

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART C

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

**For reporting on
FFY 2022**

South Carolina



**PART C DUE
February 1, 2024**

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

Introduction

Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for infants and toddlers with disabilities and their families and to ensure that the Lead Agency (LA) meets the requirements of Part C of the IDEA. 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

After completing all aspects of the 2018 Corrective Action Plan (CAP), the South Carolina Department of Health and Human Services' (SCDHHS) Part C program, BabyNet, has been able to focus on ensuring high-quality services and supports for families and providers. The program's major accomplishments since completing the CAP include, but are not limited to, the following:

- revising policies and procedures, as needed
- developing and implementing a full general supervision plan
- streamlining the referral and eligibility processes to maximize efficiency
- fully implementing the use of the Routines-based Interview (RBI)
- revising the Family Outcomes Measurement System (FOMS)
- assessing the program's needs and obligating American Rescue Plan funds to meet those needs

The State continued to experience staffing shortages, especially services provided in the natural environment. For the first time, the State experienced shortages in service coordination providers. Stakeholder meetings were held to get insight on possible ways to address these shortages.

Key insights include:

- Staffing shortages led to a decrease in the number of services provided in the natural environment.
- Higher caseloads made it more difficult for providers to drive to homes (or other natural environment settings).
- Many companies laid off staff in the early days of the pandemic and have not filled those positions again.
- Other staff have left the field completely or have decided to provide services for programs that allow for more flexibilities with telehealth.

In addition to staffing shortages for service providers and service coordinators, the State also experienced difficulties filling vacant Intake Coordinator positions. These vacancies led to significant delays in completing initial Individualized Family Service Plans (IFSPs) in a timely manner.

In FFY 2021, the BabyNet State Office completed a reorganization and added a few new positions. The new positions and redesign of previous positions have allowed BabyNet to better serve the local providers and stakeholders, as well as complete required reporting to the Office of Special Education Programs (OSEP). In FFY 2022, most vacant State office positions were filled (see below). The State is encouraged by the addition of the Provider Relations Specialist position, as it will allow the State to focus resources on recruiting and retaining quality providers.

BabyNet Part C Coordinator

- Part C Data Manager
- BabyNet Quality Assurance Specialist
- Part C Operations Manager
- (4) Regional Coordinators (1 of 2 vacancies filled)
- Finance/Budget Manager
- Fiscal Analyst
- Provider Relations Manager
- Provider Relations Specialist (new position filled)

Additional information related to data collection and reporting

BabyNet continued to see improvements in data collection related to compliance and results indicators. After discussing data reporting options with the OSEP, BabyNet determined it would begin using sample data for compliance indicators 1 and 7 for FFY 2021 and for 8C beginning in FFY 2022. The use of sample data gives the State more opportunities to ensure data is valid, complete, and reliable. BabyNet's current data system doesn't mandate late reasons for services not provided within 30 days of identification, so State staff have to request this information from service coordinators. Verifying late reasons manually is only possible if sample data is used due to the number of services delivered each year. This new process has proven that services are provided much timelier than previously considered.

General Supervision System

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

The State began implementation of the full General Supervision Plan with the FFY 2020 reporting cycle. The following is a list of findings for FFY 2022:

Indicator 1:

6 of 7 districts received findings for Indicator 1.

Indicator 7:

All 7 districts received findings (or continued findings) for Indicator 7.

Indicator 8C:

5 of 7 districts received findings (or continued findings) for Indicator 8C.

For FFY 2022 data, BabyNet continued implementation of the full General Supervision plan and issued findings for Indicators 1, 7, and 8c on 9/21/2023 to the Regional Coordinators. BabyNet used a 10% sample of data by district for July 1, 2022, to December 31, 2022. This data was reviewed and sent to service coordination providers to submit updates during the month of September 2023. These updates include corrections to typos, omitted late reasons, and other missing data. After updates were made and final non-compliance was documented, findings were issued on September 21, 2023, which was within 90 days of identification of non-compliance (identification was made on 9/1/23). Correction of non-compliance will be verified with subsequent data pulls in January 2024. If activities did eventually occur and no new activities were late, the finding will be cleared. If both of those conditions are not met, the findings will carry over to the next fiscal year. The state will report these findings in the FFY 2023 Annual Performance Report (APR). The BabyNet Regional Coordinators held Local Early Intervention System (LEIS) Meetings with each of their assigned districts to review the general supervision process, noncompliance identified, and issued findings in the month of November 2023. Local system personnel had the opportunity

to ask questions throughout these meetings.

In FFY 2022, the Charleston and Richland districts entered into corrective action plans (CAPs) with the State in order to address longstanding noncompliance related to Indicator 1, and the Spartanburg district entered into a CAP to address longstanding noncompliance related to Indicator 8C. All three districts worked with their regional coordinators to develop their plans. Plans included targeted technical assistance from the State office and additional subsequent data pulls. All three districts were able to complete their CAPs prior to the data pull for FFY 2022 (9/1/2023). Charleston (5/12/23) and Horry (8/24/23), were able to clear their CAPs after they completed mandatory training and proved through subsequent data pulls that their noncompliance was corrected. Spartanburg cleared their Indicator 8C CAP on 8/23/23 after completing mandatory training and proved through subsequent data pulls that their noncompliance was corrected.

The Regional Part C Coordinators generate monthly reports from the BabyNet Reporting and Information Data Gathering Electronic System (BRIDGES) data system and work with their assigned LEIS teams to ensure data is current and accurate in the system. These reports include, but are not limited to:

- Children who have turned 3, but have not been closed in the data system
- Children who have not had a service log entered in the past 45 days (identifying possible missed closures)
- Timely services delay reasons
- 45-Day timeline
- Timely Transition Conferences
- Child outcome summary data
- Payor source errors

In FFY 2020, BabyNet fully integrated the dispute resolution process within SCDHHS. Staff also participated in a webinar called "Dispute Resolution: A Tune-Up," so the program can continue to get ideas on how other states are improving dispute resolution processes. The SCDHHS Appeals and Hearings Office and hearing officers were trained on Part C requirements, including complaints and dispute resolution, by BabyNet staff in October 2022.

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 early intervention service (EIS) programs.

South Carolina has a strong system of technical assistance available to its provider network, including an electronic help desk system that allows providers and service coordinators to submit questions to BabyNet state staff. These questions are answered by the regional coordinators who are supervised by the BabyNet Operations Manager. This structure helps ensure consistency in answering and coordinating timely responses and identifying trends. Regional Coordinators are also responsible for monthly LEIS meetings with providers where they can share relevant information and answer questions to assist the provider and broader early intervention community. The local meetings are also used for training, technical assistance, and as a forum to discuss resources in their community that could impact service delivery. Local meetings have returned to an in-person format, with one virtual make-up session offered for anyone in the state who may have missed their local meeting.

In addition to the help desk, BabyNet streamlined mailboxes, and now uses one email address for the BabyNet State Office for technical assistance related to data updates and billing/payment issues. When a user sends an email to this account, it is automatically sent to Service Manager, an internal ticketing system. The Service Manager system then creates a ticket, and the ticket containing the email is assigned to the appropriate staff person, based on the topic. This change has allowed for more streamlined communication and the ability to report metrics on frequently asked questions and staff workload.

Professional Development System:

The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.

Since the Part C program transferred to SCDHHS, it has focused most of its efforts on the development of policies, procedures and systems integration. All service coordination providers across the state have completed training to become Routines-based Interview trainers (RBI) (for their staff). RBI implementation will ensure that South Carolina is appropriately assessing families' resources, priorities, and concerns. The State has offered follow-up training related to the RBI to help maintain fidelity in implementation. The Team for Early Childhood Solutions (TECS) contracts with the lead agency to provide training and technical assistance and to manage the Comprehensive System of Personnel Development (CSPD). TECS has also developed a community of practice that will meet every month in order to discuss implementation of the RBI as well as troubleshoot issues providers are having related to the family assessment.

TECS focuses on the following deliverables:

- Managing the South Carolina Early Intervention Learning System (SCEILS), SC's Part C learning management system
- Revising the online Part C foundational modules (BabyNet Basics)
- Collaborating with BabyNet to revise the Family Outcomes Measurement system and conduct Family Outcomes trainings
- Monitoring, updating, and implementing the RBI training and state-certification plans

The State partnered with the South Carolina Infant Mental Health Association (SCIMHA) to provide several opportunities to the BabyNet provider community. These activities were chosen to support providers and encourage their ongoing professional development. By choosing to invest in personnel, the program hopes the provider community will feel valued and supported and stay in the system delivering services to children eligible for Part C services. Research shows that Reflective Supervision has a positive impact on staff retention. The following services have been covered:

- SCIMHA annual memberships
- Endorsement fees covered for any BabyNet providers
- Access to Facilitating Attuned Interactions (FANI) training
- Reflective Supervision

The State purchased several professional development opportunities for therapy providers (Physical, Occupational, and Speech). These virtual sessions are designed to support providers around coaching parents/caregivers, discussing common situations encountered by therapists who deliver Part C services, and strategies to address these situations when they are encountered. The trainings count towards the licensing requirements for therapists which should encourage participation.

TECS, BabyNet, and a consultant with the Early Childhood Personnel Development Center (ECPC) have begun working to revise the Comprehensive System of Personnel Development (CSPD). This work will continue throughout FFY 2023 and will include stakeholders, such as families, service providers, service coordinators, and other state agency representatives.

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 State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

The State also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual and in-person public hearings to accept public comment.

Because South Carolina did not implement any policy or procedure changes in FFY 2022, no public hearings were held this year. However, policy and procedures changes were announced towards the end of FFY 2022 that would go into effect on September 1, 2023 (FFY 2023). Because these changes went into effect in FFY 2023, they will be explained in more detail in the FFY 2023 APR.

The SC Department of Health and Human Services (SCDHHS) did, however, update the Early Intervention Medicaid manual in FFY 2022 and requested feedback from providers prior to posting the final version.

Stakeholder groups have met to provide input on the State Systemic Improvement Plan (SSIP) and on various improvement strategies necessary to meet our state's SIMR. Formats include the following: surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

The State made significant changes to the Family Outcomes measurement process for FFY 2023. To prepare for the changes, the State interviewed families, held live webinars with service coordinators, and surveyed both families and service coordinators to solicit their feedback on proposed changes. These engagement activities proved to be effective methods of gathering input in order to make significant improvements to a process that impacts families, providers, service coordinators, and the State.

As the State faced staffing shortages with Intake Coordinators, stakeholders at SCDHHS and other partnering agencies met several times throughout the year to discuss possible strategies to improve the intake and eligibility timelines. These meetings yielded effective strategies that eventually helped to improve timelines. For instance, temporary staff were hired, and intake coordinators were offered overtime hours, all to help decrease the number of days between referral and initial intake visit. These efforts proved to be effective as subsequent data (from Nov 2023) has shown great improvements in the 45-day timeline.

Apply stakeholder input from introduction to all Part C results indicators. (y/n)

YES

Number of Parent Members:

4

Parent Members Engagement:

Describe how the parent members of the Interagency Coordinating Council, 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.

The director of SC's Parent Training and Information Center (PTIC), along with other parents, participated in SCICC meetings where all SPP/APR indicators were discussed. Targets were reviewed but not changed for FFY 2022. Parent representatives had the opportunity to provide input during SCICC meetings.

Activities to Improve Outcomes for Children with Disabilities:

Describe the activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for infants and toddlers with disabilities and their families.

BabyNet partners with Family Connection of SC (FCSC), the Parent Training and Information Center (PTIC) in South Carolina. Through this partnership, FCSC provides peer support services; trainings; maintains SC's Central Directory; offers child find activities; and provides community outreach activities so families have access to and provide input into SC's BabyNet programs and policies. The goals of the partnership are 1) Ensure families know their rights and advocate effectively for their child; 2) Help their child develop and learn; 3) Provide emotional support; and 4) have the knowledge needed to access desired services, programs, and activities in their community.

In FFY 2022, FCSC provided 1,631 families of infants and toddlers with 1:1 peer support. The primary concerns identified by families were 1) The need to understand the community resources and programs available to their child; 2) Assistance with understanding TEFRA and the Medicaid waivers; and 3) Emotional support from another parent who understands. Of the 1,631 families, 44% of the families were families of color (22% non-Hispanic Black, 22% Hispanic). FCSC offered 38 workshops, training 625 parents and professionals on issues related to early intervention and special education. BabyNet also sponsored a learning track at the FCSC's annual Hopes & Dreams conference where 1,125 parents and professionals attended. This year's conference was virtual allowing additional people to join. This partnership provides scholarships so parents can attend at no cost. This year, over 1,000 providers were listed in the Central Directory. This year, FCSC piloted an online Ages and Stages Questionnaire (ASQ) and Ages and Stages Questionnaire-Social Emotional (ASQ-SE) portal for families on our website in English and Spanish. In this first year, FCSC had 205 screenings, and one-third of the children screened had a delay and FCSC referred to BabyNet and the child's primary care provider. FCSC also continued to follow the children to ensure continuity of care.

Increasing stakeholder engagement: In response to COVID, to ensure all families, including those that had limited access to technology, continued to receive information on BabyNet, Transitioning to Part B services, and inclusive practices. FCSC created "Welcome Packets" for all families. Each family referred to FCSC with an infant or toddler, received a Welcome Packet with a BabyNet Parent Guide, a Transitioning to Part B guide, a Parent Workbook, and other helpful tip sheets. "Welcome Packets" are mailed out weekly to all new referrals. In addition, the same materials are available on the FCSC website to order at no cost. This partnership ensures families have access to information about BabyNet, in a family-friendly and engaging manner.

Soliciting Public Input:

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

SCICC meetings are posted on the BabyNet website and distributed through the BabyNet listserv, which reaches over 4500 stakeholders. In the January ICC meeting each year, BabyNet State staff present a draft of the APR, including a description of each indicator, past and current performance, and current targets. ICC members and other participants discuss performance, root causes of noncompliance, findings, and possible strategies for improvements. The State also reviews targets and baselines and decides as a group if changes need to be made. All targets and/or baselines are reviewed and updated in SPP years.

Making Results Available to the Public:

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

At the January 2024 SCICC meeting, the State reviewed the purpose of the SPP/APR, the definition and measurement of each indicator, and previous FFY data and targets. The group also discussed possible root causes for not meeting targets and/or data slippages from the previous year. The SPP/APR will be posted on the BabyNet website no later than February 10, 2024. Members of the public will have the ability to provide feedback to the Lead Agency through the general BabyNet email address (BabyNet@scdhhs.gov).

Reporting to the Public:

How and where the State reported to the public on the FFY 2021 performance of each EIS Program located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2021 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its website, a complete copy of the State's SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, is available.

The SPP/APR, data related to local performance, and local determinations are posted on the BabyNet website. This information can be found using the following link; <https://www.scdhhs.gov/resources/programs-and-initiatives/babynet/reporting-resources/state-and-federal-reporting>.

Local determinations and data were shared with Regional Coordinators and reviewed in each of their May 2023 LEIS meetings. They were also posted to the website on May 15, 2023.

The completed APR was posted on the website in February 2023, and later updated on the website after the determination and Results-driven Accountability (RDA) matrix were received.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

The State Interagency Coordinating Council (SICC) submitted to the Secretary its annual report that is required under IDEA Section 641(e)(1)(D) and 34 C.F.R. § 303.604(c). The SICC noted it has elected to support the State lead agency's submission of its SPP/APR as its annual report in lieu of submitting a separate report. OSEP accepts the SICC form, which will not be posted publicly with the State's SPP/APR documents.

Intro - Required Actions

Indicator 1: Timely Provision of Services

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

Compliance indicator: Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

Data Source

Data to be taken from monitoring or State data system and must be based on actual, not an average, number of days. Include the State's criteria for "timely" receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

Measurement

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

Instructions

If data are from State monitoring, describe the method used to select early intervention service (EIS) programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

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. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

The State's timeliness measure for this indicator must be either: (1) a time period that runs from when the parent consents to IFSP services; or (2) the IFSP initiation date (established by the IFSP Team, including the parent).

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child's record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child's record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in the Office of Special Education Programs' (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, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	95.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	40.25%	59.65%	73.74%	78.00%	95.10%

Targets

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

FFY 2022 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,121	1,194	95.10%	100%	96.40%	Did not meet target	No Slippage

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.

30

Provide reasons for delay, if applicable.

The State attributes noncompliance to the provider, service coordinator, or state. Most late services were attributed to the State due to provider network inadequacies.

Statewide staffing shortages have had an impact on service provision in general and in the natural environment. Higher caseloads made it more difficult for providers to drive to homes (or other natural environment settings). Many companies laid off staff in the early days of the pandemic and have not been able to fill those positions again. Other staff have left the field completely or have decided to provide services for programs that allow more flexibilities with telehealth.

Include your State's criteria for "timely" receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

The South Carolina early intervention system defines "timely receipt" as initiation of all new IFSP services within 30 calendar days of parent signature on the plan.

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

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2022 - December 31, 2022

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Calculations are considered to be valid because the State has built data structures and linked the data structures based upon business needs. The calculations are reliable because the data structures are based upon business rules and not internal system IDs, the requirements are well-known, and the methodology is repeatable.

Cumulative Statewide Eligible Population by race (All infants and toddlers who had an initial IFSP during FFY 2023):

White: 51.51%
Black/African American: 29.41%
2 or More: 7.8%
Hispanic: 9.15%
Native Hawaiian-Other Pacific Islander: 0.23%
American Indian-Alaskan Native: 0.42%
Asian: 1.47%

Sample Population:

White: 53.11%
Black/African American: 26.33%
2 or More: 7.66%
Hispanic: 10.96%
Native Hawaiian-Other Pacific Islander: 0.22%
American Indian-Alaskan Native: 0.27%
Asian: 1.46%

Provide additional information about this indicator (optional)

The State used a 10% sample of children by district who received services from July 1 to December 31, 2022. Using sample data allows state office staff the opportunity to work with service coordinators and providers to determine if any late services were due to exceptional family circumstances.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	4		3

FFY 2021 Findings of Noncompliance Verified as Corrected

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

As per the Correction of Noncompliance section in South Carolina's full General Supervision Plan, the state completed a subsequent data pull in January of 2022 to assist with verification of correction of noncompliance. This subsequent pull consisted of a 10% data sample by district for the month of November 2021. State office staff review each late service to determine correction and reviewed a 10% sample (by district) of data from the month of November 2021 to determine if all services were timely. If all late services associated with the October 30, 2021, findings eventually occurred, and there were no new late services identified in the January 2022 subsequent data pull, then the findings are considered cleared, and noncompliance corrected.

Root Causes:

- High rate of turnover and difficulty keeping trained service coordination and provider staff
- Inconsistent understanding of requirements led to untimely service provision
- Lack of understanding of timelines policies and procedures
- Providers didn't follow proper procedures for scheduling services

Action Steps:

Regional Coordinators reviewed service provision procedures and timelines at local early intervention system meetings throughout FFY 2022. They have also met one-on-one with providers who contributed to non-compliance. BabyNet State Office sends monthly reports to providers and service coordination supervisors notifying them of late services with missing delay reasons and/or missing service logs. The State is also working with the data system vendor to add automatic triggers for late reason selection on service logs if the date of service is more than 30 days from the day the service was added to the plan.

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

For Indicator 1, the state determined that four of the seven findings were cleared, using the two-prong verification approach. Anderson, Colleton, Spartanburg, and York districts all demonstrated that the previously identified late services did eventually occur, the child aged out prior to services initiating, or the family moved out of the state (see breakdown below) AND they had no new late services identified in the subsequent January data pull. Charleston, Horry, and York districts did have new instances of noncompliance identified in a subsequent data pull (prong 2), so they were not able to clear their finding. Based on data pulled in August of 2023, if correction hasn't been verified, Charleston, Horry, and Richland will be required to complete a corrective action plan (CAP) with the state.

Anderson: 2 children with noncompliance,

----Services late but received=2 children (prong 1)

----No new instances of noncompliance identified with January 2022 subsequent data pull (prong 2)

----Finding Cleared

Charleston: 6 children with noncompliance

----Services late but received=2 children (prong 1)

----Services not received due to aging out=4 children (prong 1)

----New instances of noncompliance identified with January 2022 subsequent data pull (prong 2)

----Finding continued

Colleton: 1 child with noncompliance,

----Service(s) late but received=1 child (prong 1)

----No new instances of noncompliance identified with January 2022 subsequent data pull (prong 2)

----Finding Cleared

Horry: 10 children with noncompliance

----Services late but received=6 (prong 1)

----Services not received due to aging out=3 (prong 1)

----Services not received due to family moving out of state=1 (prong 1)

----New instances of noncompliance identified with January 2022 subsequent data pull (prong 2)

----Finding continued

Richland: 6 children with noncompliance,

----Services late but received=6 (prong 1)

----New instances of noncompliance identified with January 2022 subsequent data pull (prong 2)

----Finding continued

Spartanburg: 5 children with noncompliance

----Services late but received=5 (prong 1)

----No new instances of noncompliance identified with January 2022 subsequent data pull (prong 2)

----Finding cleared

York: 1 child with noncompliance,

----Service(s) late but received=1 (prong 1)

----No new instances of noncompliance identified with January 2022 subsequent data pull (prong 2)

----Finding cleared

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected**Actions taken if noncompliance not corrected**

Regional Coordinators reviewed service provision procedures and timelines at local early intervention system meetings throughout FFY 2022. They have also met one-on-one with providers who contributed to non-compliance. BabyNet State Office sends monthly reports to providers and service coordination supervisors notifying them of late services with missing delay reasons and/or missing service logs. The State is also working with the data system vendor to add automatic triggers for late reason selection on service logs if the date of service is more than 30 days from the day the service was added to the plan. The state is in the process of planning mandatory policy and procedure training for all service coordinators and providers in during the summer and fall months of 2024.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	3	0	3

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

FFY 2020

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Because Charleston, Horry, and Richland districts had uncorrected noncompliance for more than 12 months, they each had to enter a corrective action plan with the state.

Regional Coordinators reviewed service provision procedures and timelines at local early intervention system meetings throughout FFY 2022. They have also met one-on-one with providers who contributed to non-compliance. BabyNet State Office sends monthly reports to providers and service coordination supervisors notifying them of late services with missing delay reasons and/or missing service logs. The State is also working with the data system vendor to add automatic triggers for late reason selection on service logs if the date of service is more than 30 days from the day the service was added to the plan. The state is in the process of planning mandatory policy and procedure training for all service coordinators and providers in during the summer and fall months of 2024.

Prong 1 verification:

Charleston-1 child

--eventually received service, though late

Horry-3 children

--1 aged out without service

--2 eventually received service, though late

Richland-3 children

--2 aged out without service

--1 eventually received service, though late

1 - Prior FFY Required Actions

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

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

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

1 - OSEP Response

1 - 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 three uncorrected findings of noncompliance identified in FFY 2021 and the remaining three uncorrected findings identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2022 and each EIS program or provider with remaining noncompliance identified in FFY 2021 and FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP QA 23-01.

In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 2: Services in Natural Environments

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings. (20 U.S.C. 1416(a)(3)(A) and 1442)

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED Facts Metadata and Process System (EMAPS)).

Measurement

Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Instructions

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

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

The data reported in this indicator should be consistent with the State's 618 data reported in Table 2. If not, explain.

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	93.44%

FFY	2017	2018	2019	2020	2021
Target>=	97.64%	98.00%	98.00%	93.00%	93.10%
Data	97.82%	98.03%	93.73%	93.44%	92.58%

Targets

FFY	2022	2023	2024	2025
Target >=	93.20%	93.30%	93.40%	93.50%

Targets: Description of Stakeholder Input

The State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

The State also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual and in-person public hearings to accept public comment.

Because South Carolina did not implement any policy or procedure changes in FFY 2022, no public hearings were held this year. However, policy and procedures changes were announced towards the end of FFY 2022 that would go into effect on September 1, 2023 (FFY 2023). Because these changes went into effect in FFY 2023, they will be explained in more detail in the FFY 2023 APR.

The SC Department of Health and Human Services (SCDHHS) did, however, update the Early Intervention Medicaid manual in FFY 2022 and requested feedback from providers prior to posting the final version.

Stakeholder groups have met to provide input on the State Systemic Improvement Plan (SSIP) and on various improvement strategies necessary to meet our state's SIMR. Formats include the following: surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

The State made significant changes to the Family Outcomes measurement process for FFY 2023. To prepare for the changes, the State interviewed families, held live webinars with service coordinators, and surveyed both families and service coordinators to solicit their feedback on proposed changes. These engagement activities proved to be effective methods of gathering input in order to make significant improvements to a process that impacts families, providers, service coordinators, and the State.

As the State faced staffing shortages with Intake Coordinators, stakeholders at SCDHHS and other partnering agencies met several times throughout the year to discuss possible strategies to improve the intake and eligibility timelines. These meetings yielded effective strategies that eventually helped to improve timelines. For instance, temporary staff were hired, and intake coordinators were offered overtime hours, all to help decrease the number of days between referral and initial intake visit. These efforts proved to be effective as subsequent data (from Nov 2023) has shown great improvements in the 45-day timeline.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	7,383
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Total number of infants and toddlers with IFSPs	8,351

FFY 2022 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of Infants and toddlers with IFSPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
7,383	8,351	92.58%	93.20%	88.41%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

Statewide staffing shortages have had an impact on service provision. These shortages have also led to a decrease in the number of services provided in the natural environment. Higher caseloads made it more difficult for providers to drive to homes (or other natural environment settings). Many companies laid off staff in the early days of the pandemic and have not been able to fill those positions again. Other staff have left the field completely or have decided to provide services for programs that allow more flexibilities with telehealth.

Provide additional information about this indicator (optional).

BabyNet hired a Provider Relations Specialist (PRS) in FFY 2022. In collaboration with the Provider Relations Manager, the PRS will attend statewide early conferences, workshops, community events, etc. representing Part C to actively recruit new providers.

BabyNet state office has reviewed CSPD and staffing requirements to ensure highly qualified service coordinators are hired, while also making sure the requirements are not unintentionally preventing certain professionals from being hired. The SC Early Intervention Medicaid manual and CSPD requirements were updated to allow for additional levels of review in order for the State to approve highly qualified professionals with extensive early intervention experience.

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3: Early Childhood Outcomes

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of infants and toddlers with IFSPs who demonstrate improved:

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

(20 U.S.C. 1416(a)(3)(A) and 1442)

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
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

Summary Statement 1: Of those infants and toddlers who entered early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 1:

Percent = [(# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d)) divided by ((# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d))] times 100.

Summary Statement 2: The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 2:

Percent = [(# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e)) divided by the (total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

Sampling of infants and toddlers with IFSPs 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](#) page 2 for additional instructions on sampling.)

In the measurement, include in the numerator and denominator only infants and toddlers with IFSPs who received early intervention services for at least six months before exiting the Part C program.

Report: (1) the number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting data under Section 618 of the IDEA; and (2) the number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

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.

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 Process (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.

If the State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or "at-risk infants and toddlers") under IDEA section 632(5)(B)(i), the State must report data in two ways. First, it must report on all eligible children but exclude its at-risk infants and toddlers (i.e., include just those infants and toddlers experiencing developmental delay (or "developmentally delayed children") or having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay (or "children with diagnosed conditions")). Second, the State must separately report outcome data on either: (1) just its at-risk infants and toddlers; or (2) aggregated performance data on all of the infants and toddlers it serves under Part C (including developmentally delayed children, children with diagnosed conditions, and at-risk infants and toddlers).

3 - Indicator Data

Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or "at-risk infants and toddlers") under IDEA section 632(5)(B)(i)? (yes/no)

NO

Targets: Description of Stakeholder Input

The State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

The State also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual and in-person public hearings to accept public comment.

Because South Carolina did not implement any policy or procedure changes in FFY 2022, no public hearings were held this year. However, policy and procedures changes were announced towards the end of FFY 2022 that would go into effect on September 1, 2023 (FFY 2023). Because these changes went into effect in FFY 2023, they will be explained in more detail in the FFY 2023 APR.

The SC Department of Health and Human Services (SCDHHS) did, however, update the Early Intervention Medicaid manual in FFY 2022 and requested feedback from providers prior to posting the final version.

Stakeholder groups have met to provide input on the State Systemic Improvement Plan (SSIP) and on various improvement strategies necessary to meet our state's SIMR. Formats include the following: surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

The State made significant changes to the Family Outcomes measurement process for FFY 2023. To prepare for the changes, the State interviewed families, held live webinars with service coordinators, and surveyed both families and service coordinators to solicit their feedback on proposed changes. These engagement activities proved to be effective methods of gathering input in order to make significant improvements to a process that impacts families, providers, service coordinators, and the State.

As the State faced staffing shortages with Intake Coordinators, stakeholders at SCDHHS and other partnering agencies met several times throughout the year to discuss possible strategies to improve the intake and eligibility timelines. These meetings yielded effective strategies that eventually helped to improve timelines. For instance, temporary staff were hired, and intake coordinators were offered overtime hours, all to help decrease the number of days between referral and initial intake visit. These efforts proved to be effective as subsequent data (from Nov 2023) has shown great improvements in the 45-day timeline.

Historical Data

Outcome	Baseline	FFY	2017	2018	2019	2020	2021
A1	2020	Target>=	78.00%	80.10%	80.10%	74.22%	74.32%
A1	74.22%	Data	77.07%	74.09%	73.54%	74.22%	74.62%
A2	2020	Target>=	54.00%	60.00%	60.00%	47.49%	47.59%
A2	47.49%	Data	52.03%	49.40%	48.51%	47.49%	47.47%
B1	2020	Target>=	81.00%	82.10%	82.10%	77.92%	78.02%
B1	77.92%	Data	79.48%	78.99%	78.23%	77.92%	79.16%
B2	2020	Target>=	50.00%	55.00%	55.00%	42.84%	42.94%
B2	42.84%	Data	48.13%	46.47%	45.12%	42.84%	45.04%
C1	2020	Target>=	82.00%	82.10%	82.10%	76.94%	77.04%
C1	76.94%	Data	78.04%	76.70%	77.75%	76.94%	76.51%
C2	2020	Target>=	51.00%	58.00%	58.00%	43.83%	43.93%
C2	43.83%	Data	50.02%	48.51%	45.96%	43.83%	42.72%

Targets

FFY	2022	2023	2024	2025
Target A1>=	74.42%	74.52%	74.62%	74.72%
Target A2>=	47.69%	47.79%	47.89%	47.99%
Target B1>=	78.12%	78.22%	78.32%	78.42%
Target B2>=	43.04%	43.14%	43.24%	43.34%

Target C1>=	77.14%	77.24%	77.34%	77.44%
Target C2>=	44.03%	44.13%	44.23%	44.33%

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

Outcome A Progress Category	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	144	2.51%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,055	18.41%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1,833	31.98%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,908	33.29%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	792	13.82%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,741	4,940	74.62%	74.42%	75.73%	Met target	No Slippage
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	2,700	5,732	47.47%	47.69%	47.10%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	131	2.29%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	976	17.03%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	2,056	35.87%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,035	35.50%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	534	9.32%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	4,091	5,198	79.16%	78.12%	78.70%	Met target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	2,569	5,732	45.04%	43.04%	44.82%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	150	2.62%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,036	18.07%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	2,009	35.05%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,965	34.28%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	572	9.98%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	3,974	5,160	76.51%	77.14%	77.02%	Did not meet target	No Slippage
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	2,537	5,732	42.72%	44.03%	44.26%	Met target	No Slippage

FFY 2022 SPP/APR Data

The number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.

Question	Number
The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's Part C exiting 618 data	7,596
The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.	1,836
Number of infants and toddlers with IFSPs assessed	5,732

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

- Developmental Profile, 4th Edition.
- The Carolina Curriculum for Infants and Toddlers with Special Needs (CCITSN), Third Edition (birth to 24 months) or
- The Carolina Curriculum for Preschoolers with Special Needs (CCITSN), Second Edition (24-60 months)
- The Hawaii Early Learning Profile (0-3)
- Service Provider documentation of evaluation, assessment and service delivery
- Family input related to outcomes
- Primary healthcare provider input related to outcomes (collected prior to the initial and annual IFSPs)

Provide additional information about this indicator (optional).

Based on the FFY 2021 Indicator 3 data and Results Indicator scores in SC's RDA matrix, the State sought additional resources and training opportunities for the Child Outcomes process. In May 2023, BabyNet state staff met with DaSy staff to discuss use of the Child Outcomes Summary Knowledge Check (COS-KC) and accompanying COS training modules. South Carolina developed a plan that would require all service coordinators in the state to complete the COS-KC. They have been given 6 months to pass the test. If they do not pass the test after two attempts, they must complete all 8 COS training modules. To date, 330 service coordinators have registered, 210 have passed, and the remainder are preparing to take the test again or working on the modules. Because the COS-KC is a very intensive assessment, which must be completed using the resources provided by DaSY, the State has confidence this process will greatly improve the accuracy of scores and fidelity of the process.

Children excluded from the State's Part C exiting 618 data include (3) children who were adopted (i.e., records were closed but the children did not exit), 14 deceased children, and 11 children re-referred in FFY 2022 who were included in previous exit data.

The Part C data system, BRIDGES, collects COS ratings at entry and exit. A COS screen was added to BRIDGES that captures the information gathered on the ECO COS form. Logic is built into the system to determine if entry/exit data is required. The system only requires entry data if the child is under 30 months at the time of referral and only requires exit data if the child received at least 6 months of services. It also will not allow the child to be exited from the system if exit data is missing. Service Coordinators can't enter exit data if entry data hasn't been entered. Because of this logic, the State no longer has missing COS data.

3 - Prior FFY Required Actions

In the FFY 2022 SPP/APR submission, the State must explain any discrepancies between the FFY 2022 total number assessed and the FFY 2022 denominator in its calculation of the percent of infants and toddlers who were functioning within age expectations in each outcome area by the time they turned three years of age or exited the program.

Response to actions required in FFY 2021 SPP/APR

3 - OSEP Response

3 - Required Actions

Indicator 4: Family Involvement

Instructions and Measurement

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Data Source

State selected data source. State must describe the data source in the SPP/APR.

Measurement

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Instructions

Sampling of families participating in Part C 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](#) page 2 for additional instructions on sampling.)

Provide the actual numbers used in the calculation.

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

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 families to whom the surveys were distributed and the number of respondent families participating in Part C. The survey response rate is auto calculated using the submitted data.

States will be required to compare the current year's response rate to the previous year(s) response rate(s), 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 families that received Part C services.

Include the State's analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers receiving services in the Part C program. States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State.

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 infants or toddlers for whom families responded are not representative of the demographics of infants and toddlers receiving services in the Part C program, 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 families (e.g., by mail, by e-mail, on-line, by telephone, in-person), if a survey was used, and how responses were collected.

Beginning with the FFY 2022 SPP/APR, due February 1, 2024, when reporting the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program, States must include race/ethnicity in its analysis. In addition, the State's analysis must also include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another demographic category approved through the stakeholder input process.

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

4 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2020	Target>=	74.00%	86.10%	86.10%	82.94%	82.95%
A	82.94%	Data	65.07%	63.19%	65.91%	82.94%	84.59%
B	2020	Target>=	72.00%	86.10%	86.10%	89.76%	89.77%
B	89.76%	Data	60.63%	64.69%	65.28%	89.76%	90.55%
C	2020	Target>=	75.00%	86.10%	86.10%	89.24%	89.25%
C	89.24%	Data	70.18%	72.54%	71.48%	89.24%	85.01%

Targets

FFY	2022	2023	2024	2025
Target A>=	82.96%	82.97%	82.98%	82.99%
Target B>=	89.78%	89.79%	89.80%	89.81%
Target C>=	89.26%	89.27%	89.28%	89.29%

Targets: Description of Stakeholder Input

The State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

The State also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual and in-person public hearings to accept public comment.

Because South Carolina did not implement any policy or procedure changes in FFY 2022, no public hearings were held this year. However, policy and procedures changes were announced towards the end of FFY 2022 that would go into effect on September 1, 2023 (FFY 2023). Because these changes went into effect in FFY 2023, they will be explained in more detail in the FFY 2023 APR.

The SC Department of Health and Human Services (SCDHHS) did, however, update the Early Intervention Medicaid manual in FFY 2022 and requested feedback from providers prior to posting the final version.

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FFY 2022 SPP/APR Data

The number of families to whom surveys were distributed	11,806
Number of respondent families participating in Part C	1,508
Survey Response Rate	12.77%
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1,260
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1,501
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	1,386
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1,503
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1,331
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1,502

Measure	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	84.59%	82.96%	83.94%	Met target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family	90.55%	89.78%	92.22%	Met target	No Slippage

Measure	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
effectively communicate their children's needs (B1 divided by B2)					
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	85.01%	89.26%	88.62%	Did not meet target	No Slippage

Sampling Question	Yes / No
Was sampling used?	NO

Question	Yes / No
Was a collection tool used?	YES
If yes, is it a new or revised collection tool?	

Response Rate

FFY	2021	2022
Survey Response Rate	15.72%	12.77%

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy, age of the infant or toddler, and geographic location in the proportion of responders compared to target group).

The state used a discrepancy criterion of +/- 3% comparing the families served by the state's early intervention system in the categories of ethnicity, race, geographic location, and language spoken in the home to families responding to the Family Outcomes survey.

Include the State's analysis of the extent to which the demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. States should consider categories such as race/ethnicity, age of infant or toddler, and geographic location in the State. States must include race/ethnicity in their analysis. In addition, the State's analysis must include at least one of the following demographics: socioeconomic status, parents or guardians whose primary language is other than English and who have limited English proficiency, maternal education, geographic location, and/or another category approved through the stakeholder input process.

Using the Early Childhood Technical Assistance (ECTA) Center Family Outcomes Calculator for Response Rate and Representativeness, data for FFY 2022 Family Outcomes Survey was found to be mostly representative across the areas of ethnicity and race, geographic location, and respondent language. Respondents who were Black/African American were underrepresented compared to the State enrollment. Respondents who were Hispanic increased by 2.3 percentage points from the previous year. Respondents who were white were overrepresented. No discernable pattern of under- or overrepresentation in respondents was observed based on geographic region. No discernable pattern of under- or overrepresentation in respondents was observed based on language used in the home.

Statewide Part C Enrollment by Race:

Asian: 1.18%
Black/African American: 28.12%
Hispanic: 9.86%
Two or More Races: 8.02%
White: 52.30%
Native Hawaiian or Other Pacific Islander: 0.26%
North American Indian or Alaskan Native: 0.26%

Survey responses by Race:

Asian: 1.6%
Black/African American: 18.23%
Hispanic: 8.6% (increased by 2.3 percentage points from FFY 2021)
Two or More Races: 6.7%
White: 64.32%
NHOPI: .20%
NAIAN: .46%

Statewide Part C enrollment by Geographic Region:

Rural: 6.69%
Urban: 93.31%

Survey Responses by Geographic Region:

Rural: 5.7%
Urban: 94.30%

Surveys Sent by language used in the home:

English: 93.33%

Spanish: 5.70%

Other: .97%

Survey Responses by language used in the home:

English: 91.23%

Spanish: 6.71%

Other: 2.06%

The demographics of the infants or toddlers for whom families responded are representative of the demographics of infants and toddlers enrolled in the Part C program. (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.

Changes in the Family Outcomes Measurement System (FOMS) will be implemented in FFY 2023. The State will begin sending surveys electronically (with paper formats still available upon request). The survey can be completed in Survey Monkey in the families' native language. Survey Monkey will also send periodic reminders to families who have not yet responded. After the two-month window has closed, the State will review response rates and will specifically target efforts for additional survey completion based on the demographics of those who have and have not responded. The State may send additional reminders electronically and/or request that the service coordinator encourage the family to complete the survey by offering a hard copy or information on how the family can receive assistance from the PTIC. Shifting from the outdated Class Climate software to Survey Monkey and engaging in targeted efforts of soliciting additional survey completions should ensure that future response data are representative of the demographics of all Part C eligible children.

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 has drastically changed the Family Outcomes Measurement System (FOMS) process for FFY 2023. State staff and TECS staff spent the majority of FFY 2022 participating in technical assistance work groups, attending conference workshops, and researching survey methods and strategies in order to develop a new FOMS process.

Prior to July 2023, the FOMS consisted of the following:

-Surveys were sent out via hard copy mail after each child received 6 months of services and again the month after their exit from Part C.

-Service Coordinators provided families with post cards containing a QR code so they could complete the survey electronically, if they preferred.

The State found this process did not positively impact our response rate, so it was decided that changes needed to be made. The new recommendations were presented to the SCICC, partnering agencies, and service coordinators. The State offered two live webinars for service coordinators to review the new process. All staff feel this new process will lessen the workload of service coordinators and hope it will yield high quality results and a higher response rate. The State also surveyed and interviewed both families and service coordinators in FFY 2022 to solicit recommendations and preferences related to the survey process. Both groups overwhelmingly recommended shifting to predominantly electric survey dissemination. Email was recommended over text messaging. Additional details related to these recommendations can be found in the Stakeholder Engagement section C of Indicator 11.

New FOMS as of July 1, 2023:

-The survey will be sent once per year to all children who are active in the system on January 1.

-The survey will be sent electronically to families via email on February 1, and families will have 2 months to complete it.

-After 30 days, TECS will review the responses and send reminders to service coordinators and to families for those who have not yet submitted.

-After March 31, the State and TECS will review the responses and the representativeness.

-Additional efforts will be made to ensure underrepresented families are able to participate.

The State looks forward to being able to report the results of the new process in the FFY 2023 APR.

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 families that received Part C services.

Survey responses were analyzed for potential non-response bias based on ethnicity, race, geographic location, and language spoken in the home. 176 survey items were omitted by an unduplicated count of 111 families. Respondent families who were non-Hispanic, lived in urban locations, and for whom English was the language spoken in the home were more likely to omit survey items than families who were Hispanic, lived in rural locations, or spoke Spanish or a non-English language in the home. No discernable pattern of high patterns of item omission were based on race of respondent.

Representativeness of Survey Respondents:

Ethnicity

Survey respondents who were Hispanic/Latino responded at a rate of 11.08%, while representing 8.85% of the state enrollment for FFY 2022. Overall non-Hispanic/Latino survey respondent rate was 12.49%.

Race

Survey respondents who were Black or African American were significantly underrepresented compared to the state enrollment by -13.07%. Survey respondents who were White were overrepresented compared to the state enrollment by +4.58%. No discernable pattern of under- or overrepresentation of survey respondents was noted for families who identified as American Indian/Alaskan Native, Asian, Native Hawaiian/Other Pacific Islander, or two or more races.

Geographic Location

No discernable pattern of under- or overrepresentation in survey respondents was observed based on rural or urban status. Families living in rural areas represented 6.69% of the state enrollment, and responded at a rate of 5.70%, a difference of -0.99%. Families living in urban areas represented 93.31% of the state enrollment, and responded at a rate of 94.30%, a difference of +0.99%.

Language Used in Home

No discernable pattern of under- or overrepresentation in respondents was observed based on language used in the home. Families who reported

speaking English as their primary language represented 93.33% of state enrollment, and responded at a rate of 91.23%. Families who reported speaking Spanish as their primary language represented 5.70% of state enrollment, and responded at a rate of 6.71%. Families who reported speaking other languages represented 0.97% of state enrollment, and responded at a rate of 2.06%.

Analysis of Omitted Items:

Ethnicity

Survey respondents who were Hispanic/Latino (n=180) omitted survey questions 17 times, with an average of 2 times per survey question, and an average omission rate of 1.21%. Non-Hispanic/Latino survey respondents (n=1327) omitted survey questions a total of 139 times, with an average of 8 times per survey question and an average omission rate of 0.62%.

Race

The average number survey items omitted by race ranged from zero for American Indian/Alaskan Native (n=17) and Native Hawaiian/Other Pacific Islander (n=5), to 3.49 for White respondents (n=1012). The average rate of omission ranged from .35% for respondents of two or more races (n=100) and American Indian/Alaskan Native, to 1.83% for Asian respondents (n=58).

Language Used in Home

The average number of survey items omitted by language used in the home were found to be 7.70 for English speakers (n=1372); 1.65 for Spanish speakers (n=101); and 1.0 for speakers of other languages. The average rates of omission were 0.56% for English speaking respondents, 1.63% for Spanish speaking respondents, and 3.23% for respondents speaking other languages.

For FFY 2023, the State is making major changes to the Family Outcomes survey process. The survey is currently sent after the first 6-month review and the month after Exit from the program. The new process will include a two-month window for families to complete the survey each year (open February through March). During the month of April, the State will review representativeness and non-response bias to determine if additional outreach needs to be completed. If not, the survey will formally close. If further outreach is needed, the survey will not close until April 30.

The survey will be sent directly to families via Survey Monkey (hard copy mail if requested). Families are able to select their preferred language in Survey Monkey. The state will continue to include contact information for the PTIC, Family Connection of South Carolina, for assistance with the survey. Family Connection is also able to assist Spanish-speaking families with completion of the survey. Spanish-speaking families receive all communications related to the survey in Spanish (this includes all email notifications and reminders, infographic that explains the survey, and survey itself).

Provide additional information about this indicator (optional).

4 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must report whether its FFY 2022 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Response to actions required in FFY 2021 SPP/APR

4 - OSEP Response

4 - Required Actions

Indicator 5: Child Find (Birth to One)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the *EDFacts* Metadata and Process System (EMAPS)) and Census (for the denominator).

Measurement

Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100.

Instructions

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

Describe the results of the calculations. The data reported in this indicator should be consistent with the State's reported 618 data reported in Table 1. If not, explain why.

5 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	0.92%

FFY	2017	2018	2019	2020	2021
Target >=	0.98%	0.99%	0.99%	1.00%	1.05%
Data	0.89%	0.98%	1.22%	1.21%	1.38%

Targets

FFY	2022	2023	2024	2025
Target >=	1.10%	1.15%	1.20%	1.25%

Targets: Description of Stakeholder Input

The State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

The State also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual and in-person public hearings to accept public comment.

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Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 1 with IFSPs	808
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 1	56,849

FFY 2022 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
808	56,849	1.38%	1.10%	1.42%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Child Find (Birth to Three)

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 3 with IFSPs.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data collected under IDEA section 618 of the IDEA (IDEA Part C Child Count and Settings data collection in the ED*Facts* Metadata and Process System (EMAPS)) and Census (for the denominator).

Measurement

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100.

Instructions

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

Describe the results of the calculations. The data reported in this indicator should be consistent with the State's reported 618 data reported in Table 1. If not, explain why.

6 - Indicator Data

Baseline Year	Baseline Data
2005	2.07%

FFY	2017	2018	2019	2020	2021
Target >=	2.49%	2.50%	2.50%	3.71%	3.76%
Data	2.82%	3.18%	3.68%	3.82%	4.71%

Targets

FFY	2022	2023	2024	2025
Target >=	3.81%	3.86%	3.91%	3.96%

Targets: Description of Stakeholder Input

The State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

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Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Child Count and Settings Survey; Section A: Child Count and Settings by Age	08/30/2023	Number of infants and toddlers birth to 3 with IFSPs	8,351
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2021	06/20/2023	Population of infants and toddlers birth to 3	170,123

FFY 2022 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
8,351	170,123	4.71%	3.81%	4.91%	Met target	No Slippage

Provide additional information about this indicator (optional).

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 45-Day Timeline

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Child Find

Compliance indicator: Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data to be taken from monitoring or State data system and must address the timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

Measurement

Percent = [(# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

Instructions

If data are from State monitoring, describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Targets must be 100%.

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 actual numbers used in the calculation.

States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child's record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child's record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

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, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

7 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	97.90%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	83.25%	67.90%	79.23%	95.15%	97.01%

Targets

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

FFY 2022 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
197	761	97.01%	100%	56.24%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.

The State faced major staffing shortages with Intake Coordinators throughout FFY 2022. These shortages caused initial intake/eligible appointments to be scheduled out further than normal. SC's 45-day process is divided among two roles. The intake coordinator has 25 days to process the referral, complete the intake/orientation, complete the initial evaluation, determine eligibility, and transfer the child to an ongoing service coordinator, who then has 20 days to complete assessments and the initial IFSP. All late IFSPs in FFY 2022 were attributed to the State, as intake coordinators are employees of SCDHHS.

The State addressed staffing shortages of intake coordinators by meeting with stakeholders at SCDHHS and other partnering agencies throughout the year to discuss possible strategies to improve the intake and eligibility timelines. These meetings yielded effective strategies that eventually helped to improve timelines. For instance, temporary staff were hired, and intake coordinators were offered overtime hours, all to help decrease the number of days from referral to the initial visit. These efforts proved to be effective as subsequent data has shown great improvements in the 45-day timeline. The State also developed an extensive tracking system to determine how long each coordinator was taking to complete the various steps involved in determining eligibility. The data produced allowed managers to monitor efficiency and productivity much more closely.

In January 2024, the State pulled subsequent data from November 2023 (10% sample by district) to determine correction of noncompliance. Indicator 7 data looked much better, as six of the seven districts had no late IFSPs and the seventh district only had one late plan. Currently, the State is still trying to fill vacancies for three intake coordinators, but that is a great improvement from the highest number of vacancies (11) in FFY 2022.

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.

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Provide reasons for delay, if applicable.

The reasons for delayed initial IFSPs are the same listed above for reasons for slippage.

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

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2022 - December 31, 2022.

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Calculations are considered to be valid because the State has built data structures and linked the data structures based upon business needs. The calculations are reliable because the data structures are based upon business rules and not internal system IDs, the requirements are well-known, and the methodology is repeatable.

Cumulative Statewide Eligible Population (All infants and toddlers who had an IFSP during FFY 2021):

White: 51.51%

Black/African American: 29.41%

2 or More: 7.80%

Hispanic: 9.15%

Native Hawaiian-Other Pacific Islander: .23%

American Indian-Alaskan Native: .42%

Asian: 1.47

Sample Population:

White: 52.30%

Black/AA: 28.12%

2 or More: 8.02%

Hispanic: 9.86%

NH-OPI: .26%

AI-AN: .26%

Asian: 1.18%

Provide additional information about this indicator (optional).

All previous findings, except 1, were cleared in January 2024 with subsequent data pulled for November of 2023. These corrections will be reported in the FFY 2023 APR.

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

As per the Correction of Non-compliance section in South Carolina's full General Supervision Plan, the state completed a subsequent data pull in January of 2023 to assist with verification of correction of non-compliance. This subsequent pull consisted of a 10% data sample by district for the month of November 2022. The State reviewed the sample of all children whose IFSPs were due in the month of November 2022. Sample data was only obtained for those local programs that were assigned a finding for Indicator 7 in October of 2022 (FFY 2021 data). Through a subsequent data pull, the State determined that the four districts who received findings for Indicator 7 were not able to show correction. The original late IFSPs were eventually held, but each of the four districts had additional late IFSPs in the month of November 2022. If Anderson, Charleston, Richland, and/or Spartanburg are not able to clear findings within 12 months, they will be required to enter into CAPs in FFY 2023.

Root Causes:

Staffing shortages for intake and ongoing service coordinators.

Action Steps:

BabyNet state office has reviewed CSPD and staffing requirements to ensure highly qualified service coordinators are hired, while also making sure the requirements are not unintentionally preventing certain professionals from being hired. The SC Early Intervention Medicaid manual and CSPD requirements were updated to allow for additional levels of review in order for the State to approve highly qualified professionals with extensive early

intervention experience. Regional Coordinators continued to review Initial IFSP related requirements with intake and ongoing service coordinators at local early intervention system meetings to ensure they are following procedures and meeting timelines.

Stakeholders and members of leadership throughout SCDHHS and other partnering agencies met several times through the year to discuss possible strategies to improve the intake and eligibility timelines. These meetings yielded effective strategies that eventually helped to improve timelines. For instance, temporary staff were hired, and intake coordinators were offered overtime hours, all to help decrease the number of days between referral and initial intake visit. These efforts proved to be effective as subsequent data (pulled in January 2024) has shown great improvements in the 45-day timeline.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

7 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

7 - OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2022-June 30, 2023). The State did not, as required by the Part C Indicator Measurement Table, describe how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

7 - 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 four uncorrected findings of noncompliance identified in FFY 2021 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2022 and each EIS program or provider 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 EIS program or provider, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 8A: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{(\# of toddlers with disabilities exiting Part C)}} \right] \times 100$.
- B. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.
- C. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State's monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child's record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child's record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to "opt-out" of the referral. Under the State's opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State's Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: 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, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2021	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

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

FFY 2022 SPP/APR Data

Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday. (yes/no)

YES

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
6,048	6,048	100.00%	100%	100.00%	Met target	No Slippage

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of children exiting Part C who have an IFSP with transition steps and services" field to calculate the numerator for this indicator.

0

Provide reasons for delay, if applicable.

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

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2022 - June 30, 2023

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

All data from the entire reporting period was included.

Provide additional information about this indicator (optional)

BRIDGES, South Carolina's Part C data system requires transition planning with the initial IFSP and with each subsequent 6-month review or evaluation of the IFSP. Service coordinators cannot save the IFSP in the data system without a completed transition plan.

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8A - Prior FFY Required Actions

None

8A - OSEP Response**8A - Required Actions**

Indicator 8B: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{(\# of toddlers with disabilities exiting Part C)}} \right] \times 100$.
- B. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.
- C. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State's monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child's record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child's record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to "opt-out" of the referral. Under the State's opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State's Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: 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, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8B - Indicator Data

Historical Data

Baseline Year	Baseline Data
2021	100.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

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

FFY 2022 SPP/APR Data

Data include notification to both the SEA and LEA

YES

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
6,048	6,048	100.00%	100%	100.00%	Met target	No Slippage

Number of parents who opted out

This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.

0

Provide reasons for delay, if applicable.

Describe the method used to collect these data.

Using the data from the BRIDGES data system, the staff at the Team for Early Childhood Solutions (TECS) sends data reports on a monthly basis to the SEA and each of the state's LEAs as follows:

- "24-month report" from BRIDGES of children who turned 24 months (2 years) of age in the previous month and for whom an initial IFSP was developed.

- "Over 24-month report" from BRIDGES of children who were 24 months (2 years) of age during the previous month and for whom an initial IFSP was developed

- "30-month report" from BRIDGES of children who turned 30 months (2.5 years) of age and for whom an initial IFSP was developed at age 30 months during the previous month.

- "Over 33-month report" from BRIDGES of children with an initial IFSP developed between the age of 33 months (2 years 9 months) and 34.5 months (2 years 10.5 months); and

- "Over 34.5-month report" from BRIDGES of children referred to BabyNet over 34.5 months of age in the assigned geographic area.

Each report includes directory information (child's name, date of birth, address and telephone number) for children in the assigned geographic area for the LEA. If no children in a school district qualify for notification, a "zero report" is made which notifies the South Carolina Department of Education and the LEA that there are no children to report in the specific month range.

The number of children reported for FFY 2021 excludes 254 children whose initial IFSP was developed within 90 days of the child's third birthday.

Do you have a written opt-out policy? (yes/no)

NO

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

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2022 - June 30, 2023

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Because the notification to the State Education Agency (SEA) and each Local Education Agency (LEA) is completed electronically as described above, the state has ensured 100% compliance with Indicator 8b.

Provide additional information about this indicator (optional).

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

8B - Prior FFY Required Actions

None

8B - OSEP Response

8B - Required Actions

Indicator 8C: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data to be taken from monitoring or State data system.

Measurement

- A. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday)}}{\text{(\# of toddlers with disabilities exiting Part C)}} \right] \times 100$.
- B. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.
- C. Percent = $\left[\frac{\text{(\# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B)}}{\text{(\# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)}} \right] \times 100$.

Account for untimely transition planning under 8A, 8B, and 8C, including the reasons for delays.

Instructions

Indicators 8A, 8B, and 8C: Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data. Provide the actual numbers used in the calculation.

Indicators 8A and 8C: If data are from the State's monitoring, describe the procedures used to collect these data. If data are from State monitoring, also describe the method used to select EIS programs for monitoring. If data are from a State database, describe the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period) and how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicators 8A and 8C: States are not required to report in their calculation the number of children for whom the State has identified the cause for the delay as exceptional family circumstances, as defined in 34 CFR §303.310(b), documented in the child's record. If a State chooses to report in its calculation children for whom the State has identified the cause for the delay as exceptional family circumstances documented in the child's record, the numbers of these children are to be included in the numerator and denominator. Include in the discussion of the data, the numbers the State used to determine its calculation under this indicator and report separately the number of documented delays attributable to exceptional family circumstances.

Indicator 8B: Under 34 CFR §303.401(e), the State may adopt a written policy that requires the lead agency to provide notice to the parent of an eligible child with an IFSP of the impending notification to the SEA and LEA under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.209(b)(1) and (2) and permits the parent within a specified time period to "opt-out" of the referral. Under the State's opt-out policy, the State is not required to include in the calculation under 8B (in either the numerator or denominator) the number of children for whom the parents have opted out. However, the State must include in the discussion of data, the number of parents who opted out. In addition, any written opt-out policy must be on file with the Department of Education as part of the State's Part C application under IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §§303.209(b) and 303.401(d).

Indicator 8C: The measurement is intended to capture those children for whom a transition conference must be held within the required timeline and, as such, only children between 2 years 3 months and age 3 should be included in the denominator.

Indicator 8C: Do not include in the calculation, but provide a separate number for those toddlers for whom the parent did not provide approval for the transition conference.

Indicators 8A, 8B, and 8C: 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, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

8C - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	93.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	90.50%	91.69%	88.91%	90.44%	92.74%

Targets

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

FFY 2022 SPP/APR Data

Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. (yes/no)

YES

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
369	547	92.74%	100%	93.86%	Did not meet target	No Slippage

Number of toddlers for whom the parent did not provide approval for the transition conference

This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.

107

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.

44

Provide reasons for delay, if applicable.

Based on a review of the data, the majority of the late conferences were attributed to the service coordinator. Staffing shortages impacted their ability to complete transition conferences in a timely manner. The State also determined there were some conferences that were late due to the referral being late, but not late enough to be considered a "late referral" and excluded from the requirements. This situation occurs when the transition conference is due prior to the initial IFSP. The State has requested that the data system vendor add a notification to the system letting intake service coordinators know if the transition conference is due prior to the initial IFSP due date. Intake management also monitors transition conference due dates in order to ensure the intake and ongoing service coordinators are collaborating to get the conference completed in a timely manner.

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

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2022-June 30, 2023

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

State office staff reviewed each record identified as having a late conference to determine if the conference eventually occurred and reviewed a 10% sample (by district) of data from the month of November 2021 to determine if all conferences were timely

Cumulative Statewide Eligible Population (All infants and toddlers who had an IFSP during FFY 2022):

White: 52.30%

Black/African American: 28.12%

2 or More: 8.02%

Hispanic: 9.86%

Native Hawaiian-Other Pacific Islander: 0.26%

American Indian-Alaskan Native: 0.26%

Asian: 1.18%

8C Sample Population:

White: 54.11%

Black/AA: 27.81%

2 or More: 7.84%

Hispanic: 9.61%

NH-OPI: 0.25%

AI-AN: 0.0%

Asian: 1.26%

Provide additional information about this indicator (optional).

Root Causes:

-Lack of communication between intake coordinators and ongoing coordinators when the transition conference is due after eligibility determination but prior to the initial IFSP due date.

-Difficulty maintaining communication with Local Education Agency (LEA) representatives in large districts.

-Service Coordinators not understanding their responsibilities.

-Difficultly training and keeping service coordinators.

Action Steps:

- During monthly staff meetings and local early intervention system meetings, Regional Coordinators and supervisors review key transition requirements with service coordinators. They will remind staff that the transition conference must occur timely, even if the invited LEA does not show.
- BabyNet State Office has begun sending upcoming transition reports to all service coordination providers reminding them of conferences that are due the following month.
- Regional Coordinators will continue to invite LEA representatives to local early intervention system (LEIS) meetings and work to ensure they have contact information for the most appropriate representatives.
- Regional Coordinators also review transition data with participants at LEIS meetings.
- The State is working with the data system vendor to revise state and district level transition reports in order to make sure LEAs and the State Education Agency (SEA) are receiving accurate and timely information for children over the age of two.
- The Part C Coordinator and the 619 Coordinator have presented to special education directors and other stakeholders at statewide conferences to review the responsibilities of Part C and Part B in regard to transition.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	4	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.

In January 2023, the State reviewed a 10% sample (subsequent data) of all children who exited in the month of November 2022. Sample data was only obtained for those local programs that were assigned a finding for Indicator 8C in October of 2022 (prong 2). Anderson, Charleston, Horry, and Spartanburg districts did not have any new noncompliance (prong 2). The Richland district had noncompliance from FFY 2020 that was not corrected in FFY 2021, so the district completed a CAP with the State. The BabyNet Regional Coordinator for the Richland district provided technical assistance and additional training to local service coordinators who had late transition conferences in FFY 2021. After completing training and technical assistance as well as showing correction with subsequent data pulls, the district completed the CAP on 8/23/23.

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

The State verifies that each late transition conference did eventually occur or the child was no longer in the program. Findings are only cleared if each previously identified late transition conference eventually occur AND there are no new late conferences identified in subsequent data pulls.

In FFY 2021, four of five findings were cleared with subsequent data pulls and one was not (Richland). The Richland finding was cleared on 8/23/2023 after their CAP was completed.

Anderson-1 Late Conference

Prong 1:

-3 days late

Prong 2:

-Cleared with subsequent data pull 1/18/23

Charleston-5 Late Conferences

Prong 1:

-4 days late

-20 days late

-26 days late

-43 days late

-Conference did not occur prior to child's exit

Prong 2:

-Cleared with subsequent data pull 1/18/23 (prong 2)

Horry-6 Late Conferences

Prong 1:

-3 days late

-4 days late

-21 days late

-22 days late

-30 days late

-33 days late

Prong 2:

-Cleared with subsequent data pull 1/18/23 (prong 2)

Richland-6 Late Conferences

Prong 1:

-5 days late

-14 days late

-27 days late

-35 days late

-47 days late

-Conference did not occur prior to child's exit

Prong 2: Additional noncompliance identified in subsequent data pull, finding continued

Spartanburg-8 Late Conferences

Prong 1:

-3 days late

- 15 days late
 - 18 days late
 - 26 days late
 - 52 days late
 - 55 days late
 - 64 days late
 - Conference did not occur prior to child's exit but was determined Part B eligible prior to the 3rd birthday.
- Prong 2:
- Cleared with subsequent data pull 1/18/23 (prong 2)

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

FFY 2020

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The State has worked diligently to partner with Part B staff and service coordinators to ensure that everyone understands the transition requirements and who is responsible for each step. Part C and Part B have partnered to develop a new side-by-side guidance document that explains the Part C and Part B responsibilities during each phase of transition (planning, notification, conference, evaluation, initial IEP, Placement, etc.). This document will include the logos of both the lead agency and the SEA. It is currently under executive review with both agencies and will be disseminated and posted as soon as possible. The State has also recently worked with stakeholders (select LEA representatives, Part C state staff, and state program managers to review the format and contents of the electronic transition report sent to LEAs and the SEA) to ensure its effectiveness.

During monthly staff meetings and local early intervention system meetings, Regional Coordinators and supervisors reviewed key transition requirements with service coordinators. They reminded staff that the transition conference must occur timely, even if the invited LEA does not show. BabyNet State Office now sends upcoming transition reports to all service coordination providers reminding them of conferences that are due the following month (even though they can run these reports on their own through the data system). Regional Coordinators continue to invite LEA representatives to local early intervention system (LEIS) meetings and work to ensure they have contact information for the most appropriate representatives. Regional Coordinators also review transition data with participants at LEIS meetings. The Part C Coordinator and the 619 Coordinator have presented to special education directors and other stakeholders at statewide conferences to review the responsibilities of Part C and Part B in regard to transition.

The four districts with uncorrected noncompliance would have had to enter into corrective action plans (CAP) with the state if they didn't show correction in FFY 2021. Richland was the only district that was required to complete a CAP.

8C - Prior FFY Required Actions

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

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

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

8C - OSEP Response

8C - 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 four uncorrected findings of noncompliance identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each EIS program or provider with findings of noncompliance identified in FFY 2022 and each EIS program or provider with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with

OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 9: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures under section 615 of the IDEA are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED Facts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

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

This indicator is not applicable to a State that has adopted Part C due process procedures under section 639 of the IDEA.

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, the State must develop baseline and targets and report 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 618 data, explain.

States are not required to report data at the EIS program level.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below.

This indicator is not applicable because the State adopted Part C due process procedures under section 639 of the IDEA.

9 - Prior FFY Required Actions

OSEP notes that this indicator is not applicable.

Response to actions required in FFY 2021 SPP/APR

9 - OSEP Response

9 - Required Actions

OSEP notes that this indicator is not applicable.

Indicator 10: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements. (20 U.S.C. 1416(a)(3)(B) and 1442)

Data Source

Data collected under section 618 of the IDEA (IDEA Part C Dispute Resolution Survey in the ED Facts Metadata and Process System (EMAPS)).

Measurement

Percent = $[(2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1] \text{ times } 100$.

Instructions

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

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

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

The consensus among mediation practitioners is that 75-85% is a reasonable rate of mediations that result in agreements and is consistent with national mediation success rate data. 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 618 data, explain.

States are not required to report data at the EIS program level.

10 - Indicator Data

Select yes to use target ranges

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

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	0
SY 2022-23 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	0

Targets: Description of Stakeholder Input

The State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

The State also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual and in-person public hearings to accept public comment.

Because South Carolina did not implement any policy or procedure changes in FFY 2022, no public hearings were held this year. However, policy and procedures changes were announced towards the end of FFY 2022 that would go into effect on September 1, 2023 (FFY 2023). Because these changes went into effect in FFY 2023, they will be explained in more detail in the FFY 2023 APR.

The SC Department of Health and Human Services (SCDHHS) did, however, update the Early Intervention Medicaid manual in FFY 2022 and requested feedback from providers prior to posting the final version.

Stakeholder groups have met to provide input on the State Systemic Improvement Plan (SSIP) and on various improvement strategies necessary to meet our state's SIMR. Formats include the following: surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

The State made significant changes to the Family Outcomes measurement process for FFY 2023. To prepare for the changes, the State interviewed families, held live webinars with service coordinators, and surveyed both families and service coordinators to solicit their feedback on proposed changes. These engagement activities proved to be effective methods of gathering input in order to make significant improvements to a process that impacts families, providers, service coordinators, and the State.

As the State faced staffing shortages with Intake Coordinators, stakeholders at SCDHHS and other partnering agencies met several times throughout the year to discuss possible strategies to improve the intake and eligibility timelines. These meetings yielded effective strategies that eventually helped to improve timelines. For instance, temporary staff were hired, and intake coordinators were offered overtime hours, all to help decrease the number of days between referral and initial intake visit. These efforts proved to be effective as subsequent data (from Nov 2023) has shown great improvements in the 45-day timeline.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2017	2018	2019	2020	2021
Target>=					
Data					

Targets

FFY	2022	2023	2024	2025
Target>=				

FFY 2022 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	0	0				N/A	N/A

Targets

FFY	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target								

FFY 2022 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2021 Data	FFY 2022 Target (low)	FFY 2022 Target (high)	FFY 2022 Data	Status	Slippage
0	0	0					N/A	N/A

Provide additional information about this indicator (optional)

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Indicator 11: 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 infants and toddlers with disabilities and their families. The SSIP includes each of the components described below.

Instructions

Baseline Data: The State must provide baseline data expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

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) for Infants and Toddlers with Disabilities and their Families. 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 infants and toddlers with disabilities and their families by improving early intervention services. Stakeholders, including parents of infants and toddlers with disabilities, early intervention service (EIS) programs and providers, the State Interagency Coordinating Council, and others, are critical participants in improving results for infants and toddlers with disabilities and their families and must be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 11. 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 Infants and Toddlers with Disabilities and their Families;
- 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 EIS Program and/or EIS Provider 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 for Infants and Toddlers with Disabilities and Their Families (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 FFY 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2023). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

11 - Indicator Data

Section A: Data Analysis

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

Families who have received BabyNet services for 6-12 months will be able to more effectively help their child develop and learn.

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)

NO

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://www.scdhhs.gov/sites/default/files/babynet/Theory%20of%20Action.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)

NO

Historical Data

Baseline Year	Baseline Data
2020	89.24%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	89.44%	89.54%	89.64%	89.74%

FFY 2022 SPP/APR Data

		FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,391	1,498	94.19%	89.44%	92.86%	Met target	No Slippage

Provide the data source for the FFY 2022 data.

Data source for FFY 2021 data for Indicator 11 are the responses to the Early Childhood Outcomes (ECO) Family Outcomes Survey-Revised (FOS-R), provided to the family following their first 6-month IFSP review and following their exit from Part C services. All families receive the survey except those whose child received less than 6 months of services.

-Numerator: # of Families who said Part C services helped them know how to help their child develop and learn

-Denominator: Total # of Families who responded to the survey

The ECO FOS-R has two sections of questions/items. For Indicator 11, the state considered the responses in both sections to determine if families thought they were able to help their child develop and learn. Families who responded with an average rating of greater than 3.99 on the items below from Section A and/or Section B are considered to have reported they were able to help their child develop and learn (numerator). The difference in the data for Indicator 11 and Indicator 4 is that Indicator 4 only uses responses from Section B of the survey.

From the tool: Section A of the Family Outcomes Survey focuses on the ways in which you [the parent] support your child's needs. Section B of the Family Outcomes Survey focuses on the helpfulness of early intervention.

Section A: Outcome 3: Helping your child develop and learn

- 2.10 - We are able to help our child get along with others.
- 2.11 - We are able to help our child learn new skills.
- 2.12 - We are able to help our child take care of his/her needs.
- 2.13 - We are able to work on our child's goals during everyday routines.

Section B: Helping your child develop and learn: How helpful has early intervention been in...

- 3.12 - Giving you useful information about how to help your child get along with others?
- 3.13 - Giving you useful information about how to help your child learn new skills?
- 3.14- Giving you useful information about how to help your child take care of his/her needs?
- 3.15 - Identifying things you do that help our child learn and grow?
- 3.16 - Sharing ideas on how to include your child in daily activities?
- 3.17 - Working with you to know when your child is making progress?

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

Data for the Family Outcomes Survey is collected from families through the Team for Early Childhood Solutions (TECS). Both online and hardcopies of the form are available, and the state's Parent Training and Information Center (PTIC) provides telephonic supports for families requiring foreign language interpretation or other types of assistance. Preliminary analysis is completed by TECS. Final analysis is completed by the State Leadership Team (SLT). Prior to FFY 2020, South Carolina used the National Center for Special Education Accountability and Measurement (NCSEAM) Impact on Family Scale (IFS) as the tool by which data for Indicator 4 were collected.

As part of the work of the SSIP, it was determined that South Carolina would change from the use of the NCSEAM-IFS to the Early Childhood Outcome Center's Family Outcome Survey (revised edition, FOS-R) for collection of data related to Indicators 4 and 11. Use of the ECO FOS-R began in July 2020. Using a scale of one to five, the FOS-R analysis includes calculating an average rating of the parent's responses to items relating to each outcome, then determining if the average meets the cutoff established by the tool's developers.

The following include the steps to determine the Indicator 11 data:

- Review Total Response data (denominator)
 - Remove duplicate children
 - Remove children who skipped more than 1 item per section
 - Average each item response for 2.10-2.13 from section A of the survey.
 - Average each item response for 3.12-3.17 from section B of the survey.
 - Filter the item responses to only include those where either section A or section B has an average rating of 3.99 or higher. (numerator)
 - Divide the number of responses with a rating of 3.99 or higher on either section A or section B by the total number of responses and multiply by 100.
- FFY 2021 Data = 92.86%

The following include the steps to determine data related specifically to the State-identified Measurable Result (SiMR):

- Review Response data
- Remove duplicate children
- Average each item response for 2.10-2.13 from section A of the survey.
- Average each item response for 3.12-3.17 from section B of the survey.
- Filter the item responses to only include those where the child had received less than or equal to 12 months of services. (denominator)
- Filter the item responses to only include those where either section A or section B has an average rating of 3.99 or higher. (numerator)
- Divide the number of responses with a rating of 3.99 or higher on either section A or section B by the total number of responses and multiply by 100.

FFY 2022 SiMR Data= 90.84% (average of section A and section B for children who received less than 12 month of services)

SiMR: Families who have received BabyNet services for 6-12 months will be able to more effectively help their child develop and learn.

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

YES

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

The additional data collected by the State are the Routines-based Interview (RBI) boot camp Evaluations and Discussions, RBI Implementation Checklists, and Family Outcomes Measurement System (FOMS) Quarterly Snapshots. The evaluations and discussions are used to determine the needs and concerns of the Service Coordinators who will be using the RBI with families. In addition, it provides the necessary information to determine if revisions are needed for the training.

Quarterly Snapshots are reports compiled of data, demographics, and comments/feedback from the family surveys and sent to each service coordination agency. The data provided in the snapshots assists both Service Coordination agencies and State staff in determining how many surveys were sent and received, which families responded, and what families are saying about the services they received. The State is able to track representativeness and non-response bias based on the demographics sent in each quarterly report.

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

YES

Describe any data quality issues, unrelated to COVID-19, specific to the SiMR data and include actions taken to address data quality concerns.

The response rate of the Family Outcomes survey dropped significantly from FFY 2021 to FFY 2022. The State has drastically changed the Family Outcomes Measurement process. See the description of the new process in the "infrastructure improvement strategy" section below.

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.

The evaluation plan can be found in the Phase 3 Year 1 SSIP report. <https://www.scdhhs.gov/sites/default/files/babynet/SSIP%20Phase%203-year%201-4.28.2020-Final.pdf>

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

NO

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

The State continued with the implementation of the Family Outcomes Measurement System (FOMS) and the family assessment process in FFY 2022. Various activities were completed for each infrastructure improvement strategy and are listed below.

1. SSIP Collaboration Workgroup Meetings

The SSIP Collaboration Workgroup meets once a month to discuss and delegate the activities of the SSIP timeline. The workgroup shares updates of the ongoing work completed for each of the infrastructure improvement strategies. This meeting is also utilized to brainstorm potential system and practice changes. Information gathered during the Family Outcomes Community of Practice is discussed and considered for improvement efforts and achievement of the SiMR.

2. Quarterly Snapshots

Quarterly Snapshots began in FFY 2021 and continued during FFY 2022. These reports are compiled of data, demographics, and comments from the Family Surveys. In May 2022, these reports were sent to Service Coordination agencies, and included data from July 2022 – April 2023. The reports provide the Service Coordination agencies with the number of family surveys sent and received, which families responded, and what families are saying about the services they receive.

3. Stakeholder Feedback Groups

Based on the data of the FOS from FFY2022, two Stakeholder Feedback Groups were developed, a family feedback group and a Service Coordinator group. The purpose of these groups was to provide informed responses to the current FOMS and FOS.

4. Family and Service Coordinator Feedback Surveys

The SSIP Collaboration Workgroup developed two surveys for each of the stakeholder groups. The purpose of the surveys was to gain a perspective from families and SC's who had been a part of the family survey process

5. Communication to Service Coordinators of FOS and FOS Training

An announcement was made and sent on the TECSINFO ListServ to notify all BabyNet Service Coordinators of the upcoming webinar for the changes made to the Family Outcomes Measurement System and the Family Outcomes Survey Process.

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.

1. Short-term Outcomes – 1 year

- Implementation of Family Outcomes Measurement System (FOMS) and the Family Outcomes Survey (FOS) statewide.
- Implementation of RBI statewide

The FOS was fully implemented, statewide, during FFY 2021. Since FFY 2021 was the first year to have a complete set of data of the new survey process, FFY 2022 provided a second set of data to use for comparison. The SSIP Collaboration Workgroup analyzed the family survey data and the current process of dissemination of the survey.

The RBI has been implemented statewide, with each region being trained in the train-the-trainer model. Each trainee that attended the boot camp was required to record an RBI, submit it to the program director at Team for Early Childhood Solutions (TECS), and receive a passing score of 80%. This score is determined by a score sheet containing a list of 37 objective indicators. These indicators include the requirements to complete the RBI with fidelity. Surveys were provided to the staff who completed the RBI training. The survey responses provide TECS and the State feedback on RBI training and practice improvements.

2. Intermediate Outcomes – 2-4 years

- Survey response rates will increase statewide
- The response rate decreased from FFY 2021 to FFY 2022.
- State staff will analyze FOS comparison data and discuss response rates and practice changes for the family survey process.
- RBI Technical Assistance Process
- RBI Materials translated into Spanish
- Annual RBI Boot Camp

After comparison of the FFY 2021 and FFY 2022 FOS data, the SSIP Collaboration Workgroup determined that some Family Outcomes ratings increased from previous years, but the response rate decreased. The results of the data were shared with SLT and RLT and the SSIP Workgroup decided to gather stakeholder feedback to determine the next steps for the FOMS. A family feedback group and a Service Coordinator feedback group

were established.

An annual RBI boot camp was provided to Service Coordination agencies in June 2023. This boot camp gave agencies that experienced turnover and/or growth the opportunity have staff trained in RBI. TECS has put an RBI technical support process in place for all agencies. If an agency is facing challenges with the RBI implementation process or specific gaps within the RBI process, individualized or agency specific support can be scheduled.

TECS has had some of the RBI materials translated into Spanish and will continue to add to the library of RBI translated resources.

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.

During FFY 2022, the State evaluated the efficacy of the FOMS revisions from the previous two years. Although the overall outcomes ratings increased slightly, the response rate actually decreased. The State also received anecdotal feedback from service coordinators that their part of the process was too time-consuming and didn't seem to influence participation from the families. The State decided to reconvene the previous FOMS workgroup to determine next steps and draft a new plan. Members of the workgroup met with families and service coordinators to discuss the current process and receive input on recommended changes and sent surveys to families and service coordinators to solicit the same input. Several members of the group participated in the DaSy and ECTA Centers' Family Outcomes Data Community of Practice, DaSy's monthly Data Manager and Office Hours calls, and attended in-person conference workshops related to the Family Outcomes process. The group drafted the following plan that will go into effect on July 1, 2023.

1. Develop the Family Outcomes Survey Infographic. (completed September 2023)
2. Host two webinars for service coordinators and service providers explaining the new process. (completed 10/25/23 and 11/17/2023)
3. Remind service coordinators to verify that families' email addresses are accurate in the data system. (completed 11/20/2023 and 1/8/2024)
4. Provide TECS with a list of all children who are currently active with an IFSP. (completed 1/8/24)
5. TECS will email each family an infographic that explains the purpose and importance of the survey and explains that they will be receiving an email from Survey Monkey on February 1st that will provide a link for them to complete the survey. Spanish-speaking families will receive a Spanish translation of the infographic and email. (to be sent 1/22/2024)
6. Survey Monkey will send unique links to every family on February 1. The email will have instructions on completing the survey and how to contact the PTIC if they have issues. Spanish-speaking families will receive this information in Spanish, as well. All families will be able to complete the survey in their native language in Survey Monkey.
7. Service Coordinators will remind families that the survey is coming the first week of February and will also assist families with receiving a hard-copy survey if that is their preference.
8. On March 1, TECS will review the response rates after the first 30 days. Survey Monkey will send reminders to families who have not yet completed the survey. Service coordinators will receive a list of families who have not completed the survey and will be asked to remind the families to complete it.
9. The survey will informally close on March 31. During the month of April, TECS and BabyNet State Office will review the response rates, specifically the representativeness of the respondents, and completed targeted outreach to solicit additional participation from those who have not responded.

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

Routines-based Interview

Provide a summary of each evidence-based practice.

The Routines-Based Interview (RBI) is an evidence-based assessment tool created by Dr. Robin McWilliam. It is a semi-structured interview intended to create an established relationship between the service provider and family upon the first meeting. The service coordinator and caregiver will carefully go through the daily activities experienced by the caregiver and child, routine by routine.

Provide a summary of how each evidence-based practices 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.

The RBI will result in identifying areas of need and a rich list of outcomes the SC, family and child can work on during their family training visits. The RBI allows the SC to understand the family as a whole unit, focusing on outcomes that will be worked on throughout a caregiver's already existing routines. The RBI also creates a strong, trusting relationship between SC, family and caregivers with this relationship proving to lead to more successful child outcomes.

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

TECS will be observing (via video recording) RBIs completed by trainers throughout the state every two years.

All Service Coordination agencies will continue to observe their staff one time a year and complete a score sheet with the RBI indicators. Service Coordinators must continue to score 80% on the RBI indicator checklist.

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.

TECS, SLT, and RIT will begin to slowly implement the Pyramid Model. This model is a form of coaching for Service Coordinators during their special instruction. The Pyramid Model will aid in the continued efforts of the RBI and the special family-centered instruction and targeted services for those who need support.

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

September 2023 – Launched the RBI Community of Practice (CoP)

This community of practice provides specific training on each indicator on the RBI checklist, breaking down the components. TECS will provide surveys each year to RBI trainers and agency owners to gauge their comfort level with the RBI as well as get feedback on their implementation process.

October 2023 - At this time, some of the RBI documents have been translated into Spanish. TECS will continue to build a library of RBI materials that are translated into Spanish.

January 2024 –RBI Community of Practice will take place bi-monthly and be offered virtually for one hour/month.

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.

Because the FOMS process is being revised again, the State has chosen to continue with the current SSIP. The State has seen an increase in the data for indicator 11 respective to the SiMR (children receiving services for less than 12 months), but not enough to consider complete success.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The State solicits input and feedback from the provider community through the South Carolina Interagency Coordinating Council (SCICC) meetings, as well as calls and face-to-face meetings with providers.

The State also posts all policy/procedure changes on the website, provides a mechanism for the public to submit comments in writing (electronically), and holds virtual and in-person public hearings to accept public comment.

Because South Carolina did not implement any policy or procedure changes in FFY 2022, no public hearings were held this year. However, policy and procedures changes were announced towards the end of FFY 2022 that would go into effect on September 1, 2023 (FFY 2023). Because these changes went into effect in FFY 2023, they will be explained in more detail in the FFY 2023 APR.

The SC Department of Health and Human Services (SCDHHS) did, however, update the Early Intervention Medicaid manual in FFY 2022 and requested feedback from providers prior to posting the final version.

Stakeholder groups have met to provide input on the State Systemic Improvement Plan (SSIP) and on various improvement strategies necessary to meet our state's SiMR. Formats include the following: surveys, emails, local meetings, and conference calls. The same processes were used to collect feedback on the RBI training process and the revised Family Outcomes Measurement System, which are the focus of the two coherent improvement strategies for the SSIP. Progress on the SSIP is also discussed at SCICC meetings and stakeholder input is gathered.

The State made significant changes to the Family Outcomes measurement process for FFY 2023. To prepare for the changes, the State interviewed families, held live webinars with service coordinators, and surveyed both families and service coordinators to solicit their feedback on proposed changes. These engagement activities proved to be effective methods of gathering input in order to make significant improvements to a process that impacts families, providers, service coordinators, and the State.

As the State faced staffing shortages with Intake Coordinators, stakeholders at SCDHHS and other partnering agencies met several times throughout the year to discuss possible strategies to improve the intake and eligibility timelines. These meetings yielded effective strategies that eventually helped to improve timelines. For instance, temporary staff were hired, and intake coordinators were offered overtime hours, all to help decrease the number of days between referral and initial intake visit. These efforts proved to be effective as subsequent data (from Nov 2023) has shown great improvements in the 45-day timeline.

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

Several stakeholder groups were formed so the SSIP Collaboration Workgroup could gain perspective from individuals who are involved in the family survey process. The Family Feedback Group and the Service Coordinator Feedback Group were formed to solicit feedback regarding the survey process. Both groups were asked to complete a short survey to help the State discover what is working well and to receive suggestions on how to improve the current FOS process.

The following questions were included on the Family Feedback Survey:

Q1- Did you receive at least one survey from BabyNet?

Q2- Did you complete and submit at least one survey from BabyNet?

Q3- If you did not complete a survey, what was the reason?

Q4- Did you complete the survey online or mail in a hard copy?

Q5- Did you receive a postcard from your Service Coordinator that provided an explanation of the survey and offered a QR code for the electronic version of the survey?

Q6- If you received a postcard, did you think it was helpful?

Q7- How would you prefer to receive the survey?

Q8- If BabyNet only sent surveys once per year, when would you prefer to receive it?

Q9- If BabyNet had not received a survey response from you within 30 days, how would you like to receive a reminder?

Q10- Would you be interested in providing feedback in the future?

Q11- Please provide any additional information you think would be helpful to BabyNet State Office about the family survey.

In addition to answering the survey questions, some of the families provided additional comments and suggestions. Most families preferred to receive the survey by email. They expressed email would provide easy access and could be completed on their phone during their down time. They felt the Service Coordinator explained the process and purpose of the survey well. Some families indicated the surveys could be seen as spam if received by text, but if they were notified beforehand, they would know what to expect and could be on the lookout. Another family could not figure out how to work the QR code, so a direct link to the survey might be easier. An excerpt of family comments is included below.

"I am willing to help BabyNet in every way possible. I would have filled out the survey, but the QR code did not work."

"It would be helpful for a text to go out due to all the spam calls that I receive on a daily basis."

"Our EI made it very easy, and explained what it was for and the timing."

The following questions were included on the Service Coordinator Feedback Survey:

Q1- I am able to confidently and accurately explain the three Family Outcomes and the survey process to families.

Q2- How often do you think families should be surveyed?

Q3- In addition to hand-delivering the postcard, what other distribution methods do you use?

Q4- What is the preferred method of postcard distribution?

Q5- Rank how most families communicate with you (email, text, phone).

Q6- What suggestions do you have for ensuring families will complete the family survey?

The responses received from the Service Coordinators who completed the survey informed the workgroup of revisions to be made for the family survey process. Many of the Service Coordinators disclosed the pressure they are under with high caseloads and staff turnover. Assisting in the family survey process added to their stress because they felt the process was complicated. Prior to the first phase of the revised family survey process, Service Coordinators were not involved in the process at all. The State chose to include them because Service Coordinators develop trusting relationships with families, so they had the opportunity to educate families on the purpose of the survey and families would feel comfortable enough to ask questions. The idea was that more surveys would be completed since families understood the intention and would be less likely to throw them away or lose them since they were expected. After reviewing the feedback offered by the Service Coordinators, the State plans to create a process that still involves them, but with less responsibility. The State also determined additional training on the FOMS would be necessary because of high turnover and to explain how the ECO Family Outcomes Survey-revised was chosen. Comments from the Service Coordinators are included below.

"I think making the survey shorter and available through a link would be better!"

"I feel like parents see how long the survey is and then they just don't complete it. The survey should be around 10 questions at the most. The length of the survey makes this process too complicated. Also, currently the EI world has a huge turnover rate due to the demands of the job. I feel like these surveys should be the state offices' responsibility, not another thing added to the EI."

The current family survey process involves the Service Coordinator hand-delivering a postcard explaining the family outcomes and how to complete the survey. It includes a QR code that links to the survey and a participant code the family will enter for tracking purposes. Families are also mailed a hard copy of the survey. Service Coordinators receive notification of the families who have not responded and are expected to follow-up and/or send reminders. The feedback survey indicated that most Service Coordinators felt the FOS should be sent to families either by text or email and that a postcard was not necessary. The State plans to involve TECS more on the frontend of the FOS process and have Service Coordinators take part in the follow-up. Below are some of the suggestions received from Service Coordinators.

"An email sent to families with a link from BabyNet."

"Email would maybe be best."

"Have an online version in Spanish."

"I believe if the surveys are emailed or texted to the families, they are more likely to complete them. Most of the time they don't keep up with the postcard provided in person and everyone is usually always on their phone. If a text was sent to complete the survey in the evening hours, after children are in bed, I would be more likely to have time to complete it."

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

Families and Caregivers indicated that if their child attended daycare, a postcard explaining the FOS may have been received, but due to there being many other forms and paperwork being sent home, it either went unnoticed or was lost. Majority of the families/caregivers stated they would like to have a family survey link sent to them by email. During the Service Coordinator feedback survey, stakeholders expressed a concern in how time consuming the current family survey process is, as well as some confusion on receiving participant codes. Service Coordinator Supervisors also requested additional training resources that could be shared with their staff. The SSIP Collaboration Workgroup discussed these concerns and have developed a new family survey process to be implemented in FFY 2023.

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.

Overhauling the FOMS system is the biggest change the State expects to implement related to the SSIP and SiMR.

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

February 1, 2024: Survey will be sent electronically to approximately 8200 families.

March 1, 2024: The State will review responses to date and send reminders as needed.

April 1, 2024: The State will review responses and use the month of April to engage in targeted efforts to improve the response rate focusing on underrepresented families.

July 1, 2024: Service Coordination companies will receive detailed reports including response data and anecdotal information from their families.

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

The State does not foresee any upcoming barriers.

Provide additional information about this indicator (optional).

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - 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 Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role

Designated Lead Agency Director

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.

Name:

Jennifer Buster

Title:

Part C Coordinator

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