STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on
FFY 2023

South Dakota

PART B DUE February 3, 2025

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's (SEA) general supervision system includes an accountability review of LEA special education programs on a five-year cycle. The accountability review incorporates an analysis of compliance through State Performance Plan (SPP) indicators, state assessment accommodation verification, dispute resolution follow-up, and fiscal reviews.

Accountability Reviews
The SEA's accountability review cycle distributes LEAs and educational approved programs over a five-year cycle. This includes approximately 30 LEAs along with five approved programs reviewed annually. Indicator 13 data is also collected during the LEA accountability review. Each LEA's accountability review includes a review of child count data in comparison to state level reporting, review of the comprehensive plan, an Indicator 13 review, one-to-one teacher file reviews, verification of state certification of special education staff, and a representative file review across disability categories and placement categories. If relevant to the LEA, an accountability review may also include a review of private school eligibility, service plans, program purchases, and other relevant areas.

LEAs may also receive an on-site or off-site focused accountability review. Focused reviews are generally related to disproportionality, South Dakota (SD) state funded extraordinary cost fund (ECF) board review of specific recipients, high rates of alternate assessment participation, and follow-up of corrective actions resulting from a state complaint or due process complaint with findings of noncompliance.

The SEA analyzes LEA SPP/APR data to identify areas the district is meeting or performing better than the SEA targets and any area(s) of underperformance. Based on the analysis, the SEA provides technical assistance and may target individual file reviews to determine if there is any noncompliance or systemic issue.

The SEA implements a Results Driven Accountability (RDA) three-tiered process utilizing a risk rubric based primarily on SPP/APR indicator data. The risk rubric identifies LEAs that need support to improve academic and functional outcomes for students with disabilities. The SEA classifies LEAs based on risk and categorizes the LEAs into three support levels. Level 1 is considered a low need, level 2 is moderate need, and level 3 is high need for support. All LEAs are required to conduct an internal self-assessment compliance review for one file per case manager annually. LEAs analyze the strengths and needs from file reviews and internally identify what professional development or other staff supports are needed. The LEA is not required to submit the individual findings of the self-assessment, but the LEA must submit the identified area(s) of need to the SEA. The SEA utilizes that information to determine state level professional development and technical assistance. LEAs identified in level 2 or 3 are also required to participate in a data retreat, complete internal reviews with support, develop an action plan, and receive coaching. Level 2 and 3 are also required to implement the action plans to improve outcomes for students. The RDA District Manual is located at https://doe.sd.gov/sped/documents/District-RDA.pdf.

Fiscal Monitoring
Fiscal monitoring includes the review and approval of the IDEA application that all LEAs submit to the Department of Education (DOE) to apply for IDEA Part B 611, Part B 619, and, if applicable, Coordinated Early Intervention Services (CEIS)/ Comprehensive CEIS (CCEIS) funds. The SEA employs a multifaceted approach to review each application to ensure it meets program requirements.

During a fiscal review of the IDEA funds, the LEA submits accounting records. Grants Management compares accounting records that have a separate identifier to track IDEA Part B 611, Part B 619, CEIS/CCEIS, and private school proportionate share separately. Grants Management then compares accounting records with reimbursement requests and the approved grant application.

If the LEA utilized voluntary CEIS funds, up to 15%, to provide services to non-identified students, not on an individual education program (IEP), the DOE verifies usage through a fiscal review and special education accountability review. This process is also used for CCEIS requirements. CCEIS requires funds to be spent on non-identified students and students with IEPs. The LEA separately tracks and accounts for IDEA funds used for CCEIS and/or CEIS in the LEAs accounting software. LEAs must submit a separate budget for these funds which are reviewed in the same manner as Part B 611 and 619 funds.

Maintenance of Effort (MOE) uses an eligibility test or compliance test to determine if each LEA will meet MOE to be eligible to receive the IDEA grant. Each year during the eligibility test, which takes place during the IDEA application process, the LEA will submit their estimated expenditures for the reporting fiscal year. LEAs are provided with comparison year data, which is the last time they met MOE using the specific method. The compliance test

takes place each year to determine if an LEA has spent enough local expenditures, state and local combined expenditures, local per capita expenditures, or state and local per capita expenditures. There are federally allowable exceptions that permit an LEA to reduce its required expenditure threshold. Documentation and verification are used to ensure they are allowable exceptions. If the LEA is unable to establish an allowable exception, noncompliance is issued and the LEA will be required to pay the shortfall amount.

If the LEA has a private school within its boundaries, the DOE verifies the LEA expended the required proportionate share designated and budgeted in the application for IDEA funds. The LEA is required to meet with the private school, document their agreement and upload the private school consultation form. If the LEA used private school personnel to provide equitable services, the SEA verifies that services were performed outside of the regular duty hours and under the supervision of the public agency.

The DOE does a fiscal cross-cutting review to ensure all LEAs are supplementing and not supplanting federal funds. The DOE checks to determine whether or not the LEA generated any program income and compares time and effort documentation against the general ledger. If the LEA purchased equipment with federal funds, the DOE requests the property records to ensure that the equipment is reasonable and necessary to implement the IEP or special education program. The DOE verifies procurement is in place, and if necessary, collects documentation supporting vendor selection. If there are third-party contractors, the DOE verifies if they are approved and monitored by the LEA. During the accountability review, the SEA confirms the LEA is maintaining equipment as required.

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 compliance.

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. Student files must be an initial evaluation or reevaluation that have occurred in the past year and currently attending the LEA. 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 is completed.

Indicator 13 data collection and individual file reviews follow the same five-year cyclical schedule as accountability reviews. File selection is based on the number of case managers who oversee transition age IEPs, out-of-district placements, and representation of each disability category for transition age students. A minimum of two files per case manager are reviewed to show the LEA is meeting regulatory requirements.

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 SEA 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. If available, the LEA submits additional file(s) for student(s) who had a manifest determination since the notification of noncompliance to ensure the updated compliant policies and procedures are being implemented.

Indicator 11 and 12 data includes 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 LEAs subsequent Indicator 11 and 12 data submission for the following FFY. If the LEA does not show continued compliance with the updated data submission, the LEA is required to submit quarterly data on all initial evaluations \through the SEA database.

Verification of correction on noncompliance:
For all compliance indicators and accountability monitoring, if noncompliance has been identified, a finding in the form of a 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 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.

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 is used in whole or part for the collection and reporting of data 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 between December and February of each year. LEAs submit Indicator 4 by June 30 of each year and the SEA validates the submission between July and 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 between August and 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 between June and 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 South Dakota Assessment Gateway is a web-based portal for collecting student English Language Arts (ELA) and Math, Science, and Science 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 assessment is reviewed and validated by both 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 between August and 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 asked to correct the entry errors prior to 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 Indicator 15 and 16 is collected through an excel spreadsheet that is updated and reviewed on an on-going 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 request was submitted, 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 utilizes a secured SharePoint folder to collect and distribute information between the SEA Accountability Manager, SEA review team, and the LEA. The LEA uploads documentation to identify the case managers, 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 compiles 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 between 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 for Indicators 4B, 9, and 10 by LEA. For Indicators 11, 12 and 13 findings are issued by the number of individual student files found out of compliance.

The SEA issues accountability review findings at the LEA level. After review of the documentation and in accordance with the Special Education Administrative Rules of South Dakota (ARSD) 24:05, each LEA is issued a public report which includes each ARSD identified as noncompliant.

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).

South Dakota 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. 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 LEAs 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 remedies that are legally available.

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 is 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 is 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 local program 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 bi-weekly 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. Technical assistance also includes specialized topical office hours for LEA staff who enter early childhood special education data.

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, and the Center for Disabilities. These organizations 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 re-building) 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 is 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 77,111 square miles and 148 LEAs. The LEAs are differentiated by the total student population with 29 small LEAs that have an enrollment of 200 or less, 80 medium LEAs that have an enrollment between 201 and 600, and 39 large LEAs that have an enrollment of over 600. Trainings 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).

IEP process workshops are held every fall across SD. In the fall of 2023, the SEA offered several opportunities for basic, advanced, transition, and early childhood IEP workshops virtually and in-person. The IEP basic workshop targets new special education staff and covered the IEP process from referral, evaluation, and eligibility to IEP development. Approximately 90 LEA staff statewide attended the basic workshop. The advanced IEP workshop focused on utilizing data throughout the special education process. Approximately 400 LEA staff statewide attended the advanced training. The transition IEP workshop addressed high school transition and IEP processes. The transition workshop had approximately 124 LEA staff attend. The early childhood workshop focuses on Part C to Part B transition, preschool outcomes, and least restrictive environments. There were approximately 114 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 Teach SD 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 level, initiatives, data collection, and other DOE information.

The SEA partners with the Technical Assistance for Excellence in Special Education (TAESE) to offer webinar training on specialized topics. Topics include legal updates, IDEA versus 504, Attendance and Absenteeism, and Confidentiality of Student Records. 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 at https://doe.sd.gov/sped/webinars.aspx. Specialized training for IEP facilitators, mediators, complaint investigators, and hearing officers are 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 two major conferences each year, the Special Education Conference in the spring and the Summer Conference. One targets special education professionals and the other targets all educators with a focus on making learning accessible for all students.

Entities such as the Center for Disabilities provide frequent and timely feedback and technical assistance through virtual meetings, in-person, and other avenues to parents and LEAs. Professional development offered includes training on meeting the needs of students with autism spectrum disorder and challenging behaviors, administration of the Autism Diagnostic Observation Schedule (ADOS), supporting mental health, Program for the Education and Enrichment of Relational Skills (PEERS) training, and training for general education teachers on supporting students with disabilities.

The SEA partnered with the SD Services for the Deaf to develop training and modules for 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.

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, Head Start Collaboration Office, and Part C. The SEA collaborates with Disability Rights of South Dakota (DRSD) and SDPC to increase 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 reflects 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 stakeholder participants 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 presented the data from the FFY 2022 submission during the annual Special Education Conference in March of 2024. The presentation provided an overview of the SPP/APR, opportunities to provide feedback related to the SPP/APR, information on each indicator and the relationship to student outcomes, historical and current data, and SEA and LEA activities occurring to improve student outcomes. The SEA identified areas the state is doing well and areas of need based on the indicator data. The time was also used to share the SEAs plan for updating the Indicator 4 methodology and opportunity to participate in a focused stakeholder meeting to help the state determine targets. Feedback was collected on what improvement activities should be done in relation to the current data submitted to OSEP that may impact the FFY 2023 and future data.

The SEA met with a large stakeholder data drill down group on September 11, 2024, to review available statewide FFY 2023, 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, 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 activity 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 9, 2025, the SDAPCD reviewed preliminary data results of the FFY 2023 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 2023, the SEA conducted the following activities:

1. Indicator 17 SSIP progress and activities were reviewed with stakeholders during the SEA Personnel Development Grant (SPDG) Advisory Committee.

2. During the MTSS 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. Stakeholder input is obtained directly from LEAs on specific indicators through the RDA process. LEAs in level 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 supports needed by the LEAs.

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

1. 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.

2. Feedback was solicited via online surveys from LEA and parent stakeholders and SDPC regarding how the SEA should revise the Indicator 8 Parent Involvement Survey questions to make the survey more meaningful to parents. Feedback was also gathered on how the SEA could support LEAs in improving survey collection methods to ensure representativeness of student demographics.

3. Indicator 14 data was presented to the Vocational Rehabilitation (VR) Board. Data was shared and feedback was provided on improvement strategies and activities for secondary transition.

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

NO

Number of Parent Members:

29

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. Parents were also involved in reviewing Indicator 4 methodologies to determine what methodology and targets the SEA should adopt. The SEA also presented to the SDAPCD as outlined above in the Stakeholder Engagement section.

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 all preliminary FFY 2023 SPP/APR data in January 2025 to the SDAPCD, which is broadcast live through South Dakota Public Broadcasting (SDPB). All SDAPCD meetings are announced through public notice prior to the meeting and on the State of South Dakota Boards and Commissions website so that any member of the public may attend and provide public input. The agenda and materials for SDAPCD meetings are posted at https://boardsandcommissions.sd.gov/Meetings.aspx?BoardID=16.

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 2023, the SEA presented the final FFY 2022 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 2022 SPP/APR would be posted, which included the final results of all stakeholder activities and input. The FFY 2022 SPP/APR was posted at https://doe.sd.gov/sped/SPP.aspx on June 1, 2024.

Reporting to the Public

How and where the State reported to the public on the FFY 2022 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 2022 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 2022 APR in 2024, is available.

Following the submission of the SPP/APR to the U.S. Department of Education, the SEA disseminated the FFY 2022 SPP/APR and LEA public information in the following ways:

1. The SEA posted the final version of the FFY 2022 SPP/APR and LEA public reports on the SEA webpage at http://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 http://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 2022 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 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 2022 SPP/APR via their newsletter and weekly updates.

5. The SEA provided electronic copies to all SDAPCD members and posted 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

None

Intro - OSEP Response

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 2023 SPP/APR, use data from 2022-2023), 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	2018	2019	2020	2021	2022
Target >=	85.00%	85.00%	67.99%	67.99%	68.45%
Data	62.98%	72.14%	75.40%	61.06%	64.68%

Targets

FFY	2023	2024	2025
Target >=	68.91%	71.84%	73.67%

Targets: Description of Stakeholder Input

Stakeholder input was sought to determine whether or not the current target should be maintained or adjusted for FFY 2023 and to obtain feedback on improvement strategies to improve the graduation rate. Following consideration of the data and SDAPCD discussion, it was determined that the target for Indicator 1 will be maintained for FFY 2023.

Strategies suggested by stakeholders included continued training on graduation requirements, exit codes in the student information management system, and identifying accommodations versus modifications.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	655
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	75

Source	Date	Description	Data
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	220

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
655	950	64.68%	68.91%	68.95%	Met target	No Slippage

Graduation Conditions

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

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 South Dakota Codified Law (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 a free appropriate public education (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 2023 SPP/APR, use data from 2022-2023), 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	2018	2019	2020	2021	2022
Target <=	2.40%	2.40%	19.35%	19.35%	18.38%
Data	3.01%	2.55%	18.17%	31.49%	27.78%

Targets

FFY	2023	2024	2025
Target <=	17.40%	14.60%	10.70%

Targets: Description of Stakeholder Input

Stakeholder input was sought to determine whether or not the current target should be maintained or adjusted for FFY 2023 and to obtain feedback on improvement strategies to improve (decrease) dropout rate. Following consideration of the data and SDAPCD discussion, it was determined that the target for Indicator 2 will be maintained for FFY 2023.

Strategies stakeholders suggested included continuing to examine data at the SEA and LEA levels to identify who is dropping out versus moved not known to continue, analyzing attendance rates and related targeted interventions, and identifying interventions and strategies to keep students engaged at the LEA level.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	655
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	75

Source	Date	Description	Data
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	220

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
220	950	27.78%	17.40%	23.16%	Did not meet target	No 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 ED*Facts* file specifications FS185 and 188.

Measurement

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

Instructions

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

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

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

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	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	2023	2024	2025
Reading	A >=	Grade 4	96.10%	96.74%	98.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%
Math	A >=	Grade 4	97.60%	97.80%	98.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

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

Based on data review and analysis, stakeholders expressed that statewide assessment participation continues to meet the required 95%. Stakeholders expressed 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 on a medical exemption. Stakeholders feel that the increased statewide in-person interim assessment trainings by the SEA Office of Assessment have increased LEA use of interim assessments throughout the school year, therefore increasing students' familiarity and confidence in participating in the state assessment platform.

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. The SEA will continue encouraging LEAs to use interim assessments to foster positive participation in the state assessment.

FFY 2023 Data Disaggregation from ED*Facts*

Data Source:

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

01/08/2025

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)			
b. Children with IEPs in regular assessment with no accommodations (3)			
c. Children with IEPs in regular assessment with accommodations (3)			
d. Children with IEPs in alternate assessment against alternate standards			

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

01/08/2025

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)			
b. Children with IEPs in regular assessment with no accommodations (3)			
c. Children with IEPs in regular assessment with accommodations (3)			
d. Children with IEPs in alternate assessment against alternate standards			

(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 2023 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			99.34%	96.10%		N/A	N/A
B	Grade 8			98.89%	95.00%		N/A	N/A
C	Grade HS			96.82%	95.00%		N/A	N/A

FFY 2023 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			99.30%	97.60%		N/A	N/A
B	Grade 8			98.66%	95.00%		N/A	N/A
C	Grade HS			97.03%	95.00%		N/A	N/A

Regulatory Information

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

Public Reporting Information

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

To access report information to fulfill requirements in CFR 300.160(f):
1) Go to https://sdschools.sd.gov/#/home.
2) Scroll to the bottom of the screen. To explore State results, click on the "State" icon. To explore School or District results, click on the "Schools" or "Districts" icon, or type the school or district name in the "Find Your School" search box.
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 on "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 cursor over the three dots 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)

Per the EDFacts Workbook for SY 2023-24, Process 4.1.2 and 4.1.3, a SEA can request to have the State Submission Plan reopened. South Dakota submitted process request 4.1.2. for the submission of SY 2023-24 Files and Metadata due 01/08/2025. The request was submitted to Partner Support Center (PSC) on 01/23/2025 with additional clarification provided, at the request of PSC, submitted on 01/28/2025. The request was approved by PSC on 01/29/2025 and South Dakota completed the submission for the SY 2023-24 Files and Metadata (which includes the same data as used for reporting to the Department under Title I of the ESEA, EDFacts file spec FS188; Data Group: 589 and EDFacts file spec FS185; Data Group: 588) on 02/3/2025.

However, as noted in the 2024 IDEA Part B Determinations letter: For the FFY 2023 SPP/APR submission due on February 1, 2025. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix. States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform. There will not be a resubmission period for the IDEA Section 618 Part B data.

Therefore, the South Dakota assessment data is summarized below and included in full as an attachment to the Indicator for public transparency:

FFY 2023 Reading Assessment Participation Rate for Children with IEPs:
Grade 4: 99.62%, Target: 96.10%, Met Target, No slippage
Grade 8: 98.24%, Target: 95.00%, Met Target, No slippage
Grade HS: 98.61%, Target: 95.00%, Met Target, No slippage

FFY 2023 Math Assessment Participation Rate for Children with IEPs:
Grade 4: 99.34%, Target: 97.60%, Met Target, No slippage
Grade 8: 98.24%, Target: 95.00%, Met Target, No slippage
Grade HS: 98.62%, Target: 95.00%, Met Target, No slippage

3A - Prior FFY Required Actions

None

3A - OSEP Response

The State did not provide any data for this indicator. Therefore, OSEP could not determine whether the State met its target.

3A - Required Actions

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

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3B - Indicator Data
Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	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	2023	2024	2025
Reading	A >=	Grade 4	19.76%	21.01%	23.51%
Reading	B >=	Grade 8	11.28%	12.03%	13.53%
Reading	C >=	Grade HS	16.70%	17.45%	18.95%
Math	A >=	Grade 4	21.86%	23.15%	25.58%
Math	B >=	Grade 8	7.46%	8.21%	9.71%
Math	C >=	Grade HS	4.23%	4.98%	6.48%

Targets: Description of Stakeholder Input

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

LEA stakeholders who use interim assessments as instructional tools throughout the school year stated that their use of interims has increased their students' comfort level with the assessment platform and digital tools, which has allowed the students to approach the state assessment with ease of mind and technology accessibility. This comfort level helped remove barriers to proficiency. Stakeholders also expressed that the SEA's statewide clarifications on accommodations versus modifications on grade level content has helped LEAs to ensure they are appropriately identifying and utilizing accommodations during both instruction and assessment.

Based on this stakeholder input, the SEA will continue to train and encourage LEAs on using interim assessments throughout the school year. The SEA Office of Assessment notifies and monitors any LEAs that do not meet assessment proficiency thresholds. The SEA will continue providing targeted

RDA coaching to LEAs identified as needing support. The SEA provides SSIP supports and trainings directly to LEAs to improve assessment proficiency and outcomes for students with disabilities.

FFY 2023 Data Disaggregation from ED*Facts*

Data Source:

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/08/2025

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment			
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/08/2025

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment			
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

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

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			19.37%	19.76%		N/A	N/A
B	Grade 8			11.26%	11.28%		N/A	N/A
C	Grade HS			15.93%	16.70%		N/A	N/A

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			22.14%	21.86%		N/A	N/A
B	Grade 8			7.33%	7.46%		N/A	N/A
C	Grade HS			4.18%	4.23%		N/A	N/A

Regulatory Information

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

Public Reporting Information

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

To access report information to fulfill requirements in CFR 300.160(f):
1) Go to https://sdsschools.sd.gov/#/home.
2) Scroll to the bottom of the screen. To explore State results, click on the "State" icon. To explore School or District results, click on the "Schools" or "Districts" icon, or type the school or district name in the "Find Your School" search box.
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 on "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 cursor over the three dots 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)

Per the EDFacts Workbook for SY 2023-24, Process 4.1.2 and 4.1.3, a SEA can request to have the State Submission Plan reopened. South Dakota submitted process request 4.1.2. for the submission of SY 2023-24 Files and Metadata due 01/08/2025. The request was submitted to Partner Support Center (PSC) on 01/23/2025 with additional clarification provided, at the request of PSC, submitted on 01/28/2025. The request was approved by PSC on 01/29/2025 and South Dakota completed the submission for the SY 2023-24 Files and Metadata (which includes the same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file spec FS178; Data Group: 584 and EDFacts file spec FS175; Data Group: 583) on 02/3/2025.

However, as noted in the 2024 IDEA Part B Determinations letter: For the FFY 2023 SPP/APR submission due on February 1, 2025. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix. States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform. There will not be a resubmission period for the IDEA Section 618 Part B data.

Therefore, the South Dakota assessment data is summarized below and included in full as an attachment to the Indicator for public transparency:

FFY 2023 Reading Assessment Proficiency for Children with IEPs Against Grade-Level Standards:
Grade 4: 19.72%, Target: 19.76%, Did not meet target, No slippage
Grade 8: 10.38%, Target: 11.28%, Did not meet target, No slippage
Grade HS: 15.19%, Target: 16.70%, Did not meet target, No slippage

FFY 2023 Math Assessment Proficiency for Children with IEPs Against Grade-Level Standards:
Grade 4: 21.25%, Target: 21.86%, Did not meet target, No slippage
Grade 8: 8.31%, Target: 7.46%, Met Target, No slippage
Grade HS: 4.12%, Target: 4.23%, Did not meet target, Slippage*

*Reasons for slippage for Math Assessment Proficiency for Grade HS:
The SEA reviewed high school math proficiency data and found that while the proficiency of students with disabilities decreased by 0.18 percentage points, the proficiency of all students likewise decreased similarly by 2.05 percentage points. This consistent trend in decreased high school math proficiency for students both with and without disabilities may be due to the FFY 2023 Grade HS being an overall lower achieving grade than the FFY 2022 Grade HS. This lower achievement may be because these students were in Grade 7 during the Spring of 2020 when schools were closed due to COVID, and they were in Grade 8 during the Fall of 2021 when some families chose on-line or at-home learning options for their students. The lack of direct and in-person math instruction during those school years may have caused students to miss crucial prerequisite math skills needed to be proficient in high school math.

3B - Prior FFY Required Actions

None

3B - OSEP Response

The State did not provide any data for this indicator. Therefore, OSEP could not determine whether the State met its target.

3B - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

   A. Participation rate for children with IEPs.

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

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	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	2023	2024	2025
Reading	A >=	Grade 4	39.25%	40.50%	43.00%
Reading	B >=	Grade 8	34.08%	34.83%	36.33%
Reading	C >=	Grade HS	57.07%	57.82%	59.32%
Math	A >=	Grade 4	55.25%	56.50%	59.00%
Math	B >=	Grade 8	39.93%	40.68%	42.18%
Math	C >=	Grade HS	57.73%	58.48%	59.98%

Targets: Description of Stakeholder Input

Stakeholder input was sought to determine if the current targets should be maintained or adjusted for FFY 2023 and to obtain feedback on improvement strategies. Stakeholders suggested that revisions of targets for Indicator 3C should be considered due to FFY 2022 proficiencies being below target. Stakeholders questioned if proficiency targets for Indicator 3C are disproportionately higher than the proficiency targets for Indicator 3B. Following consideration of the FFY 2023 data and SDAPCD discussion, it was determined that the targets for Indicator 3C will be maintained for FFY 2023.

The proficiency data in all groups and subjects improved from FFY 2022 to FFY 2023. Stakeholders expressed that this improvement may be due to the SEA's increased resources and trainings on how to use the SEA's alternate academic achievement standards (AAAS) in the IEP goals, instruction, and assessment of students participating in alternate assessment. In-person and online trainings addressed federal and state guidelines regarding the free and appropriate education of students with severe disabilities. The SEA emphasized that grade level content needs to be prioritized when LEAs develop

IEP goals and instruction. This increased access to grade level AAAS and content contributed to improved proficiency. The SEA also created a listserv to share communications and resources with targeted LEA staff who instruct and assess students using AAAS. In addition, the SEA also encouraged LEAs to utilize alternate assessment sample items to help both LEA staff and students become familiar with and comfortable navigating the state alternate assessment platform.

Based on this stakeholder input, the SEA will continue to provide training opportunities and technical assistance to LEAs on how to utilize AAAS, as well as instructional methods for engaging and teaching students with significant cognitive disabilities. The SEA will continue communication efforts and a listserv for teachers who instruct students with significant needs.

FFY 2023 Data Disaggregation from ED*Facts*

Data Source:

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/08/2025

Reading Assessment Proficiency Data by Grade

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

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/08/2025

Math Assessment Proficiency Data by Grade

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

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			27.73%	39.25%		N/A	N/A
B	Grade 8			25.00%	34.08%		N/A	N/A
C	Grade HS			34.18%	57.07%		N/A	N/A

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			46.67%	55.25%		N/A	N/A
B	Grade 8			34.48%	39.93%		N/A	N/A
C	Grade HS			36.71%	57.73%		N/A	N/A

Regulatory Information

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

Public Reporting Information

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

To access report information to fulfill requirements in CFR 300.160(f):
1) Go to https://sdschools.sd.gov/#/home.
2) Scroll to the bottom of the screen. To explore State results, click on the "State" icon. To explore School or District results, click on the "Schools" or "Districts" icon, or type the school or district name in the "Find Your School" search box.
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 on "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 cursor over the three dots 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."

District 1% Justifications for LEAs having over 1% participation in the Alternate Assessment are publicly available. To access directions on how to request the Justifications:
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)

Per the EDFacts Workbook for SY 2023-24, Process 4.1.2 and 4.1.3, a SEA can request to have the State Submission Plan reopened. South Dakota submitted process request 4.1.2. for the submission of SY 2023-24 Files and Metadata due 01/08/2025. The request was submitted to Partner Support Center (PSC) on 01/23/2025 with additional clarification provided, at the request of PSC, submitted on 01/28/2025. The request was approved by PSC on 01/29/2025 and South Dakota completed the submission for the SY 2023-24 Files and Metadata (which includes the same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file spec FS178; Data Group: 584 and EDFacts file spec FS175; Data Group: 583) on 02/3/2025.

However, as noted in the 2024 IDEA Part B Determinations letter: For the FFY 2023 SPP/APR submission due on February 1, 2025. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix. States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform. There will not be a resubmission period for the IDEA Section 618 Part B data.

Therefore, the South Dakota assessment data is summarized below and included in full as an attachment to the Indicator for public transparency:

FFY 2023 Reading Assessment Proficiency for Children with IEPs Against Alternate Standards:
Grade 4: 31.37%, Target: 39.25%, Did not meet target, No slippage
Grade 8: 28.89%, Target: 34.08%, Did not meet target, No slippage
Grade HS: 38.16%, Target: 57.07%, Did not meet target, No slippage

FFY 2023 Math Assessment Proficiency for Children with IEPs Against Alternate Standards:
Grade 4: 46.08%, Target: 55.25%, Did not meet target, No slippage
Grade 8: 42.70%, Target: 39.93%, Met Target, No slippage
Grade HS: 48.68%, Target: 57.73%, Did not meet target, No slippage

3C - Prior FFY Required Actions

None

3C - OSEP Response

The State did not provide any data for this indicator. Therefore, OSEP could not determine whether the State met its target.

3C - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

  A. Participation rate for children with IEPs.

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

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

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

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

Data Source

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

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2023-2024 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2023-2024 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 2023-2024 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2023-2024 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	2023	2024	2025
Reading	A <=	Grade 4	29.29	28.79	27.79
Reading	B <=	Grade 8	40.83	40.20	38.95
Reading	C <=	Grade HS	49.35	48.72	47.47
Math	A <=	Grade 4	26.01	25.51	24.51
Math	B <=	Grade 8	32.26	31.63	30.38
Math	C <=	Grade HS	35.18	34.55	33.30

Targets: Description of Stakeholder Input

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

Stakeholders were pleased to see no slippage in all groups and subjects in the regular assessment. Stakeholders expressed that the correct identification and implementation of accommodations for students on IEPs contributed to closing the gap, as well as the increased use of interim assessment to familiarize students with disabilities with the testing platform.

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 2023 Data Disaggregation from ED*Facts*

Data Source:

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/08/2025

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment			
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment			
c. All students in regular assessment with no accommodations scored at or above proficient against grade level			
d. All students in regular assessment with accommodations scored at or above proficient against grade level			
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/08/2025

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment			
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment			
c. All students in regular assessment with no accommodations scored at or above proficient against grade level			
d. All students in regular assessment with accommodations scored at or above proficient against grade level			
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level			
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level			

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

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			28.11	29.29		N/A	N/A
B	Grade 8			38.12	40.83		N/A	N/A
C	Grade HS			49.00	49.35		N/A	N/A

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4			25.74	26.01		N/A	N/A
B	Grade 8			30.54	32.26		N/A	N/A
C	Grade HS			33.09	35.18		N/A	N/A

Provide additional information about this indicator (optional)

Per the EDFacts Workbook for SY 2023-24, Process 4.1.2 and 4.1.3, a SEA can request to have the State Submission Plan reopened. South Dakota submitted process request 4.1.2. for the submission of SY 2023-24 Files and Metadata due 01/08/2025. The request was submitted to Partner Support Center (PSC) on 01/23/2025 with additional clarification provided, at the request of PSC, submitted on 01/28/2025. The request was approved by PSC on 01/29/2025 and South Dakota completed the submission for the SY 2023-24 Files and Metadata (which includes the same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file spec FS178; Data Group: 584 and EDFacts file spec FS175; Data Group: 583) on 02/3/2025.

However, as noted in the 2024 IDEA Part B Determinations letter: For the FFY 2023 SPP/APR submission due on February 1, 2025. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix. States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform. There will not be a resubmission period for the IDEA Section 618 Part B data.

Therefore, the South Dakota assessment data is summarized below and included in full as an attachment to the Indicator for public transparency:

FFY 2023 Reading Assessment Gap in Proficiency Rates:
Grade 4: 27.24%, Target: 29.29%, Met target, No slippage
Grade 8: 38.94%, Target: 40.83%, Met target, No slippage
Grade HS: 47.70%, Target: 49.35%, Met target, No slippage

FFY 2023 Math Assessment Gap in Proficiency Rates:
Grade 4: 26.63%, Target: 26.01%, Did not meet target, No slippage
Grade 8: 32.00%, Target: 32.26%, Met Target, No slippage
Grade HS: 31.11%, Target: 35.18%, Met target, No slippage

3D - Prior FFY Required Actions

None

3D - OSEP Response

The State did not provide any data for this indicator. Therefore, OSEP could not determine whether the State met its target.

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 2023 SPP/APR, use data from 2022-2023), 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 2022-2023 school year, those 100 LEAs would have reported section 618 data in 2022-2023 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2023-2024, suspension/expulsion data from those 15 new LEAs would not be in the 2022-2023 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 2022-2023 (which can be found in the FFY 2022 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.

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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	2018	2019	2020	2021	2022
Target <=	33.33%	0.00%	0.00%	0.00%	0.00%
Data	0.00%	0.00%	0.00%	Not Valid and Reliable	Not Valid and Reliable

Targets

FFY	2023	2024	2025
Target <=	3.36%	3.36%	3.30%

Targets: Description of Stakeholder Input

The SEA met with stakeholders to establish a new methodology for significant discrepancy beginning with FFY 2023. Stakeholders were informed that the previous methodology was set at such a high cell size of 10 and n size of 10 and threshold (17 times the state mean rate) that it was improbable that any LEA would ever be found to have significant discrepancy.

Stakeholders reviewed multiple potential methodologies and options of n size and cell sizes, thresholds, and state flexibilities. After review of the multiple options and discussion of purpose of identification for Indicator 4A, the stakeholders proposed to change the minimum cell size for children with IEPs suspended or expelled greater than 10 days to zero and change the minimum n size for children with IEPs to zero. This change would include all LEAs in the calculation. The new threshold was changed to a 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. This threshold was determined through extensive modeling of data from 2016 to 2022 and ensures that significant discrepant LEAs are more accurately identified.

Due to the significant change in the methodology, the SEA and stakeholders reviewed and updated the baseline and targets to ensure accurate alignment with the current methodology. Stakeholders agreed to decrease the target from the baseline in FFY 2023 of 3.36 to 3.30 in FFY 2025. Due to the historical data showing fluctuations, COVID19 recovery, and targets to be set for the final two years of the SPP/APR, the small decrease was appropriate at this time.

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
5	149	Not Valid and Reliable	3.36%	3.36%	N/A	N/A

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 SEA 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. The minimum cell size for children with IEPs suspended and expelled greater than 10 days is zero. The minimum n size for children with IEPs is zero.

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 districts. For the reporting period 2023-24, the state mean is 0.42, which will be updated annually.
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 2023 using 2022-2023 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, manifest determination procedures, and use of positive behavior intervention and supports. LEAs submitted evidence and supporting documentation with the self-assessment and submitted an appropriate number of files for verification. 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 student 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 as well as the manifestation determination process. 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 a sample number of files from LEAs that exceeded the threshold for suspension/expulsion for greater than 10 days. The SEA 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. If available, the LEA submits additional file(s) for student(s) who had a manifest determination since the notification of noncompliance to ensure the updated compliant policies and procedures are being implemented.

Correction of Findings of Noncompliance Identified in FFY 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

In the FFY 2023 SPP/APR, the State must provide valid and reliable data for this indicator for FFY 2023 using a methodology that meets one of the two comparison methods as required by 34 C.F.R. § 300.170(a) and the Measurement Table.

Response to actions required in FFY 2022 SPP/APR

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

4A - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2023, and OSEP accepts that revision.

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

OSEP notes that the State's chosen methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspension and expulsion rates of children with IEPs that falls above the median of thresholds used by all States.

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 2023 SPP/APR, use data from 2022-2023), 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 2022-2023 school year, those 100 LEAs would have reported section 618 data in 2022-2023 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2023-2024, suspension/expulsion data from those 15 new LEAs would not be in the 2022-2023 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2022-2023 (which can be found in the FFY 2022 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.

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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	0.00%

FFY	2018	2019	2020	2021	2022
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	Not Valid and Reliable

Targets

FFY	2023	2024	2025
Target	0%	0%	0%

FFY 2023 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 children with disabilities, by race or ethnicity, enrolled in an LEA, and a minimum cell size of zero 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.

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 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 children 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 state 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.

Yes

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

Based on a review of Indicator 4B data using multiple methodologies and options of n and cell sizes, thresholds and SEA flexibilities, stakeholders met in March of 2024 to analyze the prior methodology. Stakeholders deemed the prior methodology not valid or reliable because it failed to reliably identify any LEA as significantly discrepant over the years. A key limitation was that the cell size was set at 10 and n size at 10, which eliminated a majority of LEAs from the calculation. Another limitation was that the threshold used for identifying outliers was set at approximately 17 times the state mean rate.

The new cell size of zero and n size of 20 included approximately 85 to 90 percent of the LEAs annually. The new threshold was changed to a threshold

of eight times the state's mean suspension rate for two consecutive years of data, with the respective state mean rate applied for each reporting year. This threshold was determined through extensive modeling of data from 2016 to 2022 and ensures that significant discrepant LEAs are more accurately identified. The new threshold was set at eight times the state mean rate; a value determined through extensive modeling of data from 2016 to 2022. This ensures that outlier LEAs are more accurately identified. The multiplier of eight was chosen due to the historical distribution of data in the SEA. Many LEAs have historically reported a cell size of zero, which lowers the state mean rate. Another issue arose when data was subcategorized by race; the state mean rate was higher for races with fewer students. To counteract this effect and avoid underestimating the true threshold, eight was selected as the appropriate multiplier. The baseline year selected by stakeholders for this methodology is FFY 2023, as reflected in the table above.

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.

19

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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
5	3	130	Not Valid and Reliable	0%	2.31%	N/A	N/A

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 SEA, 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 children 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 districts. For the reporting period FFY 2023, the state mean is 0.42, which will be updated annually.
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 2023 using 2022-2023 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, manifest determination procedures, and use of positive behavior intervention and supports. LEAs were required to provide evidence and supporting documentation with the self-assessment and submit an appropriate number of files for verification. 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 student 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 and the manifestation determination process. 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 section of the IEP.

If 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 a sample number of files from LEAs that exceeded the threshold for suspension/expulsion for greater than 10 days. The SEA 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. If available, the LEA submits additional file(s) for student(s) who had a manifest determination since the notification of noncompliance to ensure the updated compliant policies and procedures are being implemented.

Correction of Findings of Noncompliance Identified in FFY 2022

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

FFY 2022 Findings of Noncompliance Verified as Corrected

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

For the one LEA that was identified as having a significant discrepancy, the SEA reviewed the LEA's FFY 2021 policies, procedures, and practices relating to the manifest determination requirements, the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure they comply with meeting regulatory requirements. The SEA also interviewed LEA staff and selected files from different school 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 LEA is 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 2021 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, and manifest determination procedural safeguards. Upon review of updated data for FFY 2022 individual student files, the LEAs updated policies, procedures, and practices the SEA verified the LEA met the regulatory requirements with 100% compliance for this indicator. After review of individual student files related to the identified significant discrepancy, the SEA found the LEA is correctly implementing the regulatory requirements and correctly following policies, practices, and procedures regardless of race/ethnicity.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

In the FFY 2023 SPP/APR, the State must provide valid and reliable data for this indicator for FFY 2023 using a methodology that meets one of the two comparison methods as required by 34 C.F.R. § 300.170(a) and the Measurement Table.

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

Response to actions required in FFY 2022 SPP/APR

Specific actions the SEA took to provide valid and reliable data for this indicator for FFY 2023 is 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 is described above in the FFY 2022 Findings of Noncompliance Verified as Corrected section.

4B - OSEP Response

The State defines it's minimum n/cell size as, "The SEA's n size of 20 represents the number of children with disabilities enrolled in an LEA, and a minimum cell size of zero 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." However, the State also reports, "Stakeholders selected a minimum n size of 20 to protect privacy concerns for LEAs in which certain race and ethnic groups have less than 20 students with disabilities." The State must clarify this discrepancy.

Additionally, the State does not include a description of the review of policies, procedures, and practices relating to the development and implementation

of IEPs. The State must clarify whether the review of policies, procedures, and practices for LEAs with significant discrepancies includes a review relating to the development and implementation of IEPs, as required by 34 CFR §300.170(b).

OSEP notes that the State's chosen methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspension and expulsion rates of children with IEPs that falls above the median of thresholds used by all States.

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	2018	2019	2020	2021	2022
A	2020	Target >=	68.00%	68.00%	75.96%	75.96%	76.68%
A	75.96%	Data	72.08%	73.91%	75.96%	75.52%	76.45%
B	2020	Target <=	6.00%	6.00%	5.57%	5.57%	5.57%
B	5.57%	Data	5.57%	5.38%	5.57%	5.63%	5.58%
C	2020	Target <=	3.29%	3.29%	1.67%	1.67%	1.67%
C	1.67%	Data	1.99%	1.99%	1.67%	1.37%	1.41%

Targets

FFY	2023	2024	2025
Target A >=	77.18%	77.68%	78.68%
Target B <=	5.57%	5.50%	5.50%
Target C <=	1.67%	1.67%	1.65%

Targets: Description of Stakeholder Input

Stakeholder input was sought to determine whether or not the current targets should be maintained or adjusted for FFY 2023 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 2023.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	Total number of children with IEPs aged 5 (kindergarten) through 21	21,983

Source	Date	Description	Data
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	16,954
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	1,269
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	129
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	91
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	51

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 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	16,954	21,983	76.45%	77.18%	77.12%	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	1,269	21,983	5.58%	5.57%	5.77%	Did not meet target	Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	271	21,983	1.41%	1.67%	1.23%	Met target	No Slippage

Part	Reasons for slippage, if applicable
B	SD had a 0.19 slippage of students who are in a regular class less than 40%. The separate classroom environment did not meet the target and had slippage. The SEA disaggregated the data to determine why the percentage for 5B increased and slippage occurred. Forty-five fewer students would have needed to be served in the 5B environment for the target to have been met in FFY 2023; and 43 fewer students would have needed to have been served in 5B for slippage not to have occurred in FFY 2023. In examining why slippage occurred, the SEA noted that two of the largest districts in the state had the largest slippage from FFY 2022 to FFY 2023. One LEA went from a 5B rate of 10.9% in FFY 2022 to a rate of 12.7% in FFY 2023; and the other district went from a 5B rate of 4.0% in FFY 2022 to a rate of 5.3% in FFY 2023. These two districts accounted for an increase of 46 students being served in the 5B environment. The SEA followed up with these two LEAs and discovered that the one LEA created programs to address student needs within the LEA instead of utilizing day or residential placements. The other LEA had an increase in enrollment of students who had high needs.

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	2018	2019	2020	2021	2022
A	Target >=	21.65%	21.65%	21.76%	22.00%	22.75%
A	Data	23.33%	23.79%	21.76%	21.34%	19.26%
B	Target <=	16.16%	16.16%	18.15%	17.93%	17.60%
B	Data	14.85%	13.62%	18.15%	19.23%	18.39%
C	Target <=			1.67%	1.27%	1.26%
C	Data			1.27%	0.86%	1.47%

Targets: Description of Stakeholder Input

Stakeholder input was sought to determine whether or not the current targets should be maintained or adjusted for FFY 2023 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 2023.

South Dakota does not have state preschool available to all students and due to the ruralness regular early childhood programs are not available within all LEA boundaries. Stakeholders recommend training and providing LEAs with opportunities to learn strategies on how to provide inclusive services in rural areas.

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	2023	2024	2025
Target A >=	23.50%	24.25%	25.00%
Target B <=	17.17%	16.74%	16.00%

Inclusive Targets – 6C

FFY	2023	2024	2025
Target C <=	1.24%	1.22%	1.20%

Prepopulated Data

Data Source:

SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/31/2024

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	605	936	359	1,900
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	73	147	70	290
b1. Number of children attending separate special education class	151	168	83	402
b2. Number of children attending separate school	13	14	5	32
b3. Number of children attending residential facility	1	0	0	1
c1. Number of children receiving special education and related services in the home	14	8	3	25

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 2023 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 2022 Data	FFY 2023 Target	FFY 2023 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	290	1,900	19.26%	23.50%	15.26%	Did not meet target	Slippage
B. Separate special education class, separate school, or residential facility	435	1,900	18.39%	17.17%	22.89%	Did not meet target	Slippage
C. Home	25	1,900	1.47%	1.24%	1.32%	Did not meet 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 157 preschool students would have needed to be receiving their services in the regular early childhood program in order for the target to have been met in FFY 2023; and an additional 76 students would have needed to have been served in the regular early childhood program for slippage not to have occurred in FFY 2023.

In examining why slippage occurred, the SEA noted that the two largest LEAs in the state had large slippage from FFY 2022 to FFY 2023. One LEA went from a 6A rate of 49.7% in FFY 2022 to a rate of 11.4% in FFY 2023; and the other LEA went from a 6A rate of 42.9% in FFY 2022 to a rate of 33.7% in FFY 2023. These two LEAs accounted for a decrease of 104 students being served in the regular early childhood program.

The SEA followed up with these two LEAs and discovered one LEA had a decrease from FFY 2022 to FFY 2023 due to more students qualifying for related services and IEP teams determining the appropriate location for services was outside of the regular early childhood classroom. The other LEA's regular early childhood program within the LEA closed during the 2023-2024 school year and IEP teams determined services would be provided in the LEA's special education preschool setting.

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. One hundred and nine fewer preschool students would have needed to be served in the 6B environment for the target to have been met in FFY 2023; and 86 fewer students would have needed to have been served in 6B for slippage not to have occurred in FFY 2023.

In examining why slippage occurred, the SEA noted that the two largest LEAs in the state had large slippage from FFY 2022 to FFY 2023. One LEA went from a 6B rate of 6.0% in FFY 2022 to a rate of 45.7% in FFY 2023; and the other LEA went from a 6B rate of 8.1% in FFY 2022 to a rate of 11.8% in FFY 2023. These two LEAs accounted for an increase of 84 students being served in the 6B environment.

The SEA followed up with these two LEAs and discovered the majority of students who were attending a regular education program in 6A in FFY 2022 are now being served in another location. Also, incoming students with more related service needs are being served in separate settings and other locations.

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	2018	2019	2020	2021	2022
A1	2018	Target >=	79.35%	79.35%	67.11%	67.11%	67.35%
A1	67.11%	Data	67.11%	67.74%	70.02%	66.12%	62.92%

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

Targets

FFY	2023	2024	2025
Target A1 >=	67.58%	68.06%	69.00%
Target A2 >=	72.34%	72.90%	74.00%
Target B1 >=	57.53%	58.36%	60.00%
Target B2 >=	52.42%	52.95%	54.00%
Target C1 >=	59.26%	60.17%	62.00%
Target C2 >=	66.60%	67.07%	68.00%

Targets: Description of Stakeholder Input

Stakeholder input was sought to determine whether or not the current targets should be maintained or adjusted for FFY 2023 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the targets for Indicator 7 will be maintained for FFY 2023.

FFY 2023 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

834

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	14	1.68%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	103	12.35%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	91	10.91%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	116	13.91%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	510	61.15%

Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age	207	324	62.92%	67.58%	63.89%	Did not meet target	No Slippage

Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
or exited the program. *Calculation:(c+d)/(a+b+c+d)*							
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	626	834	73.25%	72.34%	75.06%	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	32	3.84%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	166	19.90%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	125	14.99%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	164	19.66%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	347	41.61%

Outcome B	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	289	487	55.56%	57.53%	59.34%	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. *Calculation: (d+e)/(a+b+c+d+e)*	511	834	56.05%	52.42%	61.27%	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	33	3.96%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	153	18.35%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	120	14.39%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	113	13.55%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	415	49.76%

Outcome C	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	233	419	51.03%	59.26%	55.61%	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. *Calculation: (d+e)/(a+b+c+d+e)*	528	834	64.44%	66.60%	63.31%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
C2	The C2 score did not meet the target and had slippage. The SEA disaggregated the data to determine why the percentage for C2 decreased and slippage occurred. Only 28 more students would have been needed for the target to have been met in FFY 2023; and 10 more students would have been needed for slippage not to have occurred in FFY 2023. In examining why slippage occurred, the SEA noted that of the 20 LEAs that had at least 10 preschool students with scores for Indicator 7, half increased their C2 scores, and half decreased their C2 scores. When examining the scores of the 10 LEAs with a decrease in their C2 scores, four of them had a decrease greater than 10 percentage points from FFY 2022 to FFY 2023. These four could account for the slippage. However, due to small numbers of preschool students with disabilities at these LEAs, caution must be exercised in trying to determine if slippage is due to these LEAs. Another group of LEAs (selected in some other way) could also account for the slippage of only 10 students.

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."

As outlined by the 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 is 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 2023 SPP/APR, compare the FFY 2023 response rate to the FFY 2022 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 to determine if the current target should be maintained or adjusted for FFY 2023 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the target for Indicator 8 will be maintained for FFY 2023. A new survey was implemented for the 2024-2025 school year, FFY 2024 targets will be reviewed and revised by stakeholders.

LEA stakeholders expressed that SEA trainings have contributed to LEA staff understanding and efforts in distributing the survey. The trainings covered how to improve overall parent involvement in the IEP process, increase survey response rate, and utilize LEA survey results. A flyer developed by the SEA also helped LEA staff by providing a script for LEA staff to read to parents about why the parents' input is valuable in both LEA and SEA data collection. The SEA's increased monitoring of LEA response rate during the school year, as well as the SEA increasing the printed surveys from two languages to 12 languages, contributed to a 2.88% statewide response rate increase.

The SEA gathered parent and LEA stakeholder feedback on the proposed changes to the 2024-2025 school year survey. Parent stakeholders rejected sampling in data collection and requested continued statewide census. The new survey distributed, in the summer of 2024, was edited to have parent-friendly language, one less question, a "School" option to assist LEAs in monitoring response rates at their local level, and a comment box specifying that parents can give feedback for SEA improvement strategies. The SEA increased the required LEA response rate from 10% to 20%.

Historical Data

Baseline Year	Baseline Data
2012	77.30%

FFY	2018	2019	2020	2021	2022

Target >=	79.00%	79.00%	81.00%	81.00%	81.50%
Data	87.77%	87.74%	86.20%	87.28%	88.24%

Targets

FFY	2023	2024	2025
Target >=	82.00%	83.00%	85.00%

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
6,120	6,941	88.24%	82.00%	88.17%	Met target	No Slippage

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

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 12 different languages, including English and Spanish. 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. Therefore, the combined data from school age and preschool surveys is valid and reliable.

The number of parents to whom the surveys were distributed.

23,822

Percentage of respondent parents

29.14%

Response Rate

FFY	2022	2023
Response Rate	26.26%	29.14%

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 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 consists of 65% of Whites; however, the respondents consist of 71% 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 rate, 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 of disability category, all disability categories represented in the respondents were within +/- 3% of their population. Therefore, the demographics of the students with disabilities for whom parents responded are representative of the 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 students with disabilities in terms of geographic distribution, there is still one difference in response rate by race/ethnicity, which suggests the demographics of the students with disabilities for whom parents responded 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

In the fall of 2023, the SEA contacted three LEAs with low response rates that were impacting the representativeness to address how the LEAs low response rate affects representativeness of race/ethnicity, both for the LEA and the SEA. The SEA required the three LEAs to submit documentation on what steps the LEAs will take to increase representativeness of race/ethnicity on the 2023-2024 parent survey using a reflection form. The SEA monitored the demographics of the survey responses of the three LEAs by doing real-time data pulls of the LEA survey response data three times throughout the 2023-2024 school year. The real-time data, provided to the LEAs, supported their efforts to increase representativeness of race/ethnicity. The SEA also monitored the response rates in all LEAs with a higher population of American Indian students. The three LEAs monitored in 2023-2024 had response rates over 15% which is an increase from their response rates that were below 10% on the 2022-2023 school year parent survey. The increase in these response rates helped decrease the difference in the over-representativeness of White students in the 2023-2024 data compared to the 2022-2023 data.

After analyzing the FFY 2023 data, the SEA is implementing additional strategies to ensure representativeness of FFY 2024 response data. In the fall of 2024, the SEA provided further training to LEAs on the importance of representativeness of race/ethnicity during LEA survey collection, and the SEA increased the required LEA response rate from 10% to 20%. The SEA also increased targeted monitoring by analyzing the data of LEAs with high populations of American Indian students. The SEA notified those LEAs if the LEA's survey response rate underrepresented the American Indian students in their LEA. LEAs on and near reservations with nearly 100% American Indian populations were notified of their LEA response rate in comparison to the statewide 29.14% response rate; those LEAs were advised how their response rate greatly contributes to the statewide representativeness of race/ethnicity. The SEA will continue these targeted activities in future school years to ensure 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 26.26% in FFY 2022 to 29.14% in FFY 2023. This success is likely because of the SEA's increased training and monitoring efforts. The SEA completed three real-time data pulls of response rate on LEAs who were below target on the prior school year's parent survey. In the Spring of 2024, the SEA completed a statewide LEA response rate real-time data pull, and the SEA notified any LEA that was under the 10% response rate target. The SEA provided a webinar on how to analyze LEA response rate data for demographic representativeness, as well as which methods are most effective at increasing overall response rates. The webinar was recorded and made available to LEA staff on demand. The SEA created a flyer to provide a script for LEA staff to read to parents about why the parents' input is valuable in both LEA and SEA data collection. The SEA also worked with SDPC to announce and promote the parent survey to all parents, including parents who may prefer not to work directly with their LEA on survey completion or who may be dissatisfied and less responsive. This advertisement through SDPC helped ensure that all parents are aware of their opportunity to respond to the survey.

For the 2024-2025 school year, the above strategies will continue. In addition, the SEA required response rate was increased from 10% to 20%. An additional "School" option was added to the survey so LEAs can locally monitor and target the response rates at their individual school buildings. LEAs on and near reservations with nearly 100% American Indian populations were notified of their LEA response rate in comparison to the statewide 29.14% response rate; those LEAs were advised how their response rate greatly contributes to the statewide representativeness of race/ethnicity. 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 29.14%, which is high for a survey of this nature.

Second, the representativeness of the responses was examined. No differences were found by disability category. One difference was found in the respondent composition by race/ethnicity, indicating overrepresentation in the White group. However, the actual responses of the White group compared to all other race/ethnicity groups showed very few differences in the overall parent involvement percentage. Further, 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 those parents who do not immediately respond are different in some meaningful way than those who respond early in the school year. When examining results within LEAs, there are no differences between parents who respond early in the school year compared to those who respond later in the school year.

Based on the above three analysis of response rate, no nonresponse bias was identified.

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
If yes, provide a copy of the survey.	

Provide additional information about this indicator (optional)

8 - Prior FFY Required Actions

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

Response to actions required in FFY 2022 SPP/APR

Specific actions the SEA took to address representativeness are described above in the demographics of the children for whom parents are responding section.

8 - OSEP Response

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 2023 reporting period (i.e., after June 30, 2024).

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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	2018	2019	2020	2021	2022
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2023	2024	2025
Target	0%	0%	0%

FFY 2023 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.

110

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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1	0	38	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 FS 002) 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. 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 these 148 LEAs, 38 met the minimum cell and N size requirements at least one time for a Final 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.

When a LEA meets the methodology for disproportionate representation, the SEA conducts a review of the LEA's policies, procedures, and practices along with a compliance review. A representative sample of files that includes the identified racial/ethnic category along with files from the comparison group are reviewed. The SEA also conducts interviews with LEA staff to determine the appropriate implementation of the LEA's identification and eligibility process and procedures. If the LEA followed policies and procedures for determining eligibility for the disability category across the racial/ethnic group, then the LEA is identified as having appropriate identification procedures. If the policies and procedures were not appropriately followed or implemented, then the LEA would receive a CAP in the area identified through the review.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 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 2022 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 2023 reporting period (i.e., after June 30, 2024).

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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	2018	2019	2020	2021	2022
Target	0%	0%	0%	0%	0%

| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

Targets

FFY	2023	2024	2025
Target	0%	0%	0%

FFY 2023 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.

130

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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1	0	18	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 (FS 002) and Fall Enrollment (Membership File FS 052) 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 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. 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). 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 these 148 LEAs, 18 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.

When a LEA meets the methodology for disproportionate representation, the SEA conducts a review of the LEA's policies, procedures, and practices along with a compliance review. A representative sample of files that includes the identified racial/ethnic category along with files from the comparison group are reviewed. The SEA also conducts interviews with LEA staff to determine the appropriate implementation of identification and eligibility policies and procedures. If the LEA followed policies and procedures for the eligibility of the disability category and across the racial/ethnic group, then the LEA is identified as having appropriate identification procedures. If policies and procedures were not appropriately followed or implemented, 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 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 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 2022 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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	99.94%	99.85%	99.67%	99.91%	99.39%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
5,746	5,732	99.39%	100%	99.76%	Did not meet target	No Slippage

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

14

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 2023, nine LEAs had a total of 14 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 isolated procedural errors as noted below.

1) Permission to extend the timeline was not obtained for allowable circumstances, such as awaiting external evaluations and parent protocols received after timeline:
One evaluation exceeded the timeline by one day
Four evaluations exceeded the timeline by three days
One evaluation exceeded by timeline by seven days
One evaluation exceeded by timeline by fourteen days

2) The other procedural errors were caused by miscounting the 25-day timeline and scheduling evaluations after the timeline:
One evaluation exceeded the timeline by one day
One evaluation exceeded the timeline by two days
Two evaluations exceeded the timeline by three days
One evaluation exceeded the timeline by four days
One evaluation exceeded the timeline by five days
One evaluation exceeded the timeline by ten 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, unless alternative timelines are mutually agreed to by the school administration and the parents in accordance with ARSD 24:05:25:03-Preplacement evaluation.

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 initial evaluations conducted within the LEA. LEAs have the option to utilize a SEA developed spreadsheet to record initial evaluations conducted throughout the reporting year and subsequently uploaded to the SEA database or directly enter student data into the SEA database. LEAs complete the sign-off process by August 1 of each year.

The SEA Part B 619 Coordinator conducts an analysis of LEA submitted data. This involves addressing data quality issues, confirming findings of noncompliance identified, and offering technical assistance to LEAs.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
33	33	0	0

FFY 2022 Findings of Noncompliance Verified as Corrected

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

The SEA issued the 12 LEAs, with a total of 33 individual student files out of compliance with Indicator 11 requirements, a CAP outlining which individual student files were out of compliance, the rules and regulations related to the noncompliance, and corrective actions needed to correct the noncompliance and dates the corrective actions that must be completed within the one-year timeline. The SEA determined the findings of noncompliance were isolated procedural errors due to the low number of incidences per LEA.

The SEA collected and reviewed documentation to verify each LEA was correctly implementing the regulatory requirements, including the following:

1) Submission of the 33 individual student files to ensure the initial evaluation had been completed, eligibility had been determined, and the IEP had been developed and implemented even though it was not completed within the 25 school day timeline. Documentation submitted by the LEA included the PPWN consent for evaluation and the eligibility determination.

2) Documentation showing the LEA reviewed and trained special education staff on the LEA policies and procedures regarding Indicator 11: Child Find, Indicator 11 regulatory requirements, data collection procedures, calculating the 25 school day timeline, procedures for documenting the date consent for evaluation was received, and procedures for requesting an extension of the timeline prior to exceeding the timeline.

3) LEA submission of quarterly data through the SEA data system during the subsequent FFY to demonstrate continued compliance. The SEA reviewed the additional data submission(s) including all students who received an initial evaluation. The SEA verified the 12 LEAs continued to correctly implement the requirements with 100% compliance.

Describe how the State verified that each _individual case_ of noncompliance was corrected

The SEA collected and reviewed each of the 33 individual student files that were identified as out of compliance, including the PPWN consent and the eligibility report. The SEA verified that all 33 individual student files received a full comprehensive evaluation and eligibility was verified through the desk audit that each individual was 100% compliant in accordance with OSEP Memo 23-01 within one year of the finding.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 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 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

Specific actions the SEA took to verify the LEAs were correctly implementing the regulatory requirements and had corrected each individual case of noncompliance is described above in the FFY 2022 Findings of Noncompliance Verified as Corrected and Verification of individual case of noncompliance was corrected sections.

11 - OSEP Response

The State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2022 because it did not report that it verified correction of those findings, consistent with OSEP QA 23-01. Specifically, the State reported 33 Findings of Noncompliance Verified as Corrected Within One Year in the Correction of Findings of Noncompliance Identified in FFY 2022 data table. However, the State also reported, "The three LEAs who did not show continued compliance during the subsequent FFY 2023 data review and were determined to be out of compliance two consecutive years and were required to submit an additional data submission to show compliance with Indicator 11 regulatory requirements." Therefore, the State did not report that that it verified that each LEA with noncompliance identified in 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.

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	96.65%	Not Valid and Reliable	99.23%	97.79%	99.59%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	692
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	191
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	457
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.	14
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	30
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 2022 Data	FFY 2023 Target	FFY 2023 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.	457	457	99.59%	100%	100.00%	Met target	No Slippage

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

0

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.

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 into the SEA database or directly enter student data. LEAs complete the sign-off process by September 1 of each year.

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, addressing data quality issues, confirming findings of noncompliance identified, and offering technical assistance to LEAs.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2022

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

FFY 2022 Findings of Noncompliance Verified as Corrected

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

The SEA issued the two LEAs, with a total of two findings of noncompliance with Indicator 12 requirements a CAP outlining which individual student files were out of compliance, the rules and regulations related to noncompliance, and corrective actions needed to correct the noncompliance and dates the corrective actions must be completed within the one-year timeline. The SEA determined the findings of noncompliance were isolated procedural errors due to the low number of incidences per LEA.

The SEA collected and reviewed documentation to verify each LEA was correctly implementing the regulatory requirements, including the following:

1) Submission of the two individual student files to ensure the initial evaluation has been completed, eligibility had been determined, and the IEP had been developed and implemented even though completed beyond the student's 3rd birthday. Documentation submitted by the LEA included the referral, PPWN and the eligibility determination.

2) Documentation showing all LEA staff involved in implementing requirements for Part C to Part B early childhood transition, data collection requirements and implementing policies and procedures for transitioning students from Part C to Part B services were trained. Data submitted included

the training materials or agenda and sign-in sheets.

3) Submission of the LEAs updated data through the SEA database for FFY 2023 Indicator 12 submission to show continued compliance. The SEA reviewed the FFY 2023 data submission (subsequent data) including all students who received an initial transition evaluation within the reporting period and determined both LEAs continued to correctly implement the regulatory requirements with 100% compliance.

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

The SEA collected and reviewed the two individual student files that were identified as out of compliance, including the referral, PPWN consent and the eligibility report. The SEA verified that the two individual student files received a full comprehensive evaluation, eligibility was determined, and an IEP was implemented if student was eligible through the desk audit. The SEA verified 100% compliance in meeting the regulatory requirements by the two LEAs.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2021	1	1	0

FFY 2021

Findings of Noncompliance Verified as Corrected

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

The one LEA with continued noncompliance due to the updated data submission showing one out of five individual student files not meeting the regulatory requirements was issued a CAP requiring additional training and updated data submissions showing 100% compliance in meeting the regulatory requirements.

The SEA collected and reviewed additional updated documentation submitted by the LEA, including the following:

1) Submission of the one individual student file to ensure the initial evaluation had been completed, eligibility had been determined, and the IEP had been developed and implemented. Documentation submitted by the LEA included the referral, PPWN and the eligibility determination.

2) Documentation showing all LEA staff involved in implementing requirements for Part C to Part B early childhood transition, data collection requirements and implementing policies and procedures for transitioning students from Part C to Part B services were trained. Data submitted included the training materials or agenda and sign-in sheets.

3) Submission of the LEAs updated transition evaluation data for all students evaluated between July 1, 2023 and January 28, 2024.

The SEA verified 100% compliance in implementing the regulatory requirements by the one LEA.

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

The SEA collected and reviewed the one individual finding of noncompliance that was identified as out of compliance, including the referral, PPWN consent and the eligibility report. The SEA verified that the individual student received a full comprehensive evaluation, eligibility was determined, and an IEP was implemented if student was eligible. The SEA verified 100% compliance in meeting the regulatory requirements by the one LEAs.

12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2021 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and the LEA with remaining noncompliance identified in FFY 2021: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

Specific actions the SEA took to verify the LEAs were correctly implementing the regulatory requirements and had corrected each individual case of noncompliance is described above in the FFY 2022 Findings of Noncompliance Verified as Corrected section.

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	83.97%	87.18%	66.41%	79.39%	62.94%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
110	162	62.94%	100%	67.90%	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 five-year cyclical schedule as accountability reviews. File selection is based on the number of case managers who oversee transition age IEPs, out-of-district placements, and ensuring each of the disability categories is represented for transition age students in the LEA. A minimum of two files per case manager are reviewed to show whether or not the LEA is meeting regulatory requirements. 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 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
63	63	0	0

FFY 2022 Findings of Noncompliance Verified as Corrected

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

The SEA identified 18 LEAs that were out of compliance in FFY 2022 using the Indicator 13 checklist. The issues can be classified as the IEP documentation not meeting regulatory requirements or procedural violations related to obtaining permission to invite outside agency.

IEP documentation noncompliance occurs when the LEA did not include transition assessments, document measurable post-secondary goals appropriately, post-secondary goals updated annually, transition services and activities, and/or complete record of course of study through completion of secondary education. The SEA verified correction of the LEA's individual findings of noncompliance through a review of updated documentation. The SEA additionally reviewed subsequent files submitted and/or updated written procedures to demonstrate continued compliance for the LEAs who had noncompliance related to IEP documentation.

LEAs with noncompliance related to the consent to invite an outside agency were required to participate in transition IEP training, review or update existing written policies and procedures that align with regulatory requirements. LEAs were also required to submit an additional individual student's file containing consent to invite an outside agency document, meeting notice, and IEP demonstrating compliance. The SEA verified the LEAs participated in all required training, written policies and procedures aligned to regulatory requirements, and subsequent files demonstrated continued compliance 100% with meeting the regulatory requirements.

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

The SEA verified that all 63 individual files of noncompliance in FFY 2022 met 100% compliance. The SEA reviewed the updated documentation submitted by the LEAs to verify correction of individual student files, each LEA's updated policies procedures and practices and subsequent individual student files. The SEA verified the 63 individual cases of noncompliance were corrected and the LEA was meeting regulatory requirements.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

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

Response to actions required in FFY 2022 SPP/APR

Specific actions the SEA took to verify the LEAs were correctly implementing the regulatory requirements and corrected each individual case of noncompliance is described above in the FFY 2022 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 = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

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

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

Instructions

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

Collect data by September 2024 on students who left school during 2022-2023, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2022-2023 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 2023 SPP/APR, compare the FFY 2023 response rate to the FFY 2022 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	2018	2019	2020	2021	2022
A	2020	Target >=	15.50%	15.50%	11.04%	11.50%	12.50%
A	11.04%	Data	16.93%	22.96%	11.04%	13.06%	17.06%
B	2020	Target >=	68.50%	68.50%	61.96%	63.00%	64.50%
B	61.96%	Data	70.61%	66.35%	61.96%	74.91%	69.71%
C	2020	Target >=	82.00%	82.00%	77.30%	78.00%	79.00%
C	77.30%	Data	82.11%	80.82%	77.30%	82.13%	81.47%

FFY 2021 Targets

FFY	2023	2024	2025
Target A >=	14.00%	15.50%	17.00%
Target B >=	66.00%	67.50%	69.50%
Target C >=	80.00%	81.00%	82.50%

Targets: Description of Stakeholder Input

Stakeholder input was sought to determine whether the current targets should be maintained or adjusted for FFY 2023 and to obtain feedback on improvement strategies. Following consideration of the data and SDAPCD discussion, it was determined that the target for Indicator 14 will be maintained for FFY 2023.

Suggested stakeholder strategies included providing LEAs with a link to a follow up survey, encouraging LEAs to engage in collecting survey data on leavers and sharing the effectiveness of the online survey link.

FFY 2023 SPP/APR Data

Total number of targeted youth in the sample or census	872
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	353
Response Rate	40.48%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	58
2. Number of respondent youth who competitively employed within one year of leaving high school	192
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)	5
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).	28

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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Enrolled in higher education (1)	58	353	17.06%	14.00%	16.43%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	250	353	69.71%	66.00%	70.82%	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)	283	353	81.47%	80.00%	80.17%	Met 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	2022	2023
Response Rate	40.96%	40.48%

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

+/- 3.00% discrepancy in the proportion of responders compared to the target group was used.

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.

A total of 872 students had IEPs in effect at the time they exited the K-12 system during the 2022-2023 school year. Data was collected from 353 of the leavers, resulting in a response rate of 40.48%, which is 0.48 decrease from previous year. The SEA used the National Post School Outcomes (NPSO) Response Rate Calculator to assess the representativeness of the respondent group in the following areas: 1) Race/Ethnicity, 2) Disability and 3) Leaver Type to determine if respondent group was representative of the total population of leavers for the 2022-2023 school year. (The NPSO Response Rate Calculator identifies differences between the Respondent Group and the population of more than +/-3.00% as significant. Negative differences indicate under-representation, while positive differences indicate over-representation.)

Analysis by race/ethnicity, indicates that the American Indian group is over-represented (17.00% of the population is American Indian, but 20.10% of the respondents are American Indian). All other racial/ethnic groups are within the +/- 3.00%.

Analysis by disability category shows three differences: (1) students with an Emotional/Behavioral Disability (EBD) are over-represented (10.21% of the population is EBD, but 13.31% of the respondents are EBD); (2) students with a Low Incidence Disability (LI) are under-represented (38.07% of the population is LI, but 34.84% of the respondents are LI); and (3) students with Other Health Impairments (OHI) are under-represented (20.64% of the population is OHI, but 17% of the respondents are OHI).

 Analysis by Leaver Type (e.g., students who graduated, dropped out, and aged out) showed no significant differences by the +/- 3.00% metric.

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.

The SEA will review LEA data prior to the end of the data collection period, to identify LEAs with a low response rate by race and disability category. The SEA will reach out to each LEA with low response rates in these two categories to request the LEAs assistance with contacting the leavers to improve their response rate. Another strategy that has proven to be effective and will be continued includes providing information to LEAs during the monthly special education webinars, during RDA data retreats, and at conferences to show historical data that supports increased response rates when LEAs contact leavers and collect survey data.

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 will provide training on how LEAs can acquaint students with the survey prior to exiting. The SEA will provide a postcard template for LEAs to send to students and their families one year after exiting as a reminder that the survey will be sent and when to expect it. The SEA will continue to present to LEAs on the importance of post-school outcomes survey collection through the monthly special education webinars and continue recruiting LEAs to contact and collect their leaver data. An online training will be available to LEA staff who are collecting survey data on interview procedures and entering survey data.

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 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, is the overall response rate. The higher the response rate, the less likely nonresponse bias will occur. The SEA's response rate is 40.48%, which is noted as quite high for this type of collection.

Second, is the representativeness of the responses. There are some differences in respondent composition by race/ethnicity and disability. In terms of disability, there are not a lot of significant differences in outcome scores per disability category. However, respondents representing the race/ethnicity group of American Indian are less likely to meet the target than students representing other race/ethnicity groups, which suggests nonresponse bias might be present in the results.

The SEA promotes responses from a broad cross-section of youth by continuing to encourage LEAs to call leavers. This is followed up by personal invitations to LEAs for those in the underrepresented areas to call their students. Postcard reminders will continue to be used to remind leavers of the upcoming survey. The SEA contacts LEAs in August with hard-to-find leavers to enlist the LEA's help. Providing multiple modes of responding (e.g., email, text, phone interviews) not only helps the response rate but also helps reduce potential nonresponse bias.

Given the differences in representativeness and its impact on the results, the SEA concludes that nonresponse bias might be present.

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 2023 SPP/APR, the State must report whether the FFY 2023 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2022 SPP/APR

The SEA described representativeness of the FFY 2023 data and provided actions to address areas identified that may be overrepresented or underrepresented.

Specific actions the SEA took to address representativeness are described under the state'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

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

Measurement

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

Instructions

Sampling is not allowed.

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

States are not required to establish 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 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1 Number of resolution sessions	3
SY 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1(a) Number resolution sessions resolved through settlement agreements	1

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

NO

Targets: Description of Stakeholder Input

Indicator 15 data was presented to the SDAPCD in October 2024. Stakeholders provided input that parents have difficulties understanding their parent rights and the dispute process is overwhelming. The SEA will work with the Parent Training Center to develop training related to parent rights and dispute resolution. Additional training and support will be provided to LEAs on conflict resolution, IEP facilitation, and effective communication strategies.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2018	2019	2020	2021	2022
Target >=					
Data	0.00%	0.00%	100.00%	33.33%	0.00%

Targets

FFY	2023	2024	2025
Target >=			

FFY 2023 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
1	3	0.00%		33.33%	N/A	N/A

Provide additional information about this indicator (optional)

The SEA had less than 10 resolutions for FFY 2023, therefore no baselines or targets have been set. The number of requests received was average for SD.

15 - Prior FFY Required Actions

None

15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2023. 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

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

Measurement

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

Instructions

Sampling is not allowed.

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

States are not required to establish 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 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1 Mediations held	10
SY 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1.a.i Mediations agreements related to due process complaints	2
SY 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1.b.i Mediations agreements not related to due process complaints	8

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 October 2024. Stakeholders provided input that parents have difficulties understanding their parent rights and the dispute process is overwhelming. The SEA will work with the Parent Training Center to develop training related to parent rights and dispute resolution. Additional training and support will be provided to LEAs on conflict resolution, IEP facilitation, and effective communication strategies.

Historical Data

Baseline Year	Baseline Data
2021	90.00%

FFY	2018	2019	2020	2021	2022
Target >=				90.00%	91.00%
Data	100.00%	100.00%	33.33%	90.00%	100.00%

Targets

FFY	2023	2024	2025
Target >=	91.00%	91.00%	91.00%

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
2	8	10	100.00%	91.00%	100.00%	Met target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions
None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

- Data Analysis;

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

- State-identified Measurable Result(s) for Children with Disabilities;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

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

- Infrastructure Development;

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

- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B.   Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2024). 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 2023 APR, report on anticipated outcomes to be obtained during FFY 2024, i.e., July 1, 2024-June 30, 2025).

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 2023 APR, report on activities it intends to implement in FFY 2024, i.e., July 1, 2024-June 30, 2025) 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 (SLD), other health impairment (OHI), or speech 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 26 schools from 13 LEAs that participated in the state MTSS-RtI initiative in the 2023-24 school year. LEAs range in size from small (student enrollment of less than 200) to large (student enrollment of greater than 600) and are located mainly on the eastern side of the state. Applications are made available in December for all LEAs to apply to become part of the MTSS initiative. Applications received by the SEA are reviewed to ensure LEA commitment to fidelity of implementation. LEAs selected to participate are notified in the spring and begin training for Tier 1 MTSS implementation during the summer of that year. Previous SSIP reporting years included data from the LEAs participating in the SD State Personnel Development Grant (SPDG). When the SD SPDG ended in 2023, the SEA no longer had access to short-term outcome data, therefore the long-term outcome data from the regular statewide assessment from the five participating LEAs were no longer included in the SD calculations for the 2023-2024 SSIP.

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

NO

Please provide a link to the current theory of action.

https://doe.sd.gov/sped/documents/TheoryofAction.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	2023	2024	2025
Target A	Data must be greater than or equal to the target	19.56%	20.81%	23.31%
Target B	Data must be greater than or equal to the target	19.37%	20.62%	23.12%

FFY 2023 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-language impairment, or other health impairment	< 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-language impairment, or other health impairment	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	62	330	17.70%	19.56%	18.79%	Did not meet target	No Slippage
B	48	255	17.71%	19.37%	18.82%	Did not meet target	No Slippage

Provide the data source for the FFY 2023 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 impairments, and (4) students with speech language impairments. 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 APR reporting purposes. The SEA will continue to track these three groups individually given their differing needs, but will also report them as one on the SPP. The following data shows a comparison of the spring 2023 reading proficiency rate to the spring 2024 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 2023 to spring 2024:
-All Students with Disabilities (SWD) (17.70% to 18.79%)
-Other Health Impairment (OHI) (8.00% to 16.67%)
-Specific Learning Disability (SLD) (7.19% to 9.86%)
-Speech Language Impairment (47.18% to 45.28%)

Three groups showed an increase in proficiency rates. One group (Speech language Impairment) showed a decrease in proficiency rates. It is important to note that the schools and students included in each of the spring 2023 cohort and the spring 2024 cohort were slightly different with some schools in spring 2023 no longer participating in spring 2024 which may impact comparability.

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.

Benchmark data from the 2023-2024 school year for participating LEAs showed the percentage of all students with disabilities and the subset of students with disabilities (i.e., SLD, OHI, and speech-language impairment) scoring at benchmark from fall 2023 to spring 2024 stayed the same or increased at each grade (K-5).

The percentage of all students with disabilities scoring at benchmark in fall 2023 and spring 2024:

Grades K-5: increased (37.28% to 45.61%)
Kindergarten: increased (77.78% to 92.59%)
Grade 1: increased (54.55% to 60.61%)
Grade 2: increased (23.68% to 42.11%)
Grade 3: increased (28.26% to 32.61%)
Grade 4: stayed the same (27.78% to 27.78%)
Grade 5: increased (30.00% to 45.61%)

The percentage of students with SLD, OHI, and speech-language impairment scoring at benchmark in fall 2023 and spring 2024:

Grades K-5: increased (38.10% to 46.03%)
Kindergarten: increased (72.22% to 94.44%)
Grade 1: stayed the same (61.54% to 61.54%)
Grade 2: increased (25.0% to 43.75%)
Grade 3: increased (33.33% to 35.90%)
Grade 4: stayed the same (28.26% to 28.26%)
Grade 5: increased (32.14% to 46.43%)

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 2023-2024 school year can be viewed at https://doe.sd.gov/sped/documents/SSIP-MTSS-EvalPlan-23.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-23.pdf

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

If yes, provide a description of the changes and updates to the evaluation plan.
Due to the SD SPDG concluding in September 2023, stakeholders discussed changes needed from the 2023-2024 school year evaluation plan to the 2024-2025 school year evaluation plan. Stakeholders determined that since the SEA would no longer be collecting short-term data outcomes for LEAs previously participating in the SD SPDG, they should be removed from the data set and long-term outcomes.

Additionally, stakeholders recommended removing the following measures from the evaluation plan for the 2024-2025 school year: Observational Checklist for High Quality Professional Development (HQPD), Intervention Tracking Form, Coaching Activities Tracking System, and Read to Succeed Family Literacy Training Evaluations.

If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.
To reduce paperwork burdens, the HQPD and Coaching Activities Tracking System measures were removed. Feedback from teachers on the Intervention Tracking Form indicated that they were unsure what to track and which students are Tier 2/Tier 3 since instruction is fluid. The Read to Succeed Family Literacy Training Evaluations were removed because the trainings are no longer offered. An alternative to this family literacy training is being developed and will be available for LEAs to access for the 2025-2026 school year. An evaluation piece will be added to the SEA's evaluation plan at that time.

Provide a summary of each infrastructure improvement strategy implemented in the reporting period:
1) MTSS/Data-Driven Decision Making
2) Literacy/Instruction
3) Coaching
4) Family Engagement

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

MTSS/Data-Driven Decision Making
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 (https://doe.sd.gov/sped/documents/ReadWorkbook.pdf). 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.

Literacy/Instruction
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. LEAs that are new to the initiative receive on-site training by a trained coordinator or coach. 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.

Coaching
LEAs in years two through four of MTSS implementation continue to receive coaching support from their respective LEA coaches. Coaches conduct fall walkthroughs to collect data and develop a coaching plan to provide differentiated coaching cycles to teachers. Coaching cycles include a pre-conference, lesson observation or modeling, and debrief. Coaches continue to receive ongoing training and support through monthly meetings and quarterly training. The meetings and training provide continuous support on collecting coaching data, implementing coaching cycles, and working through challenging conversations and situations.

Family Engagement
Through the MTSS Initiative, the SEA provides LEAs with information on the literacy module and literacy tips to share with parents during MTSS trainings and on-site visits. Module one focuses on phonological awareness and phonics skills. Module two focuses on reading fluency, vocabulary, and comprehension. These modules provide a basic understanding of foundational literacy skills and activities that families can do at home to build literacy skills. The SEA provides monthly family literacy tips to LEAs that can be included in newsletters, websites, and social media.

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.

MTSS/Data-Driven Decision Making
LEAs participated in 26 trainings on data-driven decision-making strategies. Training evaluations were completed by 183 participants, including general education teachers, special education teachers, and school administrators. Of the respondents, 98% indicated that the trainings were useful, 98% stated that their work-related knowledge increased, and 95% stated that the workshops will positively impact students.

These short-term outcomes are related to both the data and professional development area of a systems framework. LEAs who participate in data-driven decision-making have a clear understanding of the importance of collecting and analyzing high-quality data. Providing professional development around MTSS and data-driven decision-making supports student, grade, and systems level change at the LEA level and is necessary for the sustainability of systems improvement efforts.

Literacy/Instruction
Instructional coaches and state trainers provided 11 literacy or instruction trainings to participating LEAs. Training evaluations were completed by 25 participants, including general education teachers, special education teachers, and school administrators. Of the survey respondents, 96% indicated that the trainings were useful, 96% stated that their work-related knowledge increased, and 96% stated that the workshops will positively impact students.

These short-term outcomes are related to the professional development area of a systems framework. Providing foundational literacy and evidence-based instruction professional development supports system change by improving instructional skills for teachers. This leads to a positive impact on student outcomes. Professional development in the areas of literacy and instruction is necessary for both achievement of the SiMR and sustainability of systems improvement efforts.

Coaching
A total of 29 staff members (i.e., general education teachers, special education teachers, interventionists) from participating LEAs completed a coaching survey. Of the survey respondents, 93% stated that they were satisfied or very satisfied with support received from the coach. Coaches at participating LEAs completed 1,305 coaching activities during the 2023-24 school year. The primary focus of the coaching activities includes intervention, explicit instructions, and phonics.

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.

Family Engagement
During the 2023-24 school year, the SEA shared access to a Read to Succeed Online Family Literacy training to families of both participating and non-participating LEAs. The asynchronous training modules were accessed by unique participants across the state.

The Family Engagement Survey was completed by 74 family members and 25 educators. Of the 74 family members and 25 educators, 76% of family members and 76% educators reported that they are engaged in the school and 55% of family members and 83% of educators reported that they are involved in literacy activities with their children.

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.

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:

MTSS/Data-Driven Decision Making
The SEA will 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 continually improve student outcomes. The SEA anticipates LEAs establishing PLCs will improve communication within the LEAs and help develop stronger teams working together to utilize data for decision making.

Literacy/Instruction
The SEA 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 has received a federal literacy grant that will be open for all LEAs. This grant will focus on implementing evidence-based literacy programs and systems and can be used to enhance current MTSS implementation. LEAs currently have the opportunity to apply for Elevating Literacy Across South Dakota grants to improve literacy within the LEA. 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 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.

Coaching
The SEA will partner with other DOE divisions to provide instructional coaching training. The DOE will offer a summer 2025 coach training featuring resources from Jim Knight. This training will be offered to all instructional coaches and school leaders in the state. The SEA anticipates that an increase in access to instructional coaching for educators will lead to improved instructional practices in LEAs across the state.

Family Engagement
The SEA anticipates that providing ongoing family literacy training and support to LEAs 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 schools to provide parents in 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 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 2023-2024 school year state-level data dashboard report can be found at https://doe.sd.gov/sped/documents/MTSSDashboardReport-22-23.pdf

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

Foundational Literacy Training
Explicit Instruction Training
Facilitated Coaching Supports

Provide a summary of each evidence-based practice.

Foundational Literacy Training
The SEA continues to provide on-site training in foundational literacy to supported LEAs. The SEA continues to partner with other DOE divisions to offer summer Foundational Literacy training to all LEAs. Both the on-site and summer training provide a basic understanding of foundational literacy using the Teaching Reading Sourcebook. This training is ideal for new teachers, as well as experienced teachers who would like to strengthen their understanding and refine teaching practices. Providing continued training in foundational literacy will strengthen the knowledge and skills of teachers and build a common understanding across LEAs. When teachers have increased knowledge and skills, they can provide more effective instruction, which will improve outcomes for all students, including the target subset group (students with SLD, OHI, and speech language impairment).

Explicit Instruction Training
The SEA continues to provide on-site training in explicit instruction to supported LEAs. The SEA partnered with other DOE divisions to offer Explicit Instruction training to all LEAs. This virtual training occurred during the fall and spring semesters. Face-to-face training occurred during the summer of 2024 and will be provided again during the summer of 2025. Explicit Instruction includes evidence-based instructional practices that are systematic, direct, engaging, and success-oriented. When teachers are equipped with highly effective instructional strategies, their instruction is more engaging and produces improved outcomes for all students, including the target subset group (students with SLD, OHI, and speech language impairment).

Facilitated Coaching Support
The SEA continues to facilitate coaching support in participating LEAs. The SEA continues to partner with other DOE divisions to provide ongoing instructional coach training. Instructional coaches and LEA leadership attend this training to develop strong coaching support in their buildings. When teachers are provided ongoing coaching support, they receive job-embedded professional development, opportunities for ongoing feedback, and refinement of instructional strategies. This will lead to improved instruction and improved outcomes for all students, including the target subset group (students with SLD, OHI, and speech language impairment).

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 foundational literacy skills. 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. 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 are receiving 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 and to assess practice change by administering the Reading Tiered Fidelity Inventory (R-TFI), Classroom Observation Checklist, and Observation Checklist for HQPD Training.

Reading Tiered Fidelity Inventory (R-TFI)
The R-TFI is a rubric to monitor the fidelity of implementation for the core features of MTSS for all tiers of support. When reviewing fidelity results, 89% of schools indicated that they are implementing the Tier 1 skills with fidelity (fidelity score of 70% or higher), 81% for Tier 2, and 66% for Tier 3. A trained facilitator leads the school team through a structured process to complete the R-TFI and collect the data. The data is reviewed annually by school teams during summer training and each fall with a group of stakeholders to assess practice change.

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
70% of teacher participants observed are implementing the literacy strategy skills with fidelity and 60% 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.

Observation Checklist for HQPD Training
100% of the six trainings observed had 80% or more of the essential elements of HQPD included in the training. Trainers review the results annually to identify any common strengths or areas of need.

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 2023-24 school year state-level data dashboard report can be found at https://doe.sd.gov/sped/documents/MTSS-Dashboard-24.pdf

MTSS/Data-Driven Decision Making
Of the participants who completed end of training evaluation surveys, 96-98% indicated that their knowledge/skills increased and will change what they do on the job because of the training.

From the interviews conducted in spring 2024
Of the participating interviewees, 88% said they are implementing Tier 2/Tier 3 interventions and 90-100% of participants said the project positively impacted students with disabilities receiving Tier 2/Tier 3 interventions.

Literacy/Instruction
Of the participants who completed end of training evaluation surveys, 96% of participants indicated that their knowledge/skills increased, and 88% said they will change what they do on the job because of the training.

Based on the Intervention Tracking Forms
36% of K-5 students with disabilities received an intervention.
80% of K-5 students with disabilities receiving a Tier 2 intervention achieved success: 73% for Tier 3.
8% of K-5 students with disabilities receiving a Tier 2 intervention in November no longer needed intervention supports in May; 17% receiving a Tier 3 intervention moved to a less intensive (Tier 2) intervention in May, and 4% no longer needed intervention supports in May.

Coaching
From the Coaching Survey, 96% of teacher participants said that coaches are effective in helping K-5 teachers improve literacy components at schools. From the Coordinator Survey, 81% of teacher participants said that coordinators are facilitating professional development to all K-5 teachers in literacy.

Family Engagement
Based on the interviews, 54% of participants stated that schools are engaging families around literacy, instruction, and intervention planning. 92% stated that schools are informing other stakeholders and community partners on how they can support literacy growth.

From the Family Engagement Surveys conducted in spring 2024:
76% of family members said that they are engaged in the school.
55% of family members said that they are involved in literacy activities with their children.

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. 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. 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 supports to participating LEAs. The SEA will 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.

Trends in the current data show progress and movement towards the SEA's current SiMR targets.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Stakeholders reviewed the evaluation data and progress of the MTSS initiative, as well as the data from other indicators, including graduation and dropout, and provided feedback during stakeholder meetings The SEA proposed the following changes to stakeholders and sought stakeholder feedback on changing the current SSIP:
1) Select another indicator to focus on and identify a new SiMR,
2) select a different age group within the current SSIP to collect data on, or
3) focus on other or additional improvement strategies to add to the current Theory of Action.

Stakeholders noted, since there is a correlation between a student being able to read and their likelihood of graduating, it is important to continue focusing on student literacy for grades 3-5. Stakeholders felt continuing with the current SSIP will influence Indicators 1 and 2 as well as Indicators 4 and 5. After reviewing the data available from Indicator 3, stakeholders noted the data shows reading proficiency is still an area of need and should continue to be the focus for the SiMR.

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 participants 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 each 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.

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 September 11, 2024, stakeholder meeting about the number of both general education and special education students who are not reading proficiently at grade level. They also expressed concerns about how reading proficiency declines from elementary to middle school and how this could be affecting the graduation rates. The SEA discussed the opportunities for LEAs to participate in the new literacy focused grants as well as the supports currently being provided for LEAs through the MTSS initiative. 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.

Collaboration began in fall of 2024. LEAs are in the process of applying for Elevating Literacy Across South Dakota grants through the SD DOE. Those grants will be awarded in March of 2025 and at this time, the SEA will know which LEAs chose to implement pieces similar to the components of the SSIP Theory of Action. Once these LEAs are identified, planning will begin on how to include these LEAs into the current data collection set. The SEA plans to use the same regular statewide assessment data for new LEAs for data collection and data analysis.

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

The State did not provide an active link to or narrative description of the current Theory of Action.

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:

a. # of findings of noncompliance issued the prior Federal fiscal year (FFY) (e.g., for the FFY 2023 submission, use FFY 2022, July 1, 2022 – June 30, 2023)

b. # 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

States are required to complete the General Supervision Data Table within the online reporting tool.

Instructions

Baseline Data: The State must provide baseline data expressed as a percentage. OSEP assumes that the State's FFY 2023 data for this indicator is the State's baseline data unless the State provides an explanation for using other baseline data.

Targets must be 100%.

Report in Column A the total number of findings of noncompliance made in FFY 2022 (July 1, 2022 – June 30, 2023) and report in Column B 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.

Starting with the FFY 2023 SPP/APR, States will be required to report on the correction of noncompliance related to compliance indicators 4B, 9, 10, 11, 12, and 13 based on findings issued in FFY 2022. Under each compliance indicator, States report on the correction of noncompliance for that specific indicator. However, in this general supervision Indicator 18, States report on both those findings as well as any additional findings that the State issued related to that compliance indicator.

In the last row of this General Supervision Data Table, 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.

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.

18 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	100.00%

Targets

FFY	2023	2024	2025
Target	100%	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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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
1	0	1	0	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 4B due to various factors (e.g., additional findings related to other IDEA requirements).

There are no differences in the number of findings reported in Indicator 18 and the number of findings reported in Indicator 4b.

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 Indicator 4B Findings: For the one LEA that was identified as having a significant discrepancy, the SEA reviewed the LEA's FFY 2021 policies, procedures, and practices relating to the manifest determination requirements, the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure they comply with meeting regulatory requirements. The SEA also interviewed LEA staff and selected files from different school 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.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

For Indicator 4B Findings: The SEA reviewed the LEA's FFY 2021 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, and manifest determination procedural safeguards. Upon review of updated data for FFY 2022 individual student files, the LEAs updated policies, procedures, and practices the SEA verified the LEA met the regulatory requirements with 100% compliance for this indicator. After review of individual student files related to the identified significant discrepancy, the SEA found the LEA is correctly implementing the regulatory requirements and correctly following policies, practices, and procedures regardless of race/ethnicity.

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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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 any differences in the number of findings reported in this data table and the number of findings reported in Indicator 9 due to various factors (e.g., additional findings related to other IDEA requirements).

There are no differences in the number of findings reported in Indicator 18 and the number of findings reported in Indicator 9.

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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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 any differences in the number of findings reported in this data table and the number of findings reported in Indicator 10 due to various factors (e.g., additional findings related to other IDEA requirements).

There are no differences in the number of findings reported in Indicator 18 and the number of findings reported in Indicator 10.

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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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
33	0	33	0	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 11 due to various factors (e.g., additional findings related to other IDEA requirements).

There are no differences in the number of findings reported in Indicator 18 and the number of findings reported in Indicator 11.

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 issued the 12 LEAs, with a total of 33 individual student files out of compliance with Indicator 11 requirements, a CAP outlining which individual student files were out of compliance, the rules and regulations related to the noncompliance, and corrective actions needed to correct the noncompliance and dates the corrective actions that must be completed within the one-year timeline. The SEA determined the findings of noncompliance were isolated procedural errors due to the low number of incidences per LEA.

The SEA collected and reviewed documentation to verify each LEA was correctly implementing the regulatory requirements, including the following:

1) Submission of the 33 individual student files to ensure the initial evaluation had been completed, eligibility had been determined, and the IEP had been developed and implemented even though it was not completed within the 25 school day timeline. Documentation submitted by the LEA included the PPWN consent for evaluation and the eligibility determination.

2) Documentation showing the LEA reviewed and trained special education staff on the LEA policies and procedures regarding Indicator 11: Child Find, Indicator 11 regulatory requirements, data collection procedures, calculating the 25 school day timeline, procedures for documenting the date consent for evaluation was received, and procedures for requesting an extension of the timeline prior to exceeding the timeline.

3) LEA submission of quarterly data through the SEA data system during the subsequent FFY to demonstrate continued compliance. The SEA reviewed the additional data submission(s) including all students who received an initial evaluation. The SEA verified the 12 LEAs continued to correctly implement the requirements 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 collected and reviewed each of the 33 individual student files that were identified as out of compliance, including the PPWN consent and the eligibility report. The SEA verified that all 33 individual student files received a full comprehensive evaluation and eligibility was verified through the desk audit that each individual was 100% compliant in accordance with OSEP Memo 23-01 within one year of the finding.

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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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
2	0	2	0	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 12 due to various factors (e.g., additional findings related to other IDEA requirements).

There are no differences in the number of findings reported in Indicator 18 and the number of findings reported in Indicator 12.

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 one LEA with continued noncompliance due to the updated data submission showing one out of five individual student files not meeting the regulatory requirements was issued a CAP requiring additional training and updated data submissions showing 100% compliance in meeting the regulatory requirements.

The SEA collected and reviewed additional updated documentation submitted by the LEA, including the following:

1) Submission of the one individual student file to ensure the initial evaluation had been completed, eligibility had been determined, and the IEP had been developed and implemented. Documentation submitted by the LEA included the referral, PPWN and the eligibility determination.

2) Documentation showing all LEA staff involved in implementing requirements for Part C to Part B early childhood transition, data collection requirements and implementing policies and procedures for transitioning students from Part C to Part B services were trained. Data submitted included the training materials or agenda and sign-in sheets.

3) Submission of the LEAs updated transition evaluation data for all students evaluated between July 1, 2023 and January 28, 2024.

The SEA verified 100% compliance in implementing the regulatory requirements by the one LEA.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

The SEA collected and reviewed the two individual student files that were identified as out of compliance, including the referral, PPWN consent and the eligibility report. The SEA verified that the two individual student files received a full comprehensive evaluation, eligibility was determined, and an IEP was implemented if student was eligible through the desk audit. The SEA verified 100% compliance in meeting the regulatory requirements by the two LEAs.

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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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)
63	0	63	0	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 13 due to various factors (e.g., additional findings related to other IDEA requirements).

There are no differences in the number of findings reported in Indicator 18 and the number of findings reported in Indicator 13.

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 identified 18 LEAs that were out of compliance in FFY 2022 using the Indicator 13 checklist. The issues can be classified as the IEP documentation not meeting regulatory requirements or procedural violations related to obtaining permission to invite outside agency.

IEP documentation noncompliance occurs when the LEA did not include transition assessments, document measurable post-secondary goals appropriately, post-secondary goals updated annually, transition services and activities, and/or complete record of course of study through completion of secondary education. The SEA verified correction of the LEA's individual findings of noncompliance through a review of updated documentation. The SEA additionally reviewed subsequent files submitted and/or updated written procedures to demonstrate continued compliance for the LEAs who had noncompliance related to IEP documentation.

LEAs with noncompliance related to the consent to invite an outside agency were required to participate in transition IEP training, review or update existing written policies and procedures that align with regulatory requirements. LEAs were also required to submit an additional individual student's file containing consent to invite an outside agency document, meeting notice, and IEP demonstrating compliance. The SEA verified the LEAs participated in all required training, written policies and procedures aligned to regulatory requirements, and subsequent files demonstrated continued compliance 100% with meeting the 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 63 individual files of noncompliance in FFY 2022 met 100% compliance. The SEA reviewed the updated documentation submitted by the LEAs to verify correction of individual student files, each LEA's updated policies procedures and practices and subsequent individual student files. The SEA verified the 63 individual cases of noncompliance were corrected and the LEA was meeting regulatory requirements.

Optional for FFY 2023, 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 2022 (7/1/22 – 6/30/23)	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

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 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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
99	0	99	0	0

FFY 2023 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified FFY 2022	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
99	99		100%	100.00%	N/A	N/A

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	0.00%

Provide additional information about this indicator (optional)

The SEA reviewed findings from accountability reviews, dispute resolution and fiscal monitoring to determine whether or not there were findings related to the compliance indicators outside of the indicator reporting. The SEA has not identified additional findings related to the compliance indicators for FFY 2023.

Summary of Findings of Noncompliance identified in FFY 2022 Corrected in FFY 2023 (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified during FFY 2022 (the period from July 1, 2022 through June 30, 2023)	99
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)	99
3. Number of findings <u>not</u> verified as corrected within one year	0

Subsequent Correction: Summary of All Outstanding Findings of Noncompliance Identified in FFY 2022 Not Timely Corrected in FFY 2023 (corrected more than one year from identification of the noncompliance):

4. Number of findings of noncompliance not timely corrected	0
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")	0
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.

18 - OSEP Response

OSEP cannot determine whether the data are valid and reliable. The State reported 100% of its findings of noncompliance were corrected within one year of identification. However, the State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2022 related to child find because it did not report that it verified correction of those findings, consistent with the requirements in OSEP QA 23-01. Specifically, the State did not report that it verified that each LEA with noncompliance identified in FFY 2022: (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. Additionally, the State must report under this indicator that it has verified correction for each LEA with noncompliance identified in FFY 2022.

The State has established baseline for this indicator using data from FFY 2023, but OSEP cannot accept that baseline data because it cannot determine whether the State's FFY 2023 data are valid and reliable, as noted above.

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:

04/24/25 8:04:49 PM

Determination Enclosures

Data Rubric
South Dakota

FFY 2023 APR (1)
Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	0	0
3B	0	0
3C	0	0
3D	0	0
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	0	0

APR Score Calculation

Subtotal	17
Timely Submission Points - If the FFY 2023 APR was submitted on-time, place the number 5 in the cell on the right.	5

Grand Total - (Sum of Subtotal and Timely Submission Points) =	22

(1) In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 7/31/24	1	1	1	3
Personnel Due Date: 2/19/25	1	1	1	3
Exiting Due Date: 2/19/25	1	1	1	3
Discipline Due Date: 2/19/25	1	1	1	3
State Assessment Due Date: 1/8/25	0	N/A	N/A	0
Dispute Resolution Due Date: 11/13/24	1	1	1	3
MOE/CEIS Due Date: 9/4/24	1	1	1	3

618 Score Calculation

Subtotal	18
Grand Total (Subtotal X 1.28571429) =	23.14

(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	22
B. 618 Grand Total	23.14
C. APR Grand Total (A) + 618 Grand Total (B) =	45.14
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	2.57
Denominator	51.43
D. Subtotal (C divided by Denominator) (3) =	0.8778
E. Indicator Score (Subtotal D x 100) =	87.78

(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 2025 Submission

SPP/APR Data

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

Part B 618 Data

1) Timely – A State will receive one point if it submits all ED*Facts* files or the entire E*MAPS* survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described in the table below).

618 Data Collection	ED*Facts* Files/ E*MAPS* Survey	Due Date
Part B Child Count and Educational Environments	FS002 & FS089	7/31/2024
Part B Personnel	FS070, FS099, FS112	2/19/2025
Part B Exiting	FS009	2/19/2025
Part B Discipline	FS005, FS006, FS007, FS088, FS143, FS144	2/19/2025
Part B Assessment	FS175, FS178, FS185, FS188	1/8/2025
Part B Dispute Resolution	Part B Dispute Resolution Survey in E*MAPS*	11/13/2024
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in E*MAPS*	9/4/2024

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 ED*Facts* 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: 2023-24

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing' if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	19
(1.1) Complaints with reports issued.	16
(1.1) (a) Reports with findings of noncompliance	12
(1.1) (b) Reports within timelines	14
(1.1) (c) Reports within extended timelines	2
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	3

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	12
(2.1) Mediations held.	10
(2.1) (a) Mediations held related to due process complaints.	2
(2.1) (a) (i) Mediation agreements related to due process complaints.	2
(2.1) (b) Mediations held not related to due process complaints.	8
(2.1) (b) (i) Mediation agreements not related to due process complaints.	8
(2.2) Mediations pending.	0
(2.3) Mediations withdrawn or not held.	2

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	9
(3.1) Resolution meetings.	3
(3.1) (a) Written settlement agreements reached through resolution meetings.	1
(3.2) Hearings fully adjudicated.	4
(3.2) (a) Decisions within timeline (include expedited).	3
(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).	5

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

(4) Total number of expedited due process complaints filed.	2
(4.1) Expedited resolution meetings.	1
(4.1) (a) Expedited written settlement agreements.	1
(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.	2	Part B

State Comments:

Errors:
Please note that the data entered result in the following relationships which violate edit checks:

State error comments:

This report shows the most recent data that was entered by:
South Dakota
These data were extracted on the close date:
11/13/2024