	33.80%	Did not meet target	N/A

Regulatory Information

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

Public Reporting Information

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

To access report information to fulfill requirements in CFR 300.160(f):

- 1) Go to <https://sdschools.sd.gov/#/home>
- 2) To explore State results, click on the “State” icon. To explore School or District results, click on the “Schools” or “Districts” icon, then click on the school or district name.
- 3) Click on “Student Performance”.
- 4) Scroll down to the “Performance by Student Population” section.
- 5) Click the green “View Details” button and select “Students With Disabilities”.
- 6) Below the “Interactive Analysis” title, click the tab labeled “Table”.
- 7) The data can be filtered and explored by proficiency, participation, grade level, subject, regular or alternate assessment, and with or without accommodations. To view full results, scroll to the bottom of the table and drag the slide bar to the right.
- 8) To export data, go to the upper-right corner of the Student Performance Table. Hover the cursor over the three dots, select “Export,” and select a document type.
- 9) To view data from previous years, go to the upper-right corner of the screen. Click the red “Options” menu and select “Prior Year Report Cards”.

Justifications from LEAs that exceeded 1.00% participation in the Alternate Assessment are publicly available. To request a copy of LEA justifications for FFY 2024:

- 1) Go to <https://doe.sd.gov/assessment/alternate.aspx>
- 2) Expand “1% Monitoring”
- 3) Select “District 1% Participation Justification”

Provide additional information about this indicator (optional)

Due to a submission error with Indicator 3 data for FFY 2023, slippage could not be calculated for FFY 2024 in EMAPS. The SEA acknowledges that slippage was identified for Reading Groups A, B, and C, and Math Groups B and C for FFY 2024. Reasons for slippage are provided below:

The first reason for slippage in alternate assessment proficiency may be due to the SEA’s increased monitoring of LEA alternate assessment participation rates. The SEA sent emails to LEAs with students who consistently scored at the highest proficiency level. The emails outlined the alternate assessment participation criteria and advised that the LEA IEP teams should consider whether alternate assessment participation is appropriate for the student. The SEA also contacted LEAs that exceeded 1% participation in alternate assessment participation; the SEA requested the LEA review the SEA participation criteria and submit a justification for why the LEA exceeded 1% participation. As a result of this monitoring, some LEA IEP teams determined that students who were most proficient on the alternate assessment should instead take the regular assessment because it is more appropriately ambitious. Because students who were most proficient no longer participated in the alternate assessment, the statewide alternate assessment proficiency score worsened.

A second reason for slippage may be due to an increase in nationwide and statewide transition programming and resources for all grade levels, resulting in an increased instructional focus on transition skills, with less focus on math and reading.

The SEA notes that current alternate assessment proficiency targets are significantly higher than current regular assessment proficiency targets. The SEA predicts that current and future alternate assessment proficiency scores are a more accurate reflection of proficiency due to students' recent appropriate identification and participation in the alternate assessment.

3C - Prior FFY Required Actions

OSEP notes that one or more of the Indicator 3C attachments included in the State's FFY 2023 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 attachments available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2023 SPP/APR

The SEA verified the documents were 508 compliant and made the Indicator 3C attachment available to the public within 120 days after the date of the determination letter. To view the attachment:

- 1) Go to <https://doe.sd.gov/sped/SPP.aspx>
- 2) Under "FFY 2023 State Performance Plan (Reported Feb. 1, 2025)," choose the link "FFY 2023 Indicator 3C"

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates For Children with IEPs and All Students Against Grade Level Academic Achievement Standards

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2024-2025 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2024-2025 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 2024-2025 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2024-2025 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	29.79
Reading	B	Grade 8	2020	41.45
Reading	C	Grade HS	2020	49.97
Math	A	Grade 4	2020	26.51
Math	B	Grade 8	2020	32.88
Math	C	Grade HS	2020	35.80

Targets

Subject	Group	Group Name	2024	2025
Reading	A <=	Grade 4	28.79	27.79
Reading	B <=	Grade 8	40.20	38.95
Reading	C <=	Grade HS	48.72	47.47
Math	A <=	Grade 4	25.51	24.51
Math	B <=	Grade 8	31.63	30.38
Math	C <=	Grade HS	34.55	33.30

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine if the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the FFY 2023 data and advisory panel discussion, it was determined that the targets for Indicator 3D will be maintained for FFY 2024.

Stakeholders were pleased to see a reduction in the proficiency gap in all groups and subjects in the regular assessment. Stakeholders expressed that the increased use of interim assessment to familiarize students with disabilities with the testing platform has contributed to closing the proficiency gap.

Based on this stakeholder input, the SEA will continue providing SSIP supports and trainings directly to LEAs to improve outcomes for students with disabilities.

FFY 2024 Data Disaggregation from EDFacts

Data Source:

SY 2024-25 Academic Achievement in Reading/Language Arts (EDFacts file spec FS178; Data Group: 876, 877)

Date:

01/07/2026

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	10,120	10,267	9,655
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	2,266	1,433	993
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	4,925	5,199	6,159
d. All students in regular assessment with accommodations scored at or above proficient against grade level	14	7	6
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	518	179	183
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	14	7	6

Data Source:

SY 2024-25 Academic Achievement in Mathematics (EDFacts file spec FS175; Data Group: 874, 875)

Date:

01/07/2026

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	10,168	10,320	9,677
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	2,266	1,432	993
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	4,957	4,222	3,479
d. All students in regular assessment with accommodations scored at or above proficient against grade level	18	6	1
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	541	126	53
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	18	6	1

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

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	23.48%	48.80%	Not Valid and Reliable	28.79	25.33	Met target	N/A
B	Grade 8	12.98%	50.71%	Not Valid and Reliable	40.20	37.73	Met target	N/A
C	Grade HS	19.03%	63.85%	Not Valid and Reliable	48.72	44.82	Met target	N/A

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	24.67%	48.93%	Not Valid and Reliable	25.51	24.26	Met target	N/A
B	Grade 8	9.22%	40.97%	Not Valid and Reliable	31.63	31.75	Did not meet target	N/A
C	Grade HS	5.44%	35.96%	Not Valid and Reliable	34.55	30.52	Met target	N/A

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

OSEP notes that one or more of the Indicator 3D attachments included in the State's FFY 2023 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 attachments available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2023 SPP/APR

The SEA verified the documents were 508 compliant and made the Indicator 3D attachment available to the public within 120 days after the date of the determination letter. To view the attachment:

- 1) Go to <https://doe.sd.gov/sped/SPP.aspx>
- 2) Under "FFY 2023 State Performance Plan (Reported Feb. 1, 2025)," choose the link "FFY 2023 Indicator 3D"

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State must provide a definition of its minimum n and/or cell size itself and a description thereof (e.g., a State's n size of 15 represents the number of children with disabilities enrolled in an LEA, and a State's cell size of 5 represents the number of children with disabilities who have received out-of-school suspensions and expulsions of more than 10 days within the LEA).

The State must also provide rationales for its minimum n and/or cell size, including why the definitions chosen are reasonable and based on stakeholder input, and how the definitions ensure that the State is appropriately analyzing and identifying LEAs with significant discrepancy. The State must also indicate whether the minimum n and/or cell size represents a change from the prior SPP/APR reporting period. If so, the State must provide an explanation why the minimum n and/or cell size was changed.

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 2024 SPP/APR, use data from 2023-2024), 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:

- Option 1: The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or
- Option 2: The rates of suspensions and expulsions for children with IEPs to rates of suspensions and expulsions for nondisabled children within the LEAs.

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

If, under Option 1, the State uses a State-level long-term suspension and expulsion rate for children with disabilities to compare to LEA-level long-term suspension and expulsion rates for the purpose of determining whether an LEA has a significant discrepancy, the State must provide the State-level long-term suspension and expulsion rate used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose long-term suspension/expulsion rate exceeds 2 percentage points above the State-level rate of 0.7%, the State must provide OSEP with the State-level rate of 0.7%).

If, under Option 2, the State uses a rate difference to compare the rates of long-term suspensions and expulsions for children with IEPs to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate difference used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose rate of long-term suspensions and expulsions for children with IEPs is 4 percentage points above the long-term suspension/expulsion rate for nondisabled children, the State must provide OSEP with the rate difference of 4 percentage points). Similarly, if, under Option 2, the State uses a rate ratio to compare the rates of long-term suspensions and expulsions for children with IEPs to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate ratio used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose ratio of its long-term suspensions and expulsions rate for children with IEPs to long-term suspensions and expulsions rate for nondisabled children is greater than 3.0, the State must provide OSEP with the rate ratio of 3.0).

Because the Measurement Table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2023-2024 school year, those 100 LEAs would have reported section 618 data in 2023-2024 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2024-2025, suspension/expulsion data from those 15 new LEAs would not be in the 2023-2024 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2024 SPP/APR submission, States must use the number of LEAs reported in 2023-2024 (which can be found in the FFY 2023 SPP/APR introduction).

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

Provide detailed information about the timely correction of 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 23-01, dated July 24, 2023.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	3.36%

FFY	2019	2020	2021	2022	2023
Target <=	0.00%	0.00%	0.00%	0.00%	3.36%
Data	0.00%	0.00%	Not Valid and Reliable	Not Valid and Reliable	3.36%

Targets

FFY	2024	2025
Target <=	3.36%	3.30%

Targets: Description of Stakeholder Input

During the fall 2025 stakeholder meeting, stakeholders expressed concerns over the lack of consistency of student discipline within the LEAs. Suggestions were made to have stronger written procedures in place to ensure consistency for all students. The SEA indicated there will be a new data collection system developed in FFY 2026 that will allow for easier data entry. Suspensions due to students vaping were also a concern. Stakeholders discussed helping LEAs develop alternatives to suspension for vaping to help cut down on suspensions. Resources for parents to help them understand their role when their student is suspended were also suggested. Improved communication between home and the LEA along with training for administrators on the difference between in-school suspension and out-of-school suspensions were also proposed by the group.

FFY 2024 SPP/APR Data

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

NO

Number of LEAs that have a significant discrepancy	Number of LEAs in the State	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
2	148	3.36%	3.36%	1.35%	Met target	No Slippage

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

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

State's definition of "significant discrepancy" and methodology

The SEA's definition of significant discrepancy for 4A includes comparing the rates of out-of-school suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the state using a rate ratio threshold of six times the state's mean suspension rate for two consecutive years of data, with the respective state mean rate applied for each reporting year. There is no minimum cell size or n size for children with IEPs suspended and expelled for greater than 10 days.

SEA Methodology:

- 1) A Suspension/Expulsion Rate is calculated for each LEA for the current year as follows: [(# of students with IEPs out-of-school suspended or expelled for more than 10 days) divided by (# of students with IEPs)] times 100.
- 2) The State Suspension/Expulsion Mean Rate is determined annually by summing the Suspension/Expulsion Rates of all LEAs and dividing by the total number of LEAs. Because the state mean is updated annually, for the 2023-2024 reporting period, the SEA used the state mean of .33 from the 2022-2023 school year and the state mean of 0.42, from the 2023-2024 school year to determine which LEAs had exceeded the state mean for two consecutive years.
- 3) An LEA is determined to have a significant discrepancy if the LEA's Suspension/Expulsion Rate is six times greater than the State Suspension/Expulsion Mean Rate for two consecutive years.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2024 using 2023-2024 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.

LEAs that exceeded the SEA’s threshold received a notification letter from the SEA. LEAs were provided a tool to conduct a self-assessment of their policies, practices, and procedures related to data tracking and analysis, manifestation determination procedures, procedural safeguards, and use of positive behavior intervention and supports. LEAs submitted evidence and supporting documentation with the self-assessment and submitted the number of files requested by the SEA for verification. The number of files requested by the SEA is determined by the number of students the LEA had suspended. For LEAs suspending 1-5 students, one file was requested. For LEAs suspending 6-10 students, two files were requested. If a LEA has more than 10 students, additional files would be reviewed. The files were selected from the students who were suspended during the data collection period. The SEA reviewed the LEAs policies, practices, and procedures, self-assessment, and evidence to verify LEA’s responses on the tool. The SEA also reviewed the student files submitted, to ensure policies, procedures, and practices, along with the procedural safeguards, were being followed throughout the development and implementation of student IEPs. The SEA also focused on ensuring LEA’s procedures for conducting appropriate manifestation determination meetings included discussing the services to be provided to the student during the suspension beginning on the 11th day. In addition, the SEA reviewed documentation of the use of positive behavioral interventions being used for suspended students in behavior plans and/or in the behavior impedes learning sections of the IEP.

If any noncompliance was found upon this review by the SEA, the LEA received a written notification of noncompliance along with a CAP and timeline of correction consistent with the OSEP Memo QA 23-01.

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

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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

The SEA reviews the sample number of files from LEAs that exceeded the threshold for suspension/expulsion for greater than 10 days. The SEA also reviewed the LEAs written policies and procedures for compliance. If noncompliance is noted, the LEA policy and procedure team participates in technical assistance training on suspension/expulsion policies, procedures, and practices. The LEA updates their policies, procedures, and practices which are reviewed by the SEA to confirm they meet regulatory requirements. The LEA then trains staff on the updated LEA policies and procedures. The LEA submits one additional file per LEA, of a student who had a manifestation determination since the notification of noncompliance to ensure the updated compliant policies and procedures are implemented. The SEA reviews to ensure the updated procedures are being put into practice by the LEA.

Correction of Findings of Noncompliance Identified in FFY 2023

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

FFY 2023 Findings of Noncompliance Verified as Corrected

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

For the four LEAs, that were identified for noncompliance related to implementing the regulatory requirements, the SEA reviewed the LEA's updated FFY 2023 policies, procedures, and practices and subsequent data related to tracking suspensions, the manifestation determination requirements, the development and implementation of IEPs, the use of positive behavioral interventions and supports in the student’s Behavior Impedes Learning section, and procedural safeguards to ensure the LEAs are meeting regulatory requirements with 100% compliance.

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

The SEA reviewed the LEA’s FFY 2023 individual student files for students suspended or expelled for greater than 10 days and compared them to the LEA’s policies and procedures related to tracking and communication of student suspensions, development and implementation of IEPs, the use of positive behavioral interventions and supports in the student’s Behavior Impedes Learning section of the IEP, and manifestation determination procedural safeguards. The LEA corrected and updated each individual student file and submitted them to the SEA. The SEA reviewed and verified the corrected individual student files and the updated policies, procedures, and practices submitted by the LEAs met the regulatory requirements with 100% compliance.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State’s issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

None

4A - OSEP Response

The State did not demonstrate that each LEA corrected the findings of noncompliance identified in FFY 2023 because it did not report that it verified correction of those findings, consistent with OSEP QA 23-01. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2023 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.

4A - Required Actions

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State must provide a definition of its minimum n and/or cell size itself and a description thereof (e.g., a State's n size of 15 represents the number of children with disabilities enrolled in an LEA, by race and ethnicity, and a State's cell size of 5 represents the number of children with disabilities who have received out-of-school suspensions and expulsions of more than 10 days within the LEA, by race and ethnicity).

The State must also provide rationales for its minimum n and/or cell size, including why the definitions chosen are reasonable and based on stakeholder input, and how the definitions ensure that the State is appropriately analyzing and identifying LEAs with significant discrepancy, by race and ethnicity. The State must also indicate whether the minimum n and/or cell size represents a change from the prior SPP/APR reporting period. If so, the State must provide an explanation why the minimum n and/or cell size was changed.

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 2024 SPP/APR, use data from 2023-2024), 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:

- Option 1: The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or
- Option 2: The rates of suspensions and expulsions for children with IEPs to the rates of suspensions and expulsions for nondisabled children within the LEAs

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

If, under Option 1, the State uses a State-level long-term suspension and expulsion rate for children with disabilities to compare to LEA-level long-term suspension and expulsion rates for the purpose of determining whether an LEA has a significant discrepancy, by race and ethnicity, the State must provide the State-level long-term suspension and expulsion rate used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose long-term suspension/expulsion rate exceeds 2 percentage points above the State-level rate of 0.7%, the State must provide OSEP with the State-level rate of 0.7%).

If, under Option 2, the State uses a rate difference to compare the rates of long-term suspensions and expulsions for children with IEPs, by race and ethnicity, to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate difference used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose rate of long-term suspensions and expulsions for children with IEPs, by race and ethnicity, is 4 percentage points above the long-term suspension/expulsion rate for nondisabled children, the State must provide OSEP with the rate difference of 4 percentage points). Similarly, if, under Option 2, the State uses a rate ratio to compare the rates of long-term suspensions and expulsions for children with IEPs, by race and ethnicity, to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate ratio used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose ratio of its long-term suspensions and expulsions rate for children with IEPs, by race and ethnicity, to long-term suspensions and expulsions rate for nondisabled children is greater than 3.0, the State must provide OSEP with the rate ratio of 3.0).

Because the Measurement Table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2023-2024 school year, those 100 LEAs would have reported section 618 data in 2023-2024 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2024-2025, suspension/expulsion data from those 15 new LEAs would not be in the 2023-2024 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2023 SPP/APR submission, States must use the number of LEAs reported in 2023-2024 (which can be found in the FFY 2023 SPP/APR introduction).

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

Provide detailed information about the timely correction of 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 23-01, dated July 24, 2023.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State’s issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

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
2023	2.31%

FFY	2019	2020	2021	2022	2023
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	Not Valid and Reliable	2.31%

Targets

FFY	2024	2025
Target	0%	0%

FFY 2024 SPP/APR Data

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

YES

If yes, the State must provide a definition of its minimum n and/or cell size itself and a description thereof (e.g., a State’s n size of 15 represents the number of children with disabilities enrolled in an LEA, and a State’s cell size of 5 represents the number of children with disabilities, by race and ethnicity, who have received out-of-school suspensions and expulsions of more than 10 days within the LEA).

The SEA’s n size of 20 represents the number of students with disabilities, by race or ethnicity, enrolled in the LEA. The SEA has no minimum cell size for the number of students with disabilities, by race and ethnicity, who have received out-of-school suspensions and expulsions of more than 10 days within the LEA.

If yes, the State must also provide rationales for its minimum n and/or cell size, including why the definitions chosen are reasonable and based on stakeholder input, and how the definitions ensure that the State is appropriately analyzing and identifying LEAs with significant discrepancy.

Stakeholders, consisting of members of the SDAPCD, SDPC, DRSD, LEA administrators, and LEA special education staff were presented 48 possible options considering different n size, cell size and threshold variations. Because the majority of LEAs report zero suspension or expulsion of students with disabilities greater than 10 days, the stakeholders determined that a cell size of zero and a minimum n size of 20 would be the most inclusive and representative. The cell and n size would incorporate 85 to 95 percent of LEAs in the analysis annually. It would also ensure the SEA is analyzing suspension and expulsion data from small to large population LEAs. The decision on the n size of 20 was determined after examining 48 different options of n size, cell size, and threshold. The difference between selecting LEAs with a smaller n size to an n size of 20 was negligible. The stakeholders selected the n size of 20 for 4B because it would allow the SEA to identify LEAs with significant discrepancy using a threshold of eight times above state mean over two years annually. The SEA previously had a threshold that was 17 times above the state mean.

If yes, the State must also indicate whether the minimum n and/or cell size represents a change from the prior SPP/APR reporting period.

There was no change in minimum n and/or cell size from FFY 2023.

If yes, the State must provide an explanation why the minimum n and/or cell size was changed.

There was no change in minimum n and/or cell size.

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/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.

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
3	2	129	2.31%	0%	1.55%	Did not meet target	No Slippage

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

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

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

The SEA's definition of significant discrepancy for 4B includes comparing the rates of out-of-school suspensions and expulsions of greater than 10 days in a school year for children with IEPs by race and ethnicity among LEAs in the state, using a rate ratio threshold of eight times the state's mean suspension rate for two consecutive years of data, with the respective state mean applied for each reporting year. The SEA's minimum n size of 20 represents the number of children with disabilities enrolled, by race and ethnicity, in a LEA, and a minimum cell size of zero represents the number of students with disabilities, by race and ethnicity, who have received out-of-school suspensions and expulsions of more than 10 days within the LEA.

SEA Methodology:

- 1) A Suspension/Expulsion Rate is calculated for each LEA for the current year as follows: [(# of students with IEPs out-of-school suspended or expelled for more than 10 days) divided by (# of students with IEPs)] times 100.
- 2) The State Suspension/Expulsion Mean Rate is determined annually by summing the Suspension/Expulsion Rates of all LEAs and dividing by the total number of LEAs. Because the state mean is updated annually, for the 2023-2024 reporting period, the SEA used the state mean of .33 from the 2022-2023 school year and the state mean of 0.42, from the 2023-2024 school year to determine which LEAs had exceeded the state mean for two consecutive years.
- 3) A LEA is determined to have a significant discrepancy if the LEA's Suspension/Expulsion Rate is eight times greater than the State Suspension/Expulsion Mean Rate for two consecutive years.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2024 using 2023-2024 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.

LEAs that exceeded the SEA's threshold received a notification letter from the SEA. The SEA provided LEAs with a tool to conduct a self-assessment of their policies, practices, and procedures related to data tracking and analysis, manifestation determination procedures, and use of positive behavior intervention and supports. LEAs submitted evidence and supporting documentation with the self-assessment and submitted the number of files requested by the SEA for verification. The number of files requested by the SEA is determined by the number of students the LEA had suspended. For LEAs suspending 1-5 students, one file was requested. For LEAs suspending 6-10 students, two files were requested. If a LEA has more than 10 students, additional files would be reviewed. The files were selected from the students who were suspended during the data collection period. The SEA reviewed the LEA's policies, practices, and procedures, self-assessment, and evidence to verify LEA's responses on the tool. The SEA also reviewed files including IEPs of suspended students to ensure policies, procedures, and practices, along with the procedural safeguards, were being followed throughout the development and implementation of student IEPs. The SEA also focused on ensuring LEA's procedures for conducting appropriate manifestation determination meetings included discussing the services to be provided to the student during the suspension beginning on the 11th day. In addition, the SEA reviewed documentation of the use of positive behavioral interventions being used for suspended students in behavior plans and/or in the behavior impedes learning sections of the IEP.

If any noncompliance was found upon this review by the SEA, the LEA received a written notification of noncompliance along with a CAP and timeline of correction consistent with the OSEP Memo QA 23-01.

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

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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

The SEA reviewed the policies and procedures each LEA was required to submit. Each LEA's documents were reviewed by the SEA to verify they met requirements. Student files were also reviewed by the SEA to ensure the updated procedures were being put into practice during the IEP and Manifestation Determination process.

Correction of Findings of Noncompliance Identified in FFY 2023

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

FFY 2023 Findings of Noncompliance Verified as Corrected

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

For the three LEAs that were identified as having a significant discrepancy, the SEA reviewed the LEA's FFY 2023 policies, procedures, and practices relating to the manifestation determination requirements, the development and implementation of IEPs, the use of positive behavioral interventions and supports in the student's Behavior Impedes Learning section, and procedural safeguards to ensure they comply with meeting regulatory requirements. The SEA also interviewed LEA staff and selected files from different grade levels to determine if implementation of the policies, procedures, and practices related to improving behavior and reducing suspension/expulsion were being implemented across the LEA.

The SEA verified the LEAs are implementing regulatory requirements across all race and ethnic groups with 100% compliance.

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

The SEA reviewed the LEA's FFY 2023 individual student files for students suspended or expelled for greater than 10 days and compared to the LEA's policies and procedures related to development and implementation of IEPs, the use of positive behavioral interventions and supports in the student's Behavior Impedes Learning section of the IEP, and manifestation determination procedural safeguards. The LEA was required to fix the individual student files and submit them to the SEA. The SEA verified the updated individual student files, updated policies, procedures, and practices met the regulatory requirements with 100% compliance for this indicator.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

SD does not allow or have policies and procedures to allow LEAs to correct noncompliance prior to issuing a finding.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. The State must demonstrate, in the FFY 2024 SPP/APR, that the districts identified with noncompliance in FFY 2023 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 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 2023. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case or child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

Specific actions the SEA took to provide valid and reliable data for this indicator for FFY 2023 are described under State's definition of significant discrepancy and methodology.

Specific actions the SEA took to verify the LEAs were correctly implementing the regulatory requirements and corrected each individual case of noncompliance are described above in the FFY 2023 Findings of Noncompliance Verified as Corrected section.

The SEA had revised the baseline data for this indicator, using data from FFY 2023, but OSEP did not accept that baseline revision because the State's FFY 2023 baseline data reported in the Historical Data table was not consistent with the State's FFY 2023 data reported in the FFY 2023 SPP/APR Data table. The SEA has updated the baseline data to reflect the actual data reported for FFY 2023 as 2.31%.

4B - OSEP Response

4B- Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Inside the regular class 80% or more of the day;
- B. Inside the regular class less than 40% of the day; and
- C. In separate schools, residential facilities, or homebound/hospital placements.

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

Data Source

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

Measurement

- A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

Instructions

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

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

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2019	2020	2021	2022	2023
A	2020	Target >=	68.00%	75.96%	75.96%	76.68%	77.18%
A	75.96%	Data	73.91%	75.96%	75.52%	76.45%	77.12%
B	2020	Target <=	6.00%	5.57%	5.57%	5.57%	5.57%
B	5.57%	Data	5.38%	5.57%	5.63%	5.58%	5.77%
C	2020	Target <=	3.29%	1.67%	1.67%	1.67%	1.67%
C	1.67%	Data	1.99%	1.67%	1.37%	1.41%	1.23%

Targets

FFY	2024	2025
Target A >=	77.68%	78.68%
Target B <=	5.50%	5.50%
Target C <=	1.67%	1.65%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine whether or not the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the targets for Indicator 5 will be maintained for FFY 2024.

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 Children with Disabilities (IDEA) School Age (ED Facts file spec FS002; Data group 74)	07/30/2025	Total number of children with IEPs aged 5 (kindergarten) through 21	22,428

Source	Date	Description	Data
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	17,324
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	1,311
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	149
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	99
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	39

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 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	17,324	22,428	77.12%	77.68%	77.24%	Did not meet target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	1,311	22,428	5.77%	5.50%	5.85%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	287	22,428	1.23%	1.67%	1.28%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and
- B. Separate special education class, separate school, or residential facility.
- C. Receiving special education and related services in the home.

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

Data Source

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

Measurement

- A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school, or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

Instructions

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

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

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

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

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

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

Part	FFY	2019	2020	2021	2022	2023
A	Target >=	21.65%	21.76%	22.00%	22.75%	23.50%
A	Data	23.79%	21.76%	21.34%	19.26%	15.26%
B	Target <=	16.16%	18.15%	17.93%	17.60%	17.17%
B	Data	13.62%	18.15%	19.23%	18.39%	22.89%
C	Target <=		1.67%	1.27%	1.26%	1.24%
C	Data		1.27%	0.86%	1.47%	1.32%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine whether or not the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the targets for Indicator 6 will be maintained for FFY 2024.

Stakeholders recommended continued SEA supports by providing resources and training information regarding how to provide early childhood special education services in the regular preschool setting.

Stakeholder input highlighted challenges related to funding, particularly the difficulty of securing adequate resources to support regular preschool settings within schools. Additional concerns were raised about limited access to regular preschool settings when such programs are not provided directly by the LEA.

Targets

Please select if the State wants to set baselines 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	21.76%
B	2020	18.15%
C	2020	1.27%

Inclusive Targets – 6A, 6B

FFY	2024	2025
Target A >=	24.25%	25.00%
Target B <=	16.74%	16.00%

Inclusive Targets – 6C

FFY	2024	2025
Target C <=	1.22%	1.20%

Prepopulated Data

Data Source:

SY 2024-25 Children with Disabilities (IDEA) Early Childhood (EDFacts file spec FS089; Data group 613)

Date:

07/30/2025

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	610	949	366	1,925
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	75	141	52	268
b1. Number of children attending separate special education class	197	203	67	467
b2. Number of children attending separate school	4	11	5	20
b3. Number of children attending residential facility	0	2	0	2
c1. Number of children receiving special education and related services in the home	9	5	2	16

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 2024 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 2023 Data	FFY 2024 Target	FFY 2024 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	268	1,925	15.26%	24.25%	13.92%	Did not meet target	Slippage
B. Separate special education class, separate school, or residential facility	489	1,925	22.89%	16.74%	25.40%	Did not meet target	Slippage
C. Home	16	1,925	1.32%	1.22%	0.83%	Met target	No Slippage

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

Students receiving the majority of their special education and related services in a regular early childhood program did not meet the target and had slippage. The SEA disaggregated the data to determine why the percentage for 6A decreased and slippage occurred. An additional 199 preschool students would have needed to receive their services in the regular early childhood program in order for the target to have been met in FFY 2024; and an additional 26 students would have needed to have been served in the regular early childhood program for slippage not to have occurred in FFY 2024.

In examining why slippage occurred, the SEA noted that the two largest LEAs in the state had large slippage from FFY 2023 to FFY 2024. One LEA went from a 6A rate of 11.40% in FFY 2023 to a rate of 2.30% in FFY 2024; and the other LEA went from a 6A rate of 33.70% in FFY 2023 to a rate of 26.10% in FFY 2024. These two LEAs accounted for a decrease of 40 students being served in the regular early childhood program.

The SEA followed up with two LEAs regarding preschool program implementation. One LEA experienced staffing challenges that led to the closure of its regular preschool classrooms, resulting in some students receiving services without access to nondisabled peers because they were not enrolled in an external preschool setting and the LEA continued to provide a Special Education preschool setting for the students. During the 2024–2025 school year, the LEA successfully filled the vacant position and reinstated regular preschool environments; however, FFY 2024 data had already been submitted by that time.

The other LEA reported an increase in the total number of related service minutes for students in the Early childhood setting, along with a rise in the number of students requiring multiple related services and a greater intensity of need. Based on IEP team determinations, and unique student data, more students were identified to have better outcomes when services are delivered in one-to-one settings. Consequently, more students are being served under the LRE Regular Preschool Classroom with Special Education Services in Other Location.

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

The separate classroom, school, residential facility environments did not meet the target and had slippage. The SEA disaggregated the data to determine why the percentage for 6B increased and slippage occurred. For the target to have been met in FFY 2024, 166 fewer Early childhood students would have needed to be served in the 6B environment; and 48 fewer students would have needed to have been served in 6B for slippage not to have occurred in FFY 2024.

In examining why slippage occurred, the SEA noted that the two largest LEAs in the state had increased slippage from FFY 2023 to FFY 2024. One LEA went from a 6B rate of 45.70% in FFY 2023 to a rate of 53.10% in FFY 2024; and the other LEA went from a 6B rate of 11.80% in FFY 2023 to a rate of 18% in FFY 2024. These two LEAs accounted for an increase of 33 students being served in the 6B environment. Four other medium-sized LEAs account for the rest of the slippage.

The SEA followed up with the two LEAs regarding the increase in 6B special education settings. One LEA cited staffing issues that caused their regular preschool program to close, and the LEA moved the students to a special education preschool classroom during the 2024-2025 school year. The other LEA reported that students are coming in with higher language and fine motor needs requiring more targeted supports that are best provided in one-on-one or separate settings.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

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

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2019	2020	2021	2022	2023
A1	2018	Target >=	79.35%	67.11%	67.11%	67.35%	67.58%
A1	67.11%	Data	67.74%	70.02%	66.12%	62.92%	63.89%

A2	2018	Target >=	84.35%	71.79%	71.79%	72.07%	72.34%
A2	71.79%	Data	73.43%	72.37%	71.44%	73.25%	75.06%
B1	2018	Target >=	69.50%	56.71%	56.71%	57.12%	57.53%
B1	56.71%	Data	57.74%	56.10%	57.09%	55.56%	59.34%
B2	2018	Target >=	57.96%	51.89%	51.89%	52.15%	52.42%
B2	51.89%	Data	47.74%	50.17%	47.26%	56.05%	61.27%
C1	2018	Target >=	71.60%	58.35%	58.35%	58.81%	59.26%
C1	58.35%	Data	60.06%	60.78%	56.45%	51.03%	55.61%
C2	2018	Target >=	73.60%	66.13%	66.13%	66.36%	66.60%
C2	66.13%	Data	66.72%	63.58%	65.87%	64.44%	63.31%

Targets

FFY	2024	2025
Target A1 >=	68.06%	69.00%
Target A2 >=	72.90%	74.00%
Target B1 >=	58.36%	60.00%
Target B2 >=	52.95%	54.00%
Target C1 >=	60.17%	62.00%
Target C2 >=	67.07%	68.00%

Targets: Description of Stakeholder Input

Stakeholder input was sought in fall 2025 to determine whether current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. After reviewing the data and considering SDAPCD discussions, it was decided to maintain the Indicator 7 targets for FFY 2024.

Stakeholders recommended the SEA develop a consolidated resource document for parents and educators to streamline access to high-quality instructional materials. This resource aims to reduce time spent searching for materials and increase time available for planning and delivering specially designed instruction.

FFY 2024 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

954

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	47	4.93%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	68	7.13%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	89	9.33%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	124	13.00%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	626	65.62%

Outcome A	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A,	213	328	63.89%	68.06%	64.94%	Did not meet target	No Slippage

Outcome A	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
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>	750	954	75.06%	72.90%	78.62%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	96	10.06%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	79	8.28%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	125	13.10%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	221	23.17%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	433	45.39%

Outcome B	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 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>	346	521	59.34%	58.36%	66.41%	Met target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	654	954	61.27%	52.95%	68.55%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	87	9.12%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	103	10.80%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	115	12.05%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	148	15.51%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	501	52.52%

Outcome C	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 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:</i> $(c+d)/(a+b+c+d)$	263	453	55.61%	60.17%	58.06%	Did not meet target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation:</i> $(d+e)/(a+b+c+d+e)$	649	954	63.31%	67.07%	68.03%	Met target	No Slippage

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

NO

If no, provide the criteria for defining “comparable to same-aged peers.”

Per SEA business rules, a student attains the classification of "comparable to same-aged peers" upon achieving a standard score of -1.27 or above the norm on the Battelle Developmental Inventory 2/3 (BDI-2/BDI-3) scoring chart. This score aligns with the 10th percentile rank for a specified outcome area assessed by the BDI-2 and BDI-3 assessments.

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

Data for this indicator is collected using the BDI-2 and the BDI-3. When a student transitions from the Part C program to the Part B 619 program or initially enters the Part B program, they are assessed in the areas of adaptive, social-emotional, communication, motor, and cognitive abilities.

The exit data from Part C serves as the baseline for students transitioning to Part B 619. Upon exit from the Part B 619 program, whether early or before turning six, and having received at least six months of service, assessments are conducted in the same five developmental areas using the BDI-2 or the BDI-3 depending upon the entry assessment tool used. Progress in the three indicator outcome areas was determined by comparing entry and exit scores across the three developmental domains.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2024 SPP/APR, compare the FFY 2024 response rate to the FFY 2023 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

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

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

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

Stakeholder input was sought in the fall 2025 to determine if the current target should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. The 2024-2025 survey was revised to reduce the number of questions from 12 to 11, and instructions and questions were revised to be more parent friendly. The revised survey likely contributed to the increase in the Parent Involvement Score from 88.17% in FFY 2023 to 90.17% in FFY 2024. Following consideration of the data and SDAPCD discussion, it was determined that since a revised survey was implemented for the 2024-2025 school year, the FFY 2024 baseline data and target will be revised to 90.17% and the FFY 2025 target will be revised to 90.27%.

LEA stakeholders expressed that SEA trainings and increased communication contributed to LEA staff better understanding the benefits of the survey collection, which increased the number of returned responses. The SEA efforts to provide LEAs with up-to-date data throughout the school year also contributed to an increase of 7.14 percentage points in the statewide response rate, rising from 29.14% in FFY 2023 to 36.28% in FFY 2024.

While analyzing the FFY 2024 data, stakeholders noted that although Hispanic and African American response rates were low, their parent involvement scores were positive. Stakeholders stated that local LEA staff need training in the area of parental rights. Stakeholders also recommended that the SEA create a concrete list of special education resources that LEAs can hand to parents. Per stakeholder recommendations, the SEA is taking steps to develop a resource website and statewide training on parental rights for special education LEA staff.

Historical Data

Baseline Year	Baseline Data
2024	90.17%

FFY	2019	2020	2021	2022	2023
Target >=	79.00%	81.00%	81.00%	81.50%	82.00%
Data	87.74%	86.20%	87.28%	88.24%	88.17%

Targets

FFY	2024	2025
Target >=	90.17%	90.27%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
7,937	8,802	88.17%	90.17%	90.17%	N/A	N/A

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 SD Parent Survey was designed for all parents of students with disabilities ages 3-21. Parents of preschool children ages 3-5 and parents of students ages 6-21 were given the same parent survey instruction letter and parent survey questions. The survey was distributed to both age groups via the same procedures, including distribution by LEAs in-person, as well as via mail, email, QR code, and online link. The survey is available to parents in English, Spanish, and Karen. The data analysis methodology was the same for both age groups. While the age 3-21 data is combined for reporting, the SEA can analyze the data separately by school and grade level as needed. When analyzing by grade level, including preschool, all grade levels represented in the respondents were within +/- 3% of their population. Therefore, the combined data from school age and preschool surveys is valid and reliable.

The number of parents to whom the surveys were distributed.

24,260

Percentage of respondent parents

36.28%

Response Rate

FFY	2023	2024
Response Rate	29.14%	36.28%

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

+/- 3% discrepancy in the proportion of responders compared to target group

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

The SEA compared the representation by race/ethnicity, grade level, and disability category in the population to the representation in the respondents using a +/- 3% criteria to identify over- or under-representation.

Using this methodology, one difference was found by race/ethnicity. The students with disabilities population consisted of 64% of Whites; however, the respondents consisted of 70% of Whites. All other racial/ethnic groups were within +/- 3% of their population. Although the White race/ethnicity group was over-represented in the response data, there were very few significant differences in the parent involvement rates between parents of White students and parents of students with other race/ethnicities.

When analyzing the demographics by grade level, including preschool, and disability category, all grade levels and all disability categories represented in the respondents were within +/- 3% of their population. Therefore, the demographics of the parents responding are representative of the grade level and disability category of the children receiving special education services.

It is important to note that every LEA is surveyed every year, which is the most effective way to get an overall parent involvement percentage that is representative of the state as a whole in any given year. Although parents from a wide range of LEAs from across the state responded to the survey and reflected the population of parents in terms of geographic distribution, there is still one overrepresented subgroup in response rate by race/ethnicity,

which suggests the demographics of the parents responding are not representative of the race/ethnicity of the children receiving special education services.

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

NO

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

Due to SEA response data showing an overrepresentation of White respondents, the SEA will directly contact LEAs with high minority populations with data that indicate an overrepresentation of White respondents in their response data. The SEA will also contact LEAs on and near reservations with nearly 100% American Indian populations, to notify the LEAs of their LEA response rate in comparison to the statewide response rate. The SEA will provide these LEAs with quarterly response rate updates.

The SEA will continue to analyze the current school year data, implement training to LEA staff via an on-demand webinar, and provide reminders to all LEAs on a monthly statewide special education webinar and special education news alert, including tips for engaging parents and increasing survey responses. These communications will also address that White respondents were overrepresented in FFY 2024 data and that LEAs need to collect responses that are representative of the race/ethnicity of minority populations. The SEA will request LEAs with response rates less than 20% submit documentation on what steps the LEA will take to increase representativeness of race/ethnicity and to increase response rates. In December of each year, the SEA notifies any LEA with a current response rate of less than 15%. These identified LEAs will be contacted again throughout the spring with response rate updates and reminders that their LEA response rate contributes to the statewide representativeness of race/ethnicity.

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 SEA response rate increased from 29.14% in FFY 2023 to 36.28% in FFY 2024. This success is likely because of the SEA's increased training and monitoring data efforts. The SEA will continue to complete real-time data pulls of LEA response rates and notify LEAs that are not on track to meet the SEA required 20% response rate. The SEA will continue to provide webinars and announcements on the importance of LEA representativeness of race/ethnicity, as well as have direct communications with LEAs on and near reservations with nearly 100% American Indian populations regarding how their response rates greatly contribute to the statewide representativeness of race/ethnicity. The SEA will continue providing translated versions of the survey in Spanish and Karen. The SEA will continue these targeted activities in future school years to increase response rate, especially for race/ethnic groups that are underrepresented.

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.

Nonresponse bias measures the differences in opinions between respondents and non-respondents in meaningful ways, such as the positivity of responses. A few things can be examined to determine nonresponse bias.

First, the SEA analyzed the overall response rate. The higher the response rate, the less likely nonresponse bias will occur. The SEA's response rate is 36.28%, which is quite high for a survey of this nature.

Second, the representativeness of the responses was examined. No differences were found by grade level or disability category. One difference was found in the respondent composition by race/ethnicity, indicating overrepresentation in the White group. Further, parents of white students were slightly more positive than parents of American Indian students which suggests that non-response bias might be present. While the potential for non-response bias exists based on race/ethnicity, it is important to note that parents from a wide variety of LEAs from across the state responded to the survey.

Third, a comparison can be made with the responses of parents who responded early in the school year to those who responded late in the school year. The idea being that perhaps those parents who do not immediately respond are different in some meaningful way than those who respond early in the school year. These results showed no statistically significant differences between parents who responded earlier and parents who responded later.

Although the response rate is strong, there are no differences between early and later responders, and responses are representative by grade and disability, the slight racial/ethnic disparity in respondent composition and response positivity indicates some potential for nonresponse bias. To avoid the potential for non-response bias and continue to promote a response from a broad cross section of parents of children with disabilities, the SEA will continue to monitor LEA response rates and train LEAs on how to encourage parent participation and survey completion across all grade levels, disability categories, and race/ethnic groups.

Sampling Question	Yes / No
Was sampling used?	NO

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

Provide additional information about this indicator (optional)

The 2024-2025 survey used for FFY 2024 data collection was revised per stakeholder feedback and recommendations. The revisions included reducing the number of questions from 12 to 11, as well as rewording all instructions and questions to be more parent friendly. These revisions were likely a contributing factor to the increase in the Parent Involvement Score from 88.17% in FFY 2023 to 90.17% in FFY 2024.

8 - Prior FFY Required Actions

In the FFY 2024 SPP/APR, the State must report whether the FFY 2024 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of children receiving special education services.

Response to actions required in FFY 2023 SPP/APR

An analysis of demographic representativeness, along with specific actions the SEA took and is taking to address representativeness, are described in the above demographic sections.

8 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2024, and OSEP accepts that revision.

8 - Required Actions

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2024 reporting period (i.e., after June 30, 2025).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2019	2020	2021	2022	2023
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2024	2025

Target	0%	0%
--------	----	----

FFY 2024 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.

111

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
1	0	37	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).

The SEA collects data for Indicator 9 through the December 1 child count (Edfacts files FS002) and Fall Enrollment (Edfacts file FS052) collected on the last Friday in September. A Weighted Risk Ratio based on the identification rate for each racial/ethnic group at each LEA is calculated; thus, all data for all racial/ethnic groups in the state are examined. A Weighted Risk Ratio is applied to LEAs with 20 or more students in the cell size for each racial/ethnic group (based on child count data) and if there are also 20 or more students in the n size (based on fall enrollment). The SEA identifies LEAs based on one year of data in the calculation.

Disproportionate representation is defined as a Weighted Risk Ratio of 3.00 and above (over-representation). If a racial/ethnic group is flagged for numerical disproportionate representation, the policies and procedures of that LEA are reviewed to determine if the disproportionate representation is due to inappropriate identification.

For Indicator 9, all 148 LEAs are included in the analysis. Of the 148 LEAs, 37 met the minimum cell and n size requirements at least one time for a Final Weighted Risk Ratio to be calculated (for each LEA, in theory, seven risk ratios could be calculated – one for each racial/ethnic group).

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

The one LEA, who met the state's definition of disproportionate representation, had appropriate identification based on the SEA's review of the LEA's policies, procedures, and practices and had met the regulatory requirements.

When a LEA meets the SEA's state definition for disproportionate representation, the SEA conducts a compliance review of the LEA's policies, procedures, and practices. The SEA requests written policies and procedures from referral through eligibility determination. The SEA also selects a representative sample of files across the identified racial/ethnic category(ies) and across school buildings including student files from the comparison group.

Additionally, the SEA conducts interviews with LEA staff to determine if the LEA was appropriately implementing the LEA's written identification and eligibility policies and procedures in practice.

If the LEA followed policies and procedures for the eligibility of the disability category and across the identified racial/ethnic group and comparison group, the LEA is identified as having appropriate identification procedures. If policies and procedures were not appropriately followed or implemented correctly, then the LEA would receive a CAP in the area identified.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2023

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

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

SD does not allow or have policies and procedures to allow LEAs to correct noncompliance prior to issuing a finding.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2024 reporting period (i.e., after June 30, 2025).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2019	2020	2021	2022	2023
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2024	2025
Target	0%	0%

FFY 2024 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.

124

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
2	0	24	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).

The SEA collects data for Indicator 10 through the December 1 child count (FS002) and Fall Enrollment (Membership File FS052) collected on the last Friday in September. A Weighted Risk Ratio based on the identification rate for each racial/ethnic group by specific disability category at each LEA is calculated; thus, all data for all racial/ethnic groups in the state are examined. A Weighted Risk Ratio is determined only if there are 20 or more students in the cell size of interest (based on child count data) and if there are also 20 or more students in the n size (based on fall enrollment). The SEA identified LEAs based on one year of data in the calculation.

Disproportionate representation is defined as a Weighted Risk Ratio of 3.00 and above (over-representation). Once a ratio is flagged for numerical disproportionate representation, the policies and procedures of that LEA are reviewed to determine if the disproportionate representation is due to inappropriate identification.

For Indicator 10, all of the 148 LEAs are included in the analysis. Of the 148 LEAs, 24 met the minimum cell and n size requirements at least one time for a Final Weighted Risk Ratio to be calculated (for each LEA, in theory, 42 weighted risk ratios could be calculated— one for each racial/ethnic group times the six primary disability categories).

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

The two LEAs, who met the state’s definition of disproportionate representation, had appropriate identification based on the SEA’s review of the LEA’s policies, procedures, and practices and had met the regulatory requirements.

When a LEA meets the SEA’s state definition for disproportionate representation, the SEA conducts a compliance review of the LEA’s policies, procedures, and practices. The SEA requests written policies and procedures from referral through eligibility determination. The SEA also selects a representative sample of files across the identified racial/ethnic category(ies) and across school buildings including student files from the comparison group. The SEA also conducts interviews with LEA staff to determine if the LEA was appropriately implementing the LEA’s written identification and eligibility policies and procedures in practice.

If the LEA followed policies and procedures for the eligibility of the disability category and across the identified racial/ethnic group and comparison group, the LEA is identified as having appropriate identification procedures. If policies and procedures were not appropriately followed or implemented correctly, then the LEA would receive a CAP in the area identified.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2023

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

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

SD does not allow or have policies and procedures to allow LEAs to correct noncompliance prior to issuing a finding.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	99.86%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	99.85%	99.67%	99.91%	99.39%	99.76%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
5,521	5,500	99.76%	100%	99.62%	Did not meet target	No Slippage

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

21

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.

In FFY 2024, 15 LEAs had a combined total of 21 individual findings of noncompliance for not meeting the 25 school day evaluation timeline.

The SEA found that the LEAs with findings of noncompliance were due to errors as noted below.

Permission to extend the timeline was not obtained for allowable circumstances, such as awaiting external evaluations and parent protocols received after timeline or extended school absences:

- One evaluation exceeded by four days
- One evaluation exceeded by 14 days

Other procedural errors were caused by:

1) Miscounting the 25 school day timeline:

- Three evaluations exceeded by one day
- One evaluation exceeded by three days

2) Using the incorrect calendar to calculate school days:

- One evaluation exceeded by six days

3) Scheduling evaluations after the timeline:

- Two evaluations exceeded by one day
- One evaluation exceeded by two days
- One evaluation exceeded by three days
- One evaluation exceeded by four days
- One evaluation exceeded by five days
- One evaluation exceeded by six days

4) Staff miscommunication: such as which evaluations to complete, if evaluations were completed, or when evaluations were due:

- One evaluation exceeded by one day
- One evaluation exceeded by three days
- One evaluation exceeded by five days
- Two evaluations exceeded by seven days
- One evaluation exceeded by nine days

Evaluator was not scheduled during the days the student was at school:

- One evaluation exceeded the timeline by three days

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).

The SEA has defined the initial evaluation timeline as 25 school days from the date signed permission is received by the LEA, as documented by the LEA. If the LEA has not documented receipt of consent for evaluation(s), the date parent signed permission is used to determine the first day of the evaluation timeline. Alternative timelines can be mutually agreed to by the school administration and the parents in accordance with ARSD 24:05:25:03-Preplacement evaluation.

ARSD 24:05:25:03.02. Exception to initial evaluation timeline outlines exceptions to the 25 school day evaluation timeline. Exceptions include whether the parent of a child repeatedly fails to produce the child for the evaluation or the child enrolls in another in-state LEA after the relevant timeline and before a determination by the child's previous LEA as to whether the child is a child with a disability. LEAs are required to make sufficient progress

toward completion of evaluations to ensure prompt completion of the evaluations, and the parent and LEA are to agree to a specific date that evaluations will be completed by.

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.

LEAs are required to use the SEA database to record and annually report all initial evaluations conducted within the LEA. LEAs may either enter student data directly into the SEA database or use a SEA developed spreadsheet to track initial evaluations conducted throughout the reporting year, which is then uploaded to the SEA database.

LEAs complete the sign-off process by August 1 of each year.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2023

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	8	1	0

FFY 2023 Findings of Noncompliance Verified as Corrected

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

The SEA verified that all nine LEAs identified as having noncompliance in FFY 2023 were correctly implementing the state administrative rules and regulatory requirement (i.e., 100% compliance achieved) through submission of initial evaluation data and a review of LEA policies and procedures. All nine LEAs submitted subsequent initial evaluation data between April 1, 2025, to June 30, 2025, with eight out of nine LEAs meeting the state administrative rules and regulatory requirements. One LEA was unable to show verification of compliance during the first subsequent data set submission period from April 1, 2025, to June 30, 2025, and was required to submit an additional data set from July 1, 2025, to October 1, 2025. The additional subsequent data set was verified as meeting regulatory requirements (i.e., 100% compliance achieved), although the LEA submitted the data outside the one-year timeline for correction. As such, the SEA verified nine out of the nine LEAs (i.e., 100% compliance achieved) met the state administrative rules and regulatory requirements in the subsequent data provided.

The SEA database was used to collect subsequent data and verify that every student with parental consent for evaluation had their initial evaluations completed within 25 school days, with 100% accuracy.

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

For each individual student (i.e., 14 individual student files) whose evaluations were not completed within the state established timeline of 25 school days, the SEA requested documentation to determine whether the evaluations for each file had been completed, although late. All 14 individual files were reviewed and found to have had evaluations completed (i.e., 100% completed) consistent with OSEP QA 23-01. All individual files of noncompliance were corrected for FFY 2023 within one year.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State’s issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

SD does not allow or have policies and procedures to allow LEAs to correct noncompliance prior to issuing a finding.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2023 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

The SEA verified that all nine LEAs identified as having noncompliance in FFY 2023 were correctly implementing the state administrative rules and regulatory requirements (i.e., 100% compliance achieved) through submission of initial evaluation data and a review of LEA policies and procedures. All nine LEAs submitted subsequent initial evaluation data between April 1, 2025, to June 30, 2025, with eight out of nine LEAs meeting the state administrative rules and regulatory requirements. One LEA was unable to show verification of compliance during the first subsequent data set submission period from April 1, 2025, to June 30, 2025, and was required to submit an additional data set from July 1, 2025, to October 1, 2025. The additional subsequent data set was verified as meeting regulatory requirements (i.e., 100% compliance achieved), although the LEA submitted the data outside the one-year timeline for correction. As such, the SEA verified nine out of the nine LEAs (i.e., 100% compliance achieved) met the state administrative rules and regulatory requirements in the subsequent data provided.

The SEA database was used to collect subsequent data and verify that every student with parental consent for evaluation had their initial evaluations completed within 25 school days, with 100% accuracy.

For each individual student (i.e., 14 individual student files) whose evaluations were not completed within the state established timeline of 25 school days, the SEA requested documentation to determine whether the evaluations for each file had been completed, although late. All 14 individual files were reviewed and found to have had evaluations completed (i.e., 100% completed) consistent with OSEP QA 23-01. All individual files of noncompliance were corrected for FFY 2023 within one year.

11 - OSEP Response

11 - Required Actions

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

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

Targets must be 100%.

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	Not Valid and Reliable	99.23%	97.79%	99.59%	100.00%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	590
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	149
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	404
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.	0
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	31
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 2023 Data	FFY 2024 Target	FFY 2024 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.	404	410	100.00%	100%	98.54%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

During review of FFY 2024 data, the SEA identified six LEAs that did not develop and implement IEPs prior to the child's third birthday for six individual files (one file per LEA). The delays were due to scheduling issues and misunderstandings about completing all required steps before the child's third birthday, which resulted in the meetings being held on or after the child's birthday. In FFY 2023 the SEA reported 100% compliance. Given the relatively small number of children transitioning annually from Part C to Part B services, any noncompliance can impact the overall compliance rate and result in slippage. Any LEA that does not meet the 100% compliance threshold is required to complete targeted training with all staff involved in the Part C to Part B evaluation process to reinforce understanding of Part C to Part B transition timelines.

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

6

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.

In FFY 2024, six LEAs had one individual file of noncompliance each (total of six individual files) for not meeting the transition evaluation timeline.

The SEA found that the LEAs with findings of noncompliance were due to errors noted below.

- Four evaluations exceeded the timeline by one day due to scheduling delays
- Two evaluations exceeded the timeline by one day due to staff misunderstanding of the transition timeline requirements

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.

LEAs are required to use the SEA database for recording and annually reporting all transition evaluations conducted within the LEA. LEAs have the option to utilize a SEA developed spreadsheet to record transition evaluations conducted throughout the reporting year and upload them into the SEA database or directly enter student data. LEAs complete the sign-off process by September 1 of each year.

Provide additional information about this indicator (optional)

The SEA Part B 619 Coordinator conducts an analysis of the Part C exit data and LEA submitted data. This involves verifying that all students align with Part C records of referral to Part B services, addressing data quality issues, confirming eligibility and IEP development prior to the child's third birthday, confirming findings of noncompliance identified, and offering technical assistance to LEAs.

Correction of Findings of Noncompliance Identified in FFY 2023

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

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

SD does not allow or have policies and procedures to allow LEAs to correct noncompliance prior to issuing a finding.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

12 - Prior FFY Required Actions

None

12 - OSEP Response

12 - Required Actions

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	100.00%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	87.18%	66.41%	79.39%	62.94%	67.90%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
104	150	67.90%	100%	69.33%	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.

Indicator 13 data collection and individual file reviews follow the same six-year cyclical schedule as accountability reviews. SEA file selection is based on the number of case managers overseeing transition age IEPs, out-of-district placements, and representation of students across all disability categories represented within the transition age range for each LEA. SEA ensures coverage of all areas by reviewing at minimum two files per case manager. SEA staff review individual files using the regulatory requirements in the Indicator 13 checklist, which can be located at <https://doe.sd.gov/sped/documents/I13-checklist.pdf>.

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 2023

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
23	23	0	0

FFY 2023 Findings of Noncompliance Verified as Corrected

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

In FFY 2023, the SEA found 23 LEAs with at least one file with noncompliance based on the Indicator 13 checklist. Within the 23 LEAs, 52 individual files were identified for Indicator 13 noncompliance. The most common areas of noncompliance were:

- (1) procedure of consent to invite outside agency,
- (2) developing and documenting measurable postsecondary goals and
- (3) appropriate course of study.

Transition IEP documentation noncompliance occurred when a LEA failed to include transition assessments, appropriately document measurable postsecondary goals, update postsecondary goals annually, identify transition services and activities, and provide a complete record of student's course of study through completion of secondary education. The SEA verified correction of each LEA's individual findings of noncompliance by reviewing updated IEP documentation. For LEAs with documentation related noncompliance, the SEA also examined subsequent student files and updated written procedures to ensure the LEAs were implementing the required compliance consistently. Through this verification process, the SEA confirmed that each LEA with findings of noncompliance had corrected the identified issues and was correctly implementing the Indicator 13 requirements. LEAs with noncompliance related to the process of consent to invite an outside agency were required to participate in transition IEP training and update existing written policies and procedures that align with compliance requirements. LEAs were also required to submit an additional student file that included the consent to invite an outside agency, the meeting notice, and the IEP, to demonstrate compliance. The SEA verified the LEAs participated in required training, submitted written policies and procedures aligned to Indicator 13 requirements, and submitted additional files demonstrating 100% compliance with regulatory requirements.

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

The SEA verified that all 52 individual files of noncompliance in FFY 2023 were corrected and met 100% compliance with regulatory requirements. To confirm correction, the SEA reviewed updated documentation submitted by the LEAs, including amended individual student files, updated policies procedures and practices, as well as additional individual student files. Through this review, the SEA verified the 52 individual files of noncompliance had been corrected and the LEAs were meeting regulatory requirements within one year of the finding.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

South Dakota does not allow or have policies and procedures to allow LEAs to correct noncompliance prior to issuing a finding.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2023 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

The specific actions the SEA took to verify that LEAs were correctly implementing the regulatory requirements and had corrected each individual file of noncompliance are described above in the FFY 2023 Findings of Noncompliance Verified as Corrected section.

13 - OSEP Response

13 - Required Actions

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

Collect data by September 2025 on students who left school during 2023-2024, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2023-2024 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. Definitions

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

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

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

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

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

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

II. Data Reporting

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

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of “leavers” who are:

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2024 SPP/APR, compare the FFY 2024 response rate to the FFY 2023 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

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

III. Reporting on the Measures/Indicators

Targets must be established for measures A, B, and C.

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

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

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

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

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

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2019	2020	2021	2022	2023
A	2020	Target >=	15.50%	11.04%	11.50%	12.50%	14.00%
A	11.04%	Data	22.96%	11.04%	13.06%	17.06%	16.43%
B	2020	Target >=	68.50%	61.96%	63.00%	64.50%	66.00%
B	61.96%	Data	66.35%	61.96%	74.91%	69.71%	70.82%
C	2020	Target >=	82.00%	77.30%	78.00%	79.00%	80.00%
C	77.30%	Data	80.82%	77.30%	82.13%	81.47%	80.17%

Targets

FFY	2024	2025
Target A >=	15.50%	17.00%
Target B >=	67.50%	69.50%
Target C >=	81.00%	82.50%

Targets: Description of Stakeholder Input

Stakeholder input was sought in the fall of 2025 to determine whether the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Stakeholders reviewed existing survey questions and recommended rephrasing them to be more youth friendly. Following consideration of the data and SDAPCD discussion, it was determined that the target for Indicator 14 will be maintained for FFY 2024.

FFY 2024 SPP/APR Data

Total number of targeted youth in the sample or census	893
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	299
Response Rate	33.48%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	56
2. Number of respondent youth who competitively employed within one year of leaving high school	149
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)	12
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).	24

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A. Enrolled in higher education (1)	56	299	16.43%	15.50%	18.73%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	205	299	70.82%	67.50%	68.56%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	241	299	80.17%	81.00%	80.60%	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	2023	2024
Response Rate	40.48%	33.48%

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

+/- 3% discrepancy in the proportion of responders compared to the population of a given target group

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

The SEA analyzed the extent to which the response data were representative of the demographics of youth who were no longer in secondary school and had IEPs in effect at the time they exited. As required, the SEA analysis included a comparison by race/ethnicity and additional demographic category of exit type, to determine whether respondents represented the demographics of the full population of leavers. The SEA compared the representation of the respondents by race/ethnicity and exit type to the representation of these groups in the total population of youth with IEPs who exited during FFY 2024. A +/- 3% criteria was used to identify over-or under-representativeness in the respondent survey. Using this methodology, the SEA identified differences in representativeness by race/ethnicity and exit type.

By race/ethnicity, White students are over-represented and American Indian students are under-represented. The students with disabilities population consisted of 65.19% White students and 19.74% American Indian students; however, the respondents consisted of 71.43% White students and 12.89% American Indian students. All other races/ethnicities were within 3% of their population.

By exit type, students who dropped out are under-represented. The students with disabilities population consisted of 16.95% students who dropped out; however, the respondents consisted of 12.98% students who dropped out. All other exit types were within 3% of their population.

Although there were some differences by race/ethnicity and exit type, the SEA has achieved a response rate of over 30% for the last four years. Leavers from all disability and exit type categories and from a wide range of LEAs from across the SEA responded to the survey. Despite this, the overall results are not representative of the SEA due to the differences in the race/ethnicity and exit type representativeness between the population of leavers and respondents.

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.

To ensure future response data are representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school, the SEA will encourage LEA volunteers to collect response data on the leavers from their LEA. Youth who are no longer in school are more likely to respond when contacted by someone they recognize; therefore LEAs that use volunteers to reach out to their former students are expected to improve both the accuracy and representativeness of the statewide data collection. In addition, the SEA will continue sharing guidance and data trends with LEAs during monthly special education webinars, stakeholder groups, RDA data retreats, and statewide conferences. These presentations demonstrate the effectiveness of the LEA outreach to leavers and reinforce the positive results that have increased response rates among underrepresented demographic groups.

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

To increase response rate year over year among underrepresented groups, the SEA will implement strategies to improve leaver awareness of the survey, provide training to interviewers, and improve participation in the survey.

The SEA will update the survey questions to make the survey more user-friendly for leavers. The SEA provides LEAs with a postcard template that can be mailed to students and families one year after exit. The postcard will notify leavers that they will soon receive a phone call to complete the post-school outcomes survey. The early notification is intended to improve awareness and increase participation across all demographic groups.

The SEA will also offer training for LEA staff responsible for collecting survey data. The training will include effective interview procedures, outreach that respects American Indian culture, and accurate data entry. Improving staff effectiveness should improve the quality of the data collected, which should lead to higher response rates among groups that have been underrepresented.

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.

Nonresponse bias may exist when respondents and nonrespondents differ in meaningful ways related to the outcome being measured, such as reported post-school outcomes. Several factors can be examined to determine nonresponse bias.

First is the overall response rate. The higher the response rate, the less likely non-response bias will occur. The SEA response rate was 33.48%, which is a relatively high response rate. However, it is possible that those students who did not respond are different in some meaningful way in their level of positivity from those who did respond. Thus, the SEA proceeded with the next two factors (exit and disability category) to examine nonresponse bias.

Second, the representativeness of the responses can be examined. White leavers were found to be overrepresented, whereas American Indian leavers and those who dropped out were underrepresented. When looking at Indicator 14 rates themselves (Measurements A, B, and C), no differences were found for those of different exit types or races/ethnicities, which makes nonresponse bias less likely. Furthermore, the SEA received responses from a broad geographic range of students across the state from multiple LEAs, which makes nonresponse bias less likely.

The SEA promotes responses from a broad cross section of youth by continuing to encourage LEAs to call leavers. LEAs with respondents in the underrepresented areas were urged to call their students. Postcard reminders were and will continue to be used to remind leavers of the upcoming survey. Providing multiple modes of responding (e.g., email, text, phone interviews) not only helps the response rate but also helps reduce potential nonresponse bias.

Therefore, the SEA concludes that nonresponse bias is not likely, and if present, had minimal impact on the overall results. However, the SEA will make a concerted effort to increase the response rate of under-represented groups, which will not only increase representativeness but also decrease the likelihood of nonresponse bias.

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

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

In the FFY 2024 SPP/APR, the State must report whether the FFY 2024 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2023 SPP/APR

The SEA described representativeness of the FFY 2024 data and provided actions to address demographic areas that may be overrepresented or underrepresented.

Specific actions the SEA took to address representativeness are described in the prompts regarding the SEA's analyses of representativeness and strategies to address representativeness.

14 - OSEP Response

14 - Required Actions

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

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specifications FS229.

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 baselines 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 not used

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part B Dispute Resolution - Due Process Complaints (ED <i>Facts</i> file spec FS229; Data group 896)	11/19/2025	3.1 Number of resolution sessions	2
SY 2024-25 IDEA Part B Dispute Resolution - Due Process Complaints (ED <i>Facts</i> file spec FS229; Data group 896)	11/19/2025	3.1(a) Number resolution sessions resolved through settlement agreements	2

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

Indicator 15 data was presented to the SDAPCD in September 2025. Stakeholders provided input that parents continue to have difficulties understanding their parent rights and the dispute process is overwhelming. The SEA will continue to work with the SDPC to develop training related to parent rights and dispute resolution. Additional training and support will be offered to LEAs on conflict resolution, IEP facilitation, and effective communication strategies. It was suggested that parents might benefit from virtual training or accessible recording of the parent rights handbook and guidance on dispute resolution.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2019	2020	2021	2022	2023
Target >=					
Data	0.00%	100.00%	33.33%	0.00%	33.33%

Targets

FFY	2024	2025
Target >=		

FFY 2024 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
2	2	33.33%		100.00%	N/A	N/A

Provide additional information about this indicator (optional)

Per OSEP's instruction, states are not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

15 - Prior FFY Required Actions

None

15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2024. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

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

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specification FS228.

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 baselines or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (ED <i>Facts</i> file spec FS228; Data group 895)	11/19/2025	2.1 Mediations held	11
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (ED <i>Facts</i> file spec FS228; Data group 895)	11/19/2025	2.1.a.i Mediations agreements related to due process complaints	4
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (ED <i>Facts</i> file spec FS228; Data group 895)	11/19/2025	2.1.b.i Mediations agreements not related to due process complaints	3

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

Indicator 16 data was presented to the SDAPCD in September 2025. Stakeholder input was sought to determine whether the current targets should be maintained or adjusted for FFY 2024 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the target for Indicator 16 will be maintained for FFY 2024.

Stakeholders provided input that parents continue to have difficulties understanding their parent rights and the dispute process is overwhelming. The SEA will continue to work with the SDPC to develop training related to parent rights and dispute resolution. Additional training and support will be offered to LEAs on conflict resolution, IEP facilitation, and effective communication strategies. It was suggested that parents might benefit from virtual training or accessible recording of the parent rights handbook and guidance on dispute resolution.

Historical Data

Baseline Year	Baseline Data
2021	90.00%

FFY	2019	2020	2021	2022	2023
Target >=			90.00%	91.00%	91.00%
Data	100.00%	33.33%	90.00%	100.00%	100.00%

Targets

FFY	2024	2025
Target >=	91.00%	91.00%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
4	3	11	100.00%	91.00%	63.64%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The data reported matches EdPass 618 data reported, unfortunately the number of mediated agreements not related to due process complaints was incorrectly reported as a three and should have been six. If six had been reported, the FFY 2024 data would be 90.91% which would still show slippage (nine percentage points).

In FFY 2024, the SEA saw a rise of mediation requests in conjunction with requests for written state complaints and due process complaints compared to mediation requests only. Of the 11 mediation requests, three were independent of due process complaints/state complaints and resulted in agreements; three were related to state complaints filed and resulted in agreements; and five were related to due process hearings, in lieu of resolution sessions, in which one did not result in an agreement.

When mediations are related to a due process hearing, they are more complex and difficult to resolve due to the issue or level of conflict between the parties. Given the relatively small number of mediations each year, as few as one incident can significantly impact the overall compliance rate and result in measurable slippage. In FFY 2024, the SEA had one mediation out of 11 that did not result in an agreement. The SEA notes there is a high rate of successfully mediated agreements and the slippage does not indicate a need for additional actions by the SEA.

Provide additional information about this indicator (optional)

The SEA is currently developing a system for dispute resolution tracking that will include a feature to assist with federal reporting by verifying the correct data prior to reporting in EdPass. The SEA has also requested that IDC update their reporting tool to include the current FFY SPP/APR data as it would appear in the SPP/APR.

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

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

Measurement

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

Instructions

Baseline Data: The State must provide baseline data that must be expressed as a percentage, and which is aligned with the State-identified Measurable Result(s) (SiMR) for Children with Disabilities.

Targets: In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPPs/APRs, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2025). 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 2024 APR, report on anticipated outcomes to be obtained during FFY 2025, i.e., July 1, 2025-June 30, 2026).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g., behaviors), parent/caregiver outcomes,

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2024 APR, report on activities it intends to implement in FFY 2025, i.e., July 1, 2025-June 30, 2026) 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)?

All students with disabilities (Target A) and a subset of students with disabilities (i.e., Specific Learning Disability, Other Health Impaired, or Speech or Language Impairment) (Target B) will increase their 3rd-5th grade reading proficiency rates by 5 percentage points for each group from spring 2021 to spring 2026 as measured by the statewide assessment.

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

NO

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

YES

Provide a description of the subset of the population from the indicator.

The subset of the population from this indicator includes 18 LEAs consisting of 25 schools that participated in the SEAs MTSS-RtI initiative in the 2024-2025 school year. LEAs range in size from small (student enrollment of less than 200) to large (student enrollment of greater than 600) and all but three participating LEAs are located on the eastern side of the state.

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.

Because the SSIP and SD MTSS-RtI have common goals and data collection plans, SD DOE decided to align these efforts under one common Theory of Action, evaluation plan, and supports for LEAs. Stakeholders met in October 2023 to develop this shared Theory of Action that describes the common goals and outcomes of the work across the SSIP and SD MTSS RtI. The new Theory of Action has four Standards of Action:

- (1) Team-Based Leadership;
- (2) Tiered Continuum of Supports;
- (3) Comprehensive Data Collection System; and
- (4) Communication and Collaboration.

While similar to previous Standards of Action, there is more of a focus on clearly defined MTSS structures that specify roles, processes, and fidelity expectations. The Standards of Action now emphasize team-based leadership, a tiered continuum of instruction and intervention and formal data systems rather than general commitments to data use and effective practice. The new Standards of Action are more operational and monitorable.

Please provide a link to the current theory of action.

<https://doe.sd.gov/sped/documents/TheoryofAction-25.pdf>

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)

YES

Historical Data

Part	Baseline Year	Baseline Data
A	2020	18.31%
B	2020	18.12%

Targets

FFY	Current Relationship	2024	2025
Target A	Data must be greater than or equal to the target	20.81%	23.31%

Target B	Data must be greater than or equal to the target	20.62%	23.12%
----------	--	--------	--------

FFY 2024 SPP/APR Data

Part	Number of students in grades 3-5 who scored proficient on regular state reading test. Target A = All students with disabilities. Target B = Students with Specific Learning Disability, Speech or Language Impairment, or Other Health Impaired	< Number of students in grades 3-5 who participated in the state reading test. Target A = All students with disabilities. Target B = Students with Specific Learning Disability, Speech or Language Impairment, or Other Health Impaired	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	65	415	18.79%	20.81%	15.66%	Did not meet target	Slippage
B	51	310	18.82%	20.62%	16.45%	Did not meet target	Slippage

Provide reasons for A slippage, if applicable

The SEA analyzed the data and noted that if only 13 more students scored proficient, there would have been no slippage. Of the 13 schools that had at least 10 grade 3-5 students with disabilities who took the regular state test in spring 2025, six schools experienced a decrease in their proficiency rate. One particularly large LEA had a school decrease of over 16 percentage points. This school accounts for most of the slippage in the proficiency rate. Although the exact reason for the slippage in this school has not been determined, the LEA had redrawn their school boundaries during the previous school year which redistributed students to include students who had not been included in the previous years' data. The SEA further analyzed the data and found that the proficiency rates declined at a similar rate for all students with and without disabilities. Some LEAs did increase proficiency rates within the SSIP group, and the SEA will work with these LEAs to explore program implementation to share best practices. Note that each school receives a copy of their disaggregated results over time and is encouraged to examine strengths and areas of improvement. It's important to note that prior to spring 2023, the SSIP was based on a larger group of LEAs and thus, a larger group of students, so over time trends are based on different groups of LEAs.

Provide reasons for B slippage, if applicable

The SEA analyzed the data and noted that if only 7 more students proficient, there would have been no slippage. Of the 12 schools that had at least 10 grade 3-5 students with disabilities of Other Health Impaired, Specific Learning Disabilities, and Speech or Language Impairment who took the regular state test in spring 2025, six schools experienced a decrease in their proficiency rate. One particularly large school had a decrease of over 14 percentage points. Although the exact reason for the slippage in this school has not been determined, the LEA did redraw their school boundaries during the previous school year which redistributed students to include students who had not been included in the previous years' data. This school accounts for the slippage in the proficiency rate. Note that each school receives a copy of their disaggregated results over time and is encouraged to examine strengths and areas of improvement. It's important to note that prior to spring 2023, the SSIP was based on a larger group of LEAs and thus, a larger group of students, so, over time trends are based on different groups of LEAs.

Provide the data source for the FFY 2024 data.

Data for this indicator is collected through the SD English Language Arts statewide assessment reported on Indicator 3.

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

Data for this indicator is collected and analyzed in the standardized method required by the SD English Language Arts Statewide Assessment. For the data analysis, the proficiency rates were used. The standardized state test is administered each spring. Data Driven Enterprises analyzes the state test data each year for the SSIP. The assessment data is analyzed across all SSIP LEAs.

Stakeholders proposed that the SSIP focus on four groups of students with disabilities: (1) all students with disabilities, (2) students with Specific Learning Disabilities, (3) students with Other Health Impaired, and (4) students with Speech or Language Impairment. When selecting these groups, stakeholders took into consideration the large percentage of students in these subgroups that would be positively impacted. The last three groups each have different needs, and as such, the stakeholders thought it important to focus on these three groups separately. Since the template doesn't allow for four targets, the SEA has combined the last three groups into one group for SPP/APR reporting purposes. The SEA will continue to track these three groups individually given their differing needs, and will report them as one on the SPP.

The following data shows a comparison of the spring 2024 reading proficiency rate to the spring 2025 proficiency rate for students with disabilities in grades 3-5 overall and by the three targeted disability categories.

Reading Proficiency Rates by Group from spring 2024 to spring 2025:

- All Students with Disabilities (SWD) (18.79% to 15.66%)
- Other Health Impaired (OHI) (16.67% to 19.74%)
- Specific Learning Disability (SLD) (9.86% to 8.05%)
- Speech or Language Impairment (45.28% to 36.67%)

With the exception of students with Other Health Impaired, all disability categories showed declines in proficiency. Students with Other Health Impaired reached their highest proficiency rate on record (dating back to 2015). However, it is important to note that prior to spring 2023, the SSIP was based on a larger group of LEAs and thus, a larger group of students so over time trends are based on different groups of LEAs. In contrast, students with Speech or Language Impairment posted their lowest proficiency rate dating back to 2015. Over the prior nine years, this group averaged 47.07% proficiency, with rates ranging from 41.33% to 53.33%. The current year rate of 36.67% represents a substantial drop well below the historical norm.

Proficiency rates for students with Specific Learning Disabilities have remained relatively stable, holding between 9% and 10% in four of the past six years.

The overall students with disabilities proficiency rate is also at its lowest level dating back to 2015. Over the previous nine years, students with disabilities averaged 18.40% proficiency, with a range of 16.60% to 20.63%. The current rate of 15.66% reflects a modest but meaningful decline below the long-term norm.

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

YES

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

The following benchmark data from the 2024-2025 school year for participating LEAs showed the percentage of all students with disabilities and the subset of students with disabilities (i.e., Specific Learning Disabilities, Other Health Impaired, and Speech or Language Impairment) scoring at benchmark for each of fall 2024 to spring 2025. Results are mixed.

The percentage of all students with disabilities scoring at benchmark in fall 2024 and spring 2025:

Grades K-5: Stayed the same (22.77% to 23.27%)

Kindergarten: decreased (58.62% to 41.38%)

Grade 1: increased (41.94% to 45.16%)

Grade 2: decreased (26.32% to 23.68%)

Grade 3: increased (13.79% to 24.14%)

Grade 4: stayed the same (6.90% to 6.90%)

Grade 5: increased (0.00% to 6.52%)

The percentage of students with Specific Learning Disabilities, Other Health Impaired, and Speech or Language Impairment scoring at benchmark in fall 2024 and spring 2025

Grades K-5: stayed the same (23.31% to 23.93%)

Kindergarten: decreased (78.95% to 52.63%)

Grade 1: stayed the same (42.86% to 42.86%)

Grade 2: stayed the same (25.00% to 25.00%)

Grade 3: increased (16.00% to 28.00%)

Grade 4: stayed the same (7.41% to 7.41%)

Grade 5: increased (0.00% to 7.69%)

The evaluation measures included in the combined evaluation plan allow the SEA to assess outcomes achieved in each infrastructure improvement strategy. The evaluation plan for the 2024-2025 school year can be viewed at <https://doe.sd.gov/sped/documents/SSIP-MTSS-EvalPlan-24.pdf>

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

<https://doe.sd.gov/sped/documents/SSIP-MTSS-EvalPlan-24.pdf>

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

NO

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

Team-Based Leadership

Tiered Continuum of Supports

Comprehensive Data Collection System

Communication and Collaboration

Each of the standards of action have improvement strategies within them. The SEA continues to implement activities within each of these standards of action.

Team-Based Leadership

Building administrators, general education, and special education teachers in participating LEAs take part in schoolwide data analysis training and grade level student data reviews using the MTSS Data Workbook. Data analysis training provides LEAs with a process and tools to review student benchmark data to determine instructional effectiveness and student needs. Grade level student data reviews provide teams with a process and tools for reviewing ongoing progress monitoring data to adjust intervention supports. LEAs use meeting fidelity checklists to ensure building leadership team meetings and grade level team meetings are timely, effective, and on-topic. When teams demonstrate high meeting fidelity over time, less support is provided by state coordinators. LEAs continue to use data to drive instructional planning for core classroom and intervention groups. In addition to the data analysis training, the SEA provided training for all teams on developing and maintaining productive Professional Learning Communities (PLC). PLCs create collaborative teams of educators that work together to implement effective interventions for students based on data.

Tiered Continuum of Supports

The DOE outlined South Dakota Literacy Framework is complete and available to all LEAs. Through the SEA's MTSS initiative, LEAs continue to receive training in foundational literacy using the Teaching Reading Sourcebook. Foundational literacy training provides a basic understanding of literacy skills (phonological awareness, phonics, fluency, vocabulary, and comprehension) along with modeling and practice of evidence-based instructional strategies. Participants leave the training with a copy of the Teaching Reading Sourcebook, visual aids, and the knowledge and skills needed to provide effective instruction in their respective classrooms and instructional practices using Explicit Instruction tools and resources from Dr. Anita Archer. Explicit Instruction training provides a strong foundation in using evidence-based strategies in lesson design and delivery. Participants receive a copy of the Explicit Instruction text and practice developing and delivering engaging lessons. The SEA continues to partner with other DOE divisions to provide annual regional training in foundational literacy using the Teaching Reading Sourcebook when LEAs have new staff join their LEA. Regional training is open to all LEAs.

Comprehensive Data Collection System

LEA staff are trained to apply the data-driven decision-making process to inform instructional decisions for all students. LEA teams work with their SEA appointed coordinator to develop a procedure for collecting and analyzing student screening, benchmark, progress monitoring, system fidelity, and intervention fidelity data.

Communication and Collaboration

Through the MTSS Initiative, the SEA provides LEAs with literacy and behavior tips to share with parents. New tips are created monthly and are emailed to the LEAs each month as well as posted on the SEA's MTSS website. Literacy tips focus on the Science of Reading and are structured to help parents understand how each of the five Science of Reading elements build on one another and are vital to their child's ability to read.

Ongoing infrastructure analysis and improvement efforts continue to focus on alignment across common initiatives, including the South Dakota Literacy Framework, MTSS, and SSIP. Intentional planning meetings continue to be held with leadership and key stakeholders from each initiative to discuss ongoing alignment efforts.

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.

Team-Based Leadership

A total of 59 staff members completed the Coaching Survey. Based on the Coaching Survey results, 50.84% said that coaches are effective in helping K-5 teachers improve literacy components at schools.

A total of 48 staff members completed the Coordinator Survey. Based on the Coordinator Survey results, 72.34% of teacher participants said that coordinators are facilitating professional development to all K-5 teachers in literacy.

Coaches at participating LEAs completed 527 coaching activities during the 2024-2025 school year.

A total of five schools completed the elementary Reading Tiered Fidelity Inventory (R-TFI) in spring 2025. Based on the R-TFI results, 84% of schools indicated that they are implementing the Tier 1 Team skills with fidelity (fidelity score of 70% or higher), 65% for Tier 2 Team, and 55% for Tier 3 Team.

A total of 23 staff members completed the Sustainability Survey. Based on the Sustainability Survey results, 75% of respondents indicated that the school sustained the RtI leadership team process.

These short-term outcomes are related to the technical assistance area of a systems framework. Instructional coaching provides hands-on, direct support to teachers and supports system change by impacting both the skill level of the teachers and the instructional outcome of the students. Instructional coaching is necessary for both achievement of the SiMR and sustainability of systems improvement efforts. All results are compiled in the MTSS Dashboard Report and are shared with the participating LEAs and posted on the SEA's SPP website.

Tiered Continuum of Supports

LEAs participated in 17 MTSS trainings. Training evaluations were completed by 123 participants, including general education teachers, special education teachers, and school administrators. Of the respondents, 98.37% indicated that the trainings were useful, 98.37% stated that their work-related knowledge and skills increased, and 95.12% stated that the workshops will positively impact students.

Based on the R-TFI results, 78.33% of schools indicated that they are implementing the Tier 1 Implementation skills with fidelity (fidelity score of 70% or higher), 47.50% for Tier 2 Implementation, and 46.67% for Tier 3 Implementation.

Based on the Sustainability Survey results, 42.86% of respondents indicated that the school sustained a tiered continuum of supports.

These short-term outcomes are related to the professional development area of a systems framework. Providing professional development in MTSS, evidence-based instruction, and data-driven decision-making supports student, grade, and systems-level change at the LEA level and is necessary to sustain system improvement efforts. All results are compiled in the MTSS Dashboard Report and are shared with the participating LEAs and posted on the SEA's SPP website.

Comprehensive Data Collection System

Based on the R-TFI results, 83% of schools indicated that they are implementing the Tier 1 Evaluation skills with fidelity (fidelity score of 70% or higher), 46.67% for Tier 2 Evaluation, and 46.67% for Tier 3 Evaluation.

Based on the Sustainability Survey results, 64.29% of respondents indicated that the school sustained a comprehensive data collection system.

These short-term outcomes are related to the data area of a systems framework. Providing professional development in data-driven decision making supports schools in establishing clear procedures for collecting and using screening, benchmark, progress-monitoring, system-fidelity, and intervention-fidelity data to guide instruction. R-TFI results are shared with each individual LEA.

Communication and Collaboration

The Family Engagement Survey was completed by 52 family members and 88 educators in spring 2025. Based on the Family Engagement Survey results:

82.69% of family members and 70.13% of educators reported that they are engaged in the school.

68.62% of family members and 74.11% of educators perceive strong family engagement practices surrounding literacy at their school.

51.92% of family members and 50.57% of educators reported that the school is involved with stakeholders and community partners to support literacy growth.

95.00% of family members and 100% of educators stated that schools share information with families on children's progress in foundational reading skills

80.00% of family members and 88.24% of educators stated that schools provide information/training on how families can support reading skills at home.

Based on the Sustainability Survey results, 43.75% of respondents indicated that the school sustained communication and collaboration surrounding Rtl.

These short-term outcomes are related to the professional development area of a systems framework. Family literacy training and resources support system change by impacting the level of understanding and ability to support children in key areas of foundational literacy. Providing asynchronous options online for families to access the training and support increases access to families across the state and is necessary for scale-up. All results are compiled in the MTSS Dashboard Report and are shared with the participating LEAs and posted on the SEA's SPP website.

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

NO

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

The SEA has identified the following next steps for each infrastructure improvement strategy:

Team-Based Leadership

The SEA will continue to hold a two-day summer training for all LEAs participating in the MTSS initiative. LEAs will send teams to expand their current action plans to include incorporating Professional Learning Communities (PLC). The use of PLCs will help ensure the continued fidelity of MTSS implementation and the use of data to make decisions to continually improve student outcomes. The SEA anticipates that LEAs establishing PLCs will improve communication within the LEAs and help develop stronger teams working together to utilize data for decision making. The SEA will also be providing a one day training focusing on the essential actions LEAs need to implement in order to move their MTSS practices forward.

Tiered Continuum of Supports

The DOE is currently working to provide training to all LEAs on the literacy framework, as well as ongoing training on evidence-based literacy instruction. The training plan includes both asynchronous and face-to-face training. Data collected on the effectiveness of the training and support provided through MTSS continues to guide the MTSS initiative. The DOE received a federal literacy grant that was open to 45 LEAs. This grant was titled "Elevating Literacy Across South Dakota". The criteria for eligible LEAs was based on federal guidelines established for this grant. This grant will focus on implementing evidence-based literacy programs and systems and can be used to enhance current MTSS implementation. The DOE selected 28 LEAs to receive funds through the Elevating Literacy Across South Dakota grants. The SEA plans to collaborate with other divisions within the DOE to work with the LEAs receiving funds from this grant to align with the SSIP and expand the number of LEAs to collect data from in future reporting years. The SEA

anticipates that an increase in knowledge and skills in literacy and instruction will lead to a greater number of LEAs implementing evidence-based literacy and instructional practices.

Comprehensive Data Collection System

SEA appointed coordinators will work with LEA teams to develop written procedures for the LEA to follow when collecting and using student data. Procedure will include decision rules for determining which students need additional interventions and which interventions will provide the most benefit, based on the data and the student's individual needs. The SEA anticipates having written procedures for decision making will lead to more efficient decisions and the ability to meet student needs in a timelier fashion, resulting in students acquiring the skills necessary to improve their reading.

Communication and Collaboration

The SEA will continue providing monthly family literacy tips and support to LEAs. This will increase the ability of LEAs to engage meaningfully with families in improving their children's literacy success. The SEA will continue to provide evidence-based tips for LEAs to provide parents with both literacy strategies and behavior strategies to be used at home. The SEA is also working to engage families and improve school climate through MTSS. The SEA anticipates that when LEAs have a positive school climate, families will feel more comfortable engaging in their students' education.

The SEA collects data on each of the infrastructure areas through the combined evaluation plan. Data is collected and reported at the LEA and SEA levels to be used for continuous feedback and improvement. The 2024-2025 school year state-level data dashboard report can be found at <https://doe.sd.gov/sped/documents/MTSS-dashboard-25.pdf>.

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

Foundational Literacy

Explicit Instruction

Facilitated Coaching

Provide a summary of each evidence-based practice.

Foundational Literacy Training

Foundational literacy training is an evidence-based approach for teaching reading based on the Science of Reading. It uses explicit instruction when teaching students phonemic awareness, phonics, fluency, vocabulary, and comprehension to all students.

Explicit Instruction Training

Explicit Instruction uses clear and direct teaching methods that are structured to systematically break down the skills necessary for students to grasp new concepts. It uses carefully designed scaffolding to ensure all students understand a concept before moving on to the next. Explicit Instruction also requires interactive teacher and student participation with frequent student responses and teacher feedback.

Facilitated Coaching Support

Facilitated coaching provides a personalized plan established by both the coach and the teacher based on the teacher's needs. Coaching uses goal setting, modeling, observation, and reflective feedback to help teachers enhance specific skills that will benefit all students in their classrooms.

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.

Foundational Literacy Training

Participants in the Foundational Literacy Training receive training in the core skills students need to become strong readers. Foundational Literacy training is guided by the Science of Reading and uses multiple methods to help struggling readers, based on their area of need. Improved understanding of foundational literacy and skills in providing effective instruction will lead to improved teacher knowledge and implementation of effective literacy instruction. The students receiving this high-quality literacy instruction will demonstrate improved outcomes, which will positively impact the SiMR.

Explicit Instruction Training

Participants in the Explicit Instruction training cohort receive training in evidence-based explicit instructional strategies. Explicit Instruction uses modeling, guided practice, and immediate feedback, to ensure students are engaged in their learning and uses scaffolding to support all students at all learning levels. Highly skilled educators will provide high-quality explicit instruction and support to students. The students receiving this high-quality instruction will demonstrate improved literacy outcomes, which will positively impact the SiMR.

Facilitated Coaching Support

Teachers who receive coaching support receive job-embedded professional development in several important areas based on individual teacher need. Topics include foundational reading instruction, classroom/behavior management, assessment and student data, lesson planning/delivery, and student engagement. This level of support will lead to improved instructional strategies in literacy, improved student engagement, positive classroom climate, and improved student literacy outcomes, which will positively impact the SiMR.

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

The SEA collects data to monitor fidelity of implementation for Foundational Literacy, Explicit Instruction training implementation and Facilitated Coaching support through the Reading Tiered Fidelity Inventory (R-TFI) and the Classroom Observation Checklist.

R-TFI

The R-TFI is a rubric to monitor the fidelity of implementation for the core features of MTSS including how teachers are implementing Foundational Literacy and Explicit Instruction in their classrooms for all tiers of support. When reviewing fidelity results, 82.96% of schools indicated that they are implementing the Tier 1 skills with fidelity (fidelity score of 70% or higher), 52.86% for Tier 2, and 50.91% for Tier 3. LEAs complete the R-TFI annually with the support of a trained R-TFI facilitator. The results are used to assess practice change. All participating LEAs meet in the summer for Return Team Training to review R-TFI results and develop an action plan that drives the implementation work for the following year. The SEA reviews the results for all schools and identifies common strengths and areas of need across all participating LEAs.

Classroom Observation Checklist

Eighty eight percent of teacher participants observed are implementing the literacy strategy skills with fidelity and 74.98% are implementing explicit instruction skills with fidelity. Instructional coaches are observed in a percentage of classrooms at each LEA. The frequency of the observations is based on the needs of the teacher, teacher requests, and principal concerns. Instructional coaches meet in the spring to review all observation data collected and identify common areas of need across LEAs.

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

The SEA collects data on each of the infrastructure areas through the combined evaluation plan. Data is collected and reported at the LEA and SEA levels to be used for continuous feedback and improvement. The 2024-2025 school year state-level data dashboard report can be found at <https://doe.sd.gov/sped/documents/MTSS-dashboard-25.pdf>

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

Foundational Literacy Training

The DOE has created a training plan to provide training to LEAs on the literacy framework, as well as ongoing training on evidence-based literacy instruction. The training plan will include both asynchronous and in-person training. These trainings will take place throughout the state during the summer of 2026. The SEA anticipates that an increase in teachers' awareness, knowledge, and skills in literacy and instruction will lead to a greater number of LEAs implementing evidence-based literacy and instructional practices and improved student outcomes.

Explicit Instruction Training

The SEA will continue to partner with other DOE divisions to provide training to all LEAs on explicit instruction. These trainings include both virtual and in-person training opportunities to increase the ability for participants to access the training. Explicit Instruction trainings are scheduled for the summer of 2026. The SEA anticipates that an increase in knowledge and skills in evidence-based instructional strategies will lead to a greater number of educators providing evidence-based instruction to students, and ultimately, improved outcomes for students.

Facilitated Coaching Support

The SEA will continue to provide instructional coaching support to supported LEAs. The SEA will also continue to partner with other DOE divisions to develop a statewide coaching framework that will support effective instructional coaching practices across all LEAs. This framework will include training opportunities during the summer and regular instructional coach Community of Practice meetings during the school year. The SEA anticipates that an increase in knowledge and skills of instructional coaches will lead to more educators receiving high quality instructional coaching support, educators providing more effective instruction to students, and improved student outcomes.

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.

Although the most recent SIMR data show a decline and the annual target was not met, multiple sources of evaluation data (e.g., implementation fidelity evidence and feedback from the field) indicate that the SSIP strategies are being implemented as intended and are producing early, practice-level improvements; given the known lag between implementation and outcome change, the SEA determined that continuing implementation without modification is the most appropriate course of action at this time.

Section C: Stakeholder Engagement

Description of Stakeholder Input

A SD SSIP Stakeholder meeting was held April 25, 2025, to review the current SSIP data and build awareness of the SSIP efforts being made. The group, consisting of special education directors, literacy specialists, reading interventionists, classroom teachers, and SEA staff, felt the current SIMR was still aligned with what the stakeholders were implementing within their LEAs. The group discussed that the SEA would not be adding any additional MTSS LEAs, but a grant was available for selected LEAs to apply for in which MTSS and literacy coaching would be supported. Stakeholders appreciated the SEA's continued support for current MTSS LEAs and noted the summer training provided by the SEA was very beneficial for their MTSS team to gather information and build capacity within their buildings. The SDPC indicated they would like teachers to be able to explain a student's day-to-day progress data to parents and suggested training in this area.

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

Prior to the meeting, stakeholders were given access to state-level reports disaggregated by initiative. The stakeholders also received copies of the presentation materials and handouts. At the start of the meeting, the facilitator reviewed the role of a stakeholder and shared information to build a common understanding and allow for equitable participation in the meeting. During the meeting, the meeting facilitator led stakeholders in a guided feedback-gathering process to ensure all voices were heard. The facilitators used a variety of small-group and whole-group sharing as well as written feedback tools to gather input from all stakeholders. Additional information was shared with the group after the meeting and stakeholders were encouraged to provide continued feedback to the SEA throughout the year.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

Stakeholders expressed concerns during the April 25, 2025, stakeholder meeting about the SEA's plan to fade out supports through the MTSS initiative over the next three years. The SEA discussed the opportunities for LEAs to participate in the new Elevating Literacy Across South Dakota grant as well as the free trainings being provided by the SEA. Foundational Literacy, Explicit Instruction, classroom management, and effective IEP writing trainings are open to all LEAs throughout the year. Stakeholders agreed the continued efforts the SEA is providing to the LEAs are promising and would like to see more LEAs taking advantage of these free opportunities to improve reading rates. They were encouraged by the growth, although slow, the data has shown since COVID19, and they believe things are heading in the right direction. Because the stakeholders saw the momentum of the current SSIP LEAs, the decision was made to continue with the current SSIP goal and Theory of Action for the following year.

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.

The SEA is collaborating with other divisions within the DOE to align the SSIP with other initiatives and literacy grant opportunities available to LEAs. This collaboration will allow the SEA to expand the number of LEAs that the SEA currently collects data on, as well as provide opportunities for expanding the SD Literacy Framework and Science of Reading to LEAs currently participating in the SSIP.

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

In October 2025, 28 LEAs were selected to receive funds through the Elevating Literacy Across South Dakota grant. Due to LEAs just beginning implementation of the strategies indicated in their grants, literacy data will not be collected and measured at this time. The SEA anticipates that using the 2026 statewide literacy data to measure outcomes from these LEAs.

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

Due to LEAs having multiple options to choose from when applying for the Elevating Literacy Across South Dakota grant, the types of interventions and supports may not align with the current infrastructure improvement strategies identified in the SSIP Theory of Action. The SEA will need to determine which interventions and supports LEAs select that support the current efforts of the SSIP and standards outlined in the SD SSIP Theory of Action. The SEA will include stakeholders in the review and consider how they may be incorporated into the SSIP.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

17 - Required Actions

Indicator 18: General Supervision

Instructions and Measurement

Monitoring Priority: General Supervision

Compliance indicator: This SPP/APR indicator focuses on the State's exercise of its general supervision responsibility to monitor its local educational agencies (LEAs) for requirements under Part B of the Individuals with Disabilities Education Act (IDEA) through the State's reporting on timely correction of noncompliance (20 U.S.C. 1412(a)(11) and 1416(a); and 34 C.F.R. §§ 300.149, 300.600). In reporting on findings under this indicator, the State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system, dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State.

Data Source

The State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system, dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State. Provide the actual numbers used in the calculation. Include all findings of noncompliance regardless of the specific type and extent of noncompliance.

Measurement

This SPP/APR indicator requires the reporting on the percent of findings of noncompliance corrected within one year of identification:

- # of findings of noncompliance issued the prior Federal fiscal year (FFY) (e.g., for the FFY 2024 submission, use FFY 2023, July 1, 2023 – June 30, 2024)
- # of findings of noncompliance the State verified were corrected no later than one year after the State's written notification of findings of noncompliance.

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

Instructions

Targets must be 100%.

States are required to complete the General Supervision Data Table within the online reporting tool.

Report in Column A, the number of findings of noncompliance made in FFY 2023 (July 1, 2023 – June 30, 2024), as reported in the compliance indicator, and report in Column C1, the number of those findings which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance. Report in Column B, the number of additional findings of noncompliance related to the compliance indicator made in FFY 2023 (July 1, 2023-June 30, 2024) and report in Column C2, the number of those additional findings related to the compliance indicator which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance.

States may also provide additional information related to other findings of noncompliance that are not specific to the compliance indicators. This row would include reporting on all other findings of noncompliance that were not reported by the State under the compliance indicators listed below (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.). In future years (e.g., with the FFY 2026 SPP/APR), States may be required to further disaggregate findings by results indicators (1, 2, 3, 4A, 5, 6, 7, 8, 14, 15, 16, and 17), fiscal and other areas.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous findings of 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 and the actions that have been taken or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

18 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	100.00%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data					100.00%

Targets

FFY	2024	2025
Target	100%	100%

Indicator 4B. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
3	0	3	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

After reviewing the state monitoring related requirements and dispute resolution, there were no additional findings reported in Column B related to this Indicator.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on updated data:

For the three LEAs that were identified as having a significant discrepancy, the SEA reviewed the LEA's FFY 2023 policies, procedures, and practices relating to the manifestation determination requirements, the development and implementation of IEPs, the use of positive behavioral interventions and supports in the student's Behavior Impedes Learning section, and procedural safeguards to ensure they comply with meeting regulatory requirements. The SEA also interviewed LEA staff and selected files from different grade levels to determine if implementation of the policies, procedures, and practices related to improving behavior and reducing suspension/expulsion were being implemented across the LEA.

The SEA verified the LEAs are implementing regulatory requirements across all race and ethnic groups with 100% compliance.

Please describe, consistent with OSEP QA 23-01, how the State verified that each individual case of noncompliance was corrected:

The SEA reviewed the LEA's FFY 2023 individual student files for students suspended or expelled for greater than 10 days and compared to the LEA's policies and procedures related to development and implementation of IEPs, the use of positive behavioral interventions and supports in the student's Behavior Impedes Learning section of the IEP, and manifestation determination procedural safeguards. The LEA was required to fix the individual student files and submit them to the SEA. The SEA verified the updated individual student files, updated policies, procedures, and practices met the regulatory requirements with 100% compliance for this indicator.

Indicator 9. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

After reviewing the state monitoring related requirements and dispute resolution, there were no additional findings reported in Column B related to this Indicator.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on updated data:

Please describe, consistent with OSEP QA 23-01, how the State verified that each individual case of noncompliance was corrected:

Indicator 10. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

After reviewing the state monitoring related requirements and dispute resolution, there were no additional findings reported in Column B related to this Indicator.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

Indicator 11. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
9	0	8	0	1

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

After reviewing the state monitoring related requirements and dispute resolution, there were no additional findings reported in Column B related to this Indicator.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

The SEA verified that all nine LEAs identified as having noncompliance in FFY 2023 were correctly implementing the state administrative rules and regulatory requirement (i.e., 100% compliance achieved) through submission of initial evaluation data and a review of LEA policies and procedures. All nine LEAs submitted subsequent initial evaluation data between April 1, 2025, to June 30, 2025, with eight out of nine LEAs meeting the state administrative rules and regulatory requirements. One LEA was unable to show verification of compliance during the first subsequent data set submission period from April 1, 2025, to June 30, 2025, and was required to submit an additional data set from July 1, 2025, to October 1, 2025. The additional subsequent data set was verified as meeting regulatory requirements (i.e., 100% compliance achieved), although the LEA submitted the data outside the one-year timeline for correction. As such, the SEA verified nine out of the nine LEAs (i.e., 100% compliance achieved) met the state administrative rules and regulatory requirements in the subsequent data provided.

The SEA database was used to collect subsequent data and verify that every student with parental consent for evaluation had their initial evaluations completed within 25 school days, with 100% accuracy.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

For each individual student (i.e., 14 individual student files) whose evaluations were not completed within the state established timeline of 25 school days, the SEA requested documentation to determine whether the evaluations for each file had been completed, although late. All 14 individual files were reviewed and found to have had evaluations completed (i.e., 100% completed) consistent with OSEP QA 23-01. All individual files of noncompliance were corrected for FFY 2023 within one year.

Indicator 12. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

After reviewing the state monitoring related requirements and dispute resolution, there were no additional findings reported in Column B related to this Indicator.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

Indicator 13. 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 and 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 a representative of any participating agency 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
23	0	23	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

After reviewing the dispute resolution related requirements, there were no additional findings reported in Column B related to this Indicator.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

In FFY 2023, the SEA found 23 LEAs with at least one file with noncompliance based on the Indicator 13 checklist. Within the 23 LEAs, 52 individual files were identified for Indicator 13 noncompliance. The most common areas of noncompliance were:

- (1) procedure of consent to invite outside agency,
- (2) developing and documenting measurable postsecondary goals and
- (3) appropriate course of study.

Transition IEP documentation noncompliance occurred when a LEA failed to include transition assessments, appropriately document measurable postsecondary goals, update postsecondary goals annually, identify transition services and activities, and provide a complete record of student's course of study through completion of secondary education. The SEA verified correction of each LEA's individual findings of noncompliance by reviewing updated IEP documentation. For LEAs with documentation related noncompliance, the SEA also examined subsequent student files and updated written procedures to ensure the LEAs were implementing the required compliance consistently. Through this verification process, the SEA confirmed that each LEA with findings of noncompliance had corrected the identified issues and was correctly implementing the Indicator 13 requirements. LEAs with noncompliance related to the process of consent to invite an outside agency were required to participate in transition IEP training and update existing written policies and procedures that align with compliance requirements. LEAs were also required to submit an additional student file that included the consent to invite an outside agency, the meeting notice, and the IEP, to demonstrate compliance. The SEA verified the LEAs participated in required training, submitted written policies and procedures aligned to Indicator 13 requirements, and submitted additional files demonstrating 100% compliance with regulatory requirements.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

The SEA verified that all 52 individual files of noncompliance in FFY 2023 were corrected and met 100% compliance with regulatory requirements. To confirm correction, the SEA reviewed updated documentation submitted by the LEAs, including amended individual student files, updated policies

procedures and practices, as well as additional individual student files. Through this review, the SEA verified the 52 individual files of noncompliance had been corrected and the LEAs were meeting regulatory requirements within one year of the finding.

Optional for FFY 2024 and 2025:

Other Areas - All other findings: States may report here on all other findings of noncompliance that were not reported under the compliance indicators listed above (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.).

Column B: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Column B for which correction was not completed or timely corrected
0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any findings reported in this section:

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on updated data:

Please describe, consistent with OSEP QA 23-01, how the State verified that each individual case of noncompliance was corrected:

Total for All Noncompliance Identified (Indicators 4B, 9, 10, 11, 12, 13, and Optional Areas):

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
35	0	34	0	1

FFY 2024 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified FFY 2023	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
34	35	100.00%	100%	97.14%	Did not meet target	Slippage

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	2.86%
---	-------

Provide reasons for slippage, if applicable

Reason for the slippage was related to Indicator 11. One LEA was not verified as corrected within one year due to the LEA submitting the data outside the one-year timeline. Although the data set was within the one-year timeline, the submission for the SEA to verify the noncompliance was submitted nine days after the one-year timeline. The SEA verified the LEA's additional subsequent data set, although submitting late, did meet regulatory requirements (i.e., 100% compliance achieved).

Provide additional information about this indicator (optional)

Summary of Findings of Noncompliance identified in FFY 2023 Corrected in FFY 2024 (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified during FFY 2023 (the period from July 1, 2023 through June 30, 2024)	35
2. Number of findings the State verified as timely corrected (corrected within one year from the date of written notification to the LEA of the finding)	34

3. Number of findings <u>not</u> verified as corrected within one year	1
--	---

Subsequent Correction: Summary of All Outstanding Findings of Noncompliance Identified in FFY 2023 Not Timely Corrected in FFY 2024 (corrected more than one year from identification of the noncompliance):

4. Number of findings of noncompliance not timely corrected	1
5. Number of findings in Col. A the State has verified as corrected beyond the one-year timeline for Indicator 4B, 9, 10, 11, 12, 13 ("subsequent correction")	1
6a. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 4B	
6b. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 9	
6c. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 10	
6d. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 11	
6e. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 12	
6f. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - Indicator 13	
6g. (optional) Number of written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - All other findings	
7. Number of findings <u>not</u> yet verified as corrected	0

Subsequent correction: If the State did not ensure timely correction of previous findings of noncompliance, provide information on the nature of any continuing noncompliance and the actions that have been taken, or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

One LEA was unable to verify continued compliance during the first initial updated data (April 1, 2025 to June 30, 2025) submission. Through a letter of continued noncompliance notification, the SEA required the LEA to submit an additional data set (July 1, 2025 to October 1, 2025) for the SEA to verify continued compliance. The SEA was in communication via email and phone calls throughout the one year timeline to assist the LEA with submitting the additional data timely. The LEA submitted the second updated data set that was within the one-year timeline, however; it was submitted nine days after the one-year timeline. The SEA has outlined the sanction process in the introduction section and follows this process for all noncompliance issues. The SEA has verified the LEA is correctly implementing regulatory requirements with 100% compliance. The timely submission issue was applied to the LEA's determination.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

18 - Prior FFY Required Actions

None

18 - OSEP Response

18 - Required Actions

Certification

Instructions

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

Certify

I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role

Designated by the Chief State School Officer to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.

Name:

Linda Turner

Title:

Director of Special Education and Early Learning

Email:

linda.turner@state.sd.us

Phone:

605-773-3327

Submitted on:

04/23/26 4:48:19 PM

Determination Enclosures

Data Rubric

South Dakota

FFY 2024 APR (1)

Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1
18	1	1

APR Score Calculation

Subtotal	22
Timely Submission Points - If the FFY 2024 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	27

(1) In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 7/30/25	1	1	1	3
Personnel Due Date: 2/18/26	1	1	1	3
Exiting Due Date: 2/18/26	1	1	1	3
Discipline Due Date: 2/18/26	1	1	1	3
State Assessment Due Date: 1/7/26	1	1	1	3
Dispute Resolution Due Date: 11/19/25	1	1	1	3
MOE/CEIS Due Date: 11/19/25	1	1	1	3

618 Score Calculation

Subtotal	21
Grand Total (Subtotal X 1.28571429) =	27.00

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.28571429 points are subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation

A. APR Grand Total	27
B. 618 Grand Total	27.00
C. APR Grand Total (A) + 618 Grand Total (B) =	54.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	54.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.28571429.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2026 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 associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described in the table below).

618 Data Collection	EDFacts Files	Due Date
Part B Child Count and Educational Environments	FS002 & FS089	7/30/2025
Part B Personnel	FS070, FS099, FS112	2/18/2026
Part B Exiting	FS009	2/18/2026
Part B Discipline	FS005, FS006, FS007, FS088, FS143, FS144	2/18/2026
Part B Assessment	FS175, FS178, FS185, FS188	1/7/2026
Part B Dispute Resolution	FS227, FS228, FS229, FS230	11/19/2025
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	FS231, FS232, FS233, FS234, FS235, FS236, FS237, FS238	11/19/2025

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 and metadata responses submitted to *EDFacts* align. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection.

Dispute Resolution

IDEA Part B

South Dakota

School Year: 2024-25

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	15
(1.1) Complaints with reports issued.	10
(1.1) (a) Reports with findings of noncompliance	7
(1.1) (b) Reports within timelines	10
(1.1) (c) Reports within extended timelines	0
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	5

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	11
(2.1) Mediations held.	11
(2.1) (a) Mediations held related to due process complaints.	5
(2.1) (a) (i) Mediation agreements related to due process complaints.	4
(2.1) (b) Mediations held not related to due process complaints.	6
(2.1) (b) (i) Mediation agreements not related to due process complaints.	3
(2.2) Mediations pending.	0
(2.3) Mediations withdrawn or not held.	0

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	8
(3.1) Resolution meetings.	2
(3.1) (a) Written settlement agreements reached through resolution meetings.	2
(3.2) Hearings fully adjudicated.	0
(3.2) (a) Decisions within timeline (include expedited).	0
(3.2) (b) Decisions within extended timeline.	0
(3.3) Due process complaints pending.	0
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	8

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

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

This report shows the most recent data that was entered by:
South Dakota

These data were extracted on the close date:
11/19/2025