Public Schools of North Carolina
State Board of Education
Department of Public Instruction

Report to the North Carolina General Assembly

Report on Educational Performance of Children with Disabilities

SL 2006-69 (HB1908)

Date Due: October 15, 2019
Report # 116
DPI Chronological Schedule, 2019-2020

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NC
Part B

FFY2017
State Performance Plan / Annual Performance Report

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

The North Carolina Department of Public Instruction (NCDPI), Exceptional Children Division (ECD) gathered and analyzed data for the development of the Annual Performance Report (APR). Throughout the year, Exceptional Children Division staff met periodically to review and analyze progress made toward the development of the APR. Following discussions, reviews and analyses, staff provided input for use in the continuing development of the APR.

The Council on Educational Services for Exceptional Children, the State Advisory Panel, serves as the Stakeholder Steering Committee. Exceptional Children Division staff presented data and information, reviewed progress made, and solicited members' input, as required, toward the development of the APR at the Council's quarterly meeting in December 2018. Council members were also provided the opportunity to provide additional input for consideration any time prior to the clarification period.

By June 1, 2018, the NCDPI-ECD reported to the public on the progress and/or slippage in meeting the measurable and rigorous targets. The APR was posted on the NCDPI web page and distributed directly to the Local Education Agencies (LEAs). In addition, it will be made available to the media. The ECD also reported on the performance of each LEA on the targets by June 1, 2018. The reports were posted on the Department's website, sent to the LEAs, and distributed to local and regional media. The APR and LEA public reports were posted at http://www.nccecas.org/ and the APR will also be posted at http://ec.ncpublicschools.gov/ . This same process will be implemented by June 1, 2019 for posting and distributing the FFY 2017 APR and the LEA performance reports.

The FFY 2017 APR contains information specific to measuring progress or slippage against State targets for Indicators 1, 2, 3b-c, 4a-b, 5a-c, 6a-b, 7a-c, 8, 9, 10, 11, 12, 13, 14, 15, and 16. North Carolina uses OSEP-approved sampling plans for Indicators 8 and 14. North Carolina once again contracted with PEIDRA Services, Inc. to collect and analyze parent involvement data for Indicator 8. Each LEA, in the approved Indicator 14 sample, collected and submitted its data to the NCDPI-ECD. As a result, in FFY 2017, Indicator 14 maintained a high response rate of 45.88%.

Attachments

File Name	Uploaded By	Uploaded Date

No APR attachments found.

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General Supervision System:

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

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

Supports practices that improve educational results and functional outcomes for children and youth with disabilities;

Uses multiple methods to identify and correct noncompliance as soon as possible but no later than one year after noncompliance is identified; and

Utilizes mechanisms to encourage and support improvement and enforce compliance.

Components of North Carolina's General Supervision System

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

1) State Performance Plan (SPP) and Annual Performance Report (APR)

2) Policies, Practices, and Procedures

3) Dispute Resolution System

4) Data Collection

5) Monitoring Activities

6) Improvement, Correction, Incentives, and Sanctions

7) Targeted Technical Assistance

8) Fiscal Management

Each component, while separate in its description, connects to form a comprehensive system. Through the triangulation of these activities the NCDPI–EC Division complies with federal regulations. Descriptions of the components are included in the attached, North Carolina Department of Public Instruction Exceptional Children Division General Supervision Position Paper.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Technical Assistance System:

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

North Carolina has combined the information about its Technical Assistance/Support and Professional Development Systems.

The NCDPI-EC Division has provided technical assistance/support and professional development to LEAs in various ways through multiple teams, committees, groups, and individuals. Certain technical assistance (e.g. responding with information to requests by phone or on-site at Regional EC Directors quarterly meetings) and professional development (semi-annual EC Directors' Institutes, Annual Conference on Exceptional Children for more than 3,000 participants, multi-day and weeklong Summer Institutes, by topic, and other topical institutes have been consistently provided by the EC Division over the years.

When the EC Division developed its Strategic Vision for the next several years, it reviewed its processes for technical assistance and professional development. Through this process some specific needs were identified, including a need for:

- Common processes for TA requests, follow up, and impact assessment
- Refinement of systems of support to utilize/align tiered systems of support (technical assistance and professional development)
- Fidelity measures for all initiatives
- Need for stronger alignment with curriculum standards
- Additional support for developing and providing Specially Designed Instruction and progress monitoring (not only training, but implementation, fidelity checks, evaluation of effectiveness)
- Professional Development aligned to identified curricular or program needs which includes provisions for high-fidelity

- Program implementation (including TA, coaching, and program evaluation)

- Relationships to State Board of Education Goals and the EC Division Strategic Vision

- Use of LEA Self-Assessment data to drive customized support

The EC Division developed its tiered system of technical assistance/ support and professional development by including universal, tailored, and customized support for LEAs. The ECD also created an operational definition of its universal work. With a clearly articulated and understood definition of universal supports to LEAs, the ECD can effectively leverage the existing support system to the greatest extent possible.

The EC Division, with stakeholder involvement, defined critical features of an LEA's EC program that were t hen consolidated into six core elements of an LEA EC Program: Policy Compliance, Fiscal Management, IEP Development and Implementation, Research-Based Instruction and Practices, Problem-Solving for Improvement , and Communication and Collaboration. We realized that LEAs required support in the systematic process of problem - solving their own data sources and that it would be necessary to measure implementation of the critical components of an effective EC program. The EC Division knew this was going to require building the capability to provide outcome data in accessible and actionable ways to the LEAs. In addition, a way to measure how each LEA worked would also be needed. The LEA self-assessment process places an emphasis on data-driven decision making, and provides inform at ion that is bot h useful to LEAs in supporting their own growth and providing the EC Division the information needed to provide more customized support .

The LEA self-assessment process was built around the six core elements identified and the district's capacity for engaging in systematic problem solving. More process and fidelity data would help the EC Division understand how LEAs were doing their work. Just knowing *what* LEAs were doing did not provide the diagnostic information needed to design and provide customized, tiered support. Through the North Carolina Department of Public Instruction's (NCDPI) partnership with the National Implementation Research Network (NIRN) and the State Implementation and Scaling-up of Evidence-based Practices Center (SISEP), there was an emphasis on ensuring that implementation science informed the work of the entire agency. This included alignment of any new work with existing work and building the knowledge and tools to best support all implementation efforts. To do so, it was critical to define the core components of effective EC programming in a way that was knowable, teachable, and doable. This work was collaboratively completed by state and district-level participants through the development of a practice profile. Subsequently, the document was further refined into a LEA Self-Assessment tool. After several iterations (including 3 rounds of field testing) and a wealth of feedback from LEAs, EC Division staff, Curriculum & Instruction staff, and partners from 3 different TA centers (Mid-South RRC, SISEP, PBIS), the EC Division has a tool and process that was piloted in each of the State's eight (8) regions during the 2014-15 school year and was rolled out for use at the beginning of the 2015-16 school year. Quarterly Regional EC Directors' meeting during the 2015-16 school year were devoted to the development of each LEA's Self-Assessment. The initial LEA Self-Assessments were submitted to NCDPI's EC Division by the end of July 2016. Following implementation and a review of updated data, LEAs submit LEA Self-Assessment updates annually.
The LEA Self-Assessment process provides more accessible and actionable data to LEAs; a tool for reviewing and assessing current practice; and a structure for problem identification, priority setting, solution identification and selection, improvement planning, and installation. Completed LEA Self-Assessments yield data for the ECD that have never been readily accessible before. This information describing *how* an LEA is working to implement evidence-based practices facilitated the EC Division's identification of the specific types and levels of support an LEA requires. Information gleaned from EC Division reviews of the LEA Self-Assessment data and improvement activities selected by the LEAs during the beginning of the 2016-17 school year helped drive how the EC Division allocates time and resources to support LEAs through technical assistance and professional development. With the additional process information, the EC Division built a continuum of support for LEAs -- providing universal support to all and tailored and/or customized support to those LEAs in need of such support. Comprehensive professional development (e.g., training and coaching) and technical assistance at the intensity level needed to address the LEAs compliance and/or implementation needs will ultimately improve outcomes for students with disabilities.
With the implementation of the LEA Self-Assessment process, the EC Division has used the results to drive customized support for each LEA. This necessitated refining an internal process flow for planning of professional development, coaching, and technical assistance. The EC Division provides customized support through regional staff and team structures, so a common process for comprehensive professional development and technical assistance requests, follow up, and impact assessment was necessary and resulted in the development of an electronic professional development catalog that includes all of the professional development offered annually by the EC Division. We expect to refine our systems of both monitoring and support to align with and utilize a tiered system model. Overall, the ECD expects these system refinements to result in improved provision of services for LEAs, strengthened systems of support for students and families, and ultimately improved outcomes for students with disabilities.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for students with disabilities.

Please see the Technical Assistance System Section for North Carolina's combined information about its Technical Assistance/Support

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Stakeholder Involvement: ☑ apply this to all Part B results indicators

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

The Council on Educational Services for Exceptional Children, the federally required State Advisory Panel, serves as the Stakeholder Steering Committee for the State Performance Plan/Annual Performance Report. On December 12, 2018 at the Advisory Council's quarterly meeting, Exceptional Children Division staff members presented data and information, reviewed targets and progress made, and solicited members' input as required. Advisory Council members were able to provide additional input by email prior to the clarification period. Additional groups, that include representatives from the Council, advise the North Carolina Department of Public Instruction (NCDPI) on the development of Indicator 17 - State Systemic Improvement Plan (SSIP). A description of these stakeholder groups and their work are described in Indicator 17.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Reporting to the Public:

How and where the State reported to the public on the FFY 2016 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2016 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2016 APR in 2018, is available.

By June 1, 2018, the North Carolina Department of Public Instruction (NCDPI), Exceptional Children Division reported to the public on the progress and/or slippage in meeting the measurable and rigorous targets of its Annual Performance Report (APR). The APR was posted on the NCDPI web page and distributed directly to the Local Education Agencies (LEAs). In addition, it was made available to the media. The Exceptional Children Division also reported on the performance of each LEA on the targets in the APR by June 1, 2018. The reports were posted on the Department's website, sent to the LEAs, and distributed to local and regional media. The APR and LEA public reports were posted at http://www.nccecas.org/ . Click on the LEA APRs 2016-17 tab at the top for the APR-2016B-NC and its accompanying attachments. A link to the APR was also posted at http://ec.ncpublicschools.gov/. Click on the State Performance Plan on the left side of the page and then click on the links provided for the 2016-2017 school year.

Attachments

File Name	Uploaded By	Uploaded Date	Remove
7-2015generalsupervisionpositionpaper1.15.15final.pdf	Nancy Johnson	1/28/2019 10:16 AM	

Actions required in FFY 2016 response

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 1: Graduation

Monitoring Priority: FAPE in the LRE

Results Indicator:
Percent of youth with Individualized Education Programs (IEPs) graduating from high school with a regular high school diploma.

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

Historical Data

Baseline Data: 2006

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			50.00%	70.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%
Data		93.90%	49.40%	56.30%	56.80%	56.80%	57.60%	57.20%	59.90%	62.30%	64.40%

FFY	2015	2016
Target ≥	80.00%	80.00%
Data	67.30%	68.90%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	80.00%	80.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	9/28/2018	Number of youth with IEPs graduating with a regular diploma	8,600	
SY 2016-17 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	9/28/2018	Number of youth with IEPs eligible to graduate	12,229	null
SY 2016-17 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec C150; Data group 695)	9/28/2018	2014-15 Regulatory four-year adjusted-cohort graduation rate table	70.32%	Calculate

FFY 2017 SPP/APR Data

Number of youth with IEPs in the current year's adjusted cohort graduating with a regular diploma	Number of youth with IEPs in the current year's adjusted cohort eligible to graduate	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
8,600	12,229	68.90%	80.00%	70.32%

Graduation Conditions

Choose the length of Adjusted Cohort Graduation Rate your state is using: 4-year ACGR

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma and, if different, the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma. If there is a difference, explain.

North Carolina's 4-Year Adjusted Cohort Graduation Rate is the ratio of youths with IEPs graduating with a regular diploma in 2016-17 or earlier, to all youths with IEPs entering ninth grade in 2013-14 for the first time.

Youths with IEPs entering ninth grade in 2013-14 & graduating with a regular diploma in 2016-17 or earlier ÷ All youths with IEPs entering ninth grade in 2013-14 for the first time X 100 = Percent of youths with IEPs in the state graduating from high school with a regular diploma.

The 4-Year Adjusted Cohort Graduation Rate used for youths with IEPs is the same graduation rate calculation and timeline used for all students in North Carolina as established by the Department under the ESEA.

Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? No

Provide additional information about this indicator (optional)

2013-14 entering youths with IEPs, who graduated with a regular diploma in 5 years or less (Numerator) - 9,062

Number of youths, with IEPs, entering 9th grade for the first time in 2013-14 (Denominator) - 12,229

Percent of youths, with IEPS, entering 9th grade in 2013-14 and graduating with a regular high school diploma in 5 years or earlier - 74.1%

Change from previous 5-year Adjusted Cohort Graduation Rate: + 1.0 percentage point

North Carolina's 12,229 youths with IEPs, who entered 9th grade for the first time in 2013-14 was a 4.84% increase in the number of students (565) who entered 9th grade for the first time in the previous year. North Carolina's 9,062 youths with IEPs, who graduated with a regular diploma in 5 years or less was a 6.30% increase in the number of students (537) who graduated in 5 years or earlier in the previous year.

Actions required in FFY 2016 response

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 2: Drop Out

Monitoring Priority: FAPE in the LRE

Results Indicator:
Percent of youth with IEPs dropping out of high school.

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

Target ≤				6.50%	6.50%	6.00%		4.70%	4.70%		4.50%

Data	4.65%	4.07%

☐ ☐

FFY	2017	2018

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introd

Enter additional information about stakeholder involvement

Option 1

Has your State made or proposes to make changes to the data source under Option 2 when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012? No

Number of youth with IEPs who exited special education due to dropping out	FirstMonth20DayMembership for youth with + Numerator (see formula in explanation of methodology)	FFY 2016 Data	Y 2017 Target	

'ferent calculation methodology

☐ Change numerator description in data table

enominator description in data table

In accordance with Option 2, North Carolina used the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data. Data for this indicator are "lag" data.

North Carolina uses the same calculation, which is an event rate calculation, for dropout rate for youths with IEPs, as it does for all youth. The rate calculation is listed below using 2016-17 lag data. Rate = 100 * Numerator ÷ (Denominator + Numerator) 100 * 2,243 ÷ (54,606 + 2,243) = 3.95% or 100 * 2,243 ÷ 56,849 = 3.95%

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

Is there a difference in what counts as dropping out for youth with IEPs? No

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Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3B: Participation for Students with IEPs

Monitoring Priority: FAPE in the LRE

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

A. **Indicator 3A – Reserved**
B. **Participation rate for children with IEPs.**
C. **Proficiency rate for children with IEPs against grade level and alternate academic achievement standards.**

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

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Reading	A Grade 3	2005	Target ≥				99.70%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.60%	99.80%	99.60%	99.80%	99.80%	99.60%	99.50%	99.40%	99.66%	99.78%
	B Grade 4	2005	Target ≥				99.70%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.60%	99.90%	99.70%	99.90%	99.70%	99.60%	99.60%	99.40%	99.59%	99.80%
	C Grade 5	2005	Target ≥				99.70%	95.00%	95.00%	99.30%	95.00%	95.00%	95.00%	95.00%
			Data		99.60%	99.90%	99.70%	99.70%	99.80%	99.50%	99.50%	99.40%	99.69%	99.77%
	D Grade 6	2005	Target ≥				99.60%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.30%	99.60%	99.20%	99.60%	99.50%	99.30%	99.40%	99.10%	99.36%	99.41%
	E Grade 7	2005	Target ≥				99.40%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.10%	99.40%	99.10%	99.30%	99.40%	99.10%	99.10%	99.00%	99.17%	99.41%
	F Grade 8	2005	Target ≥				99.30%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		98.70%	99.50%	98.70%	99.00%	98.30%	98.90%	99.00%	98.70%	98.98%	99.03%
	G HS	2005	Target ≥				96.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		93.00%	100%	96.50%	77.00%	74.30%	84.20%	97.40%	97.80%	94.96%	96.62%
Math	A Grade 3	2005	Target ≥				99.70%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.60%	99.90%	99.60%	99.80%	99.80%	99.60%	99.40%	99.40%	99.68%	99.76%
	B Grade 4	2005	Target ≥				99.70%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.60%	99.90%	99.60%	99.80%	99.70%	99.60%	99.60%	99.50%	99.59%	99.76%
	C Grade 5	2005	Target ≥				99.70%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.60%	99.90%	99.70%	99.70%	99.80%	99.50%	99.50%	99.40%	99.69%	99.75%
	D Grade 6	2005	Target ≥				99.40%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		99.10%	99.90%	99.10%	99.50%	99.50%	99.30%	99.30%	99.10%	99.27%	99.39%
	E Grade 7	2005	Target ≥				99.20%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		98.90%	99.90%	99.00%	99.20%	99.40%	99.10%	99.10%	98.90%	99.11%	99.34%
	F Grade 8	2005	Target ≥				99.30%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		98.60%	99.90%	98.90%	99.00%	99.20%	99.00%	99.00%	98.60%	98.95%	98.99%
	G HS	2005	Target ≥				96.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		95.00%	100%	91.80%	75.60%	70.40%	87.00%	94.00%	93.50%	94.90%	95.34%

	Group Name	FFY	2015	2016
Reading	A Grade 3	Target ≥	95.00%	95.00%
		Data	99.66%	99.59%
	B Grade 4	Target ≥	95.00%	95.00%
		Data	99.69%	99.64%
	C Grade 5	Target ≥	95.00%	95.00%
		Data	99.72%	99.65%
	D Grade 6	Target ≥	95.00%	95.00%
		Data	99.28%	99.31%
	E Grade 7	Target ≥	95.00%	95.00%
		Data	99.22%	99.04%
	F Grade 8	Target ≥	95.00%	95.00%
		Data	99.05%	98.98%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

	Group Name	FFY	2015	2016
	G HS	Target ≥	95.00%	95.00%
		Data	96.50%	96.83%
Math	A Grade 3	Target ≥	95.00%	95.00%
		Data	99.67%	99.61%
	B Grade 4	Target ≥	95.00%	95.00%
		Data	99.68%	99.61%
	C Grade 5	Target ≥	95.00%	95.00%
		Data	99.70%	99.65%
	D Grade 6	Target ≥	95.00%	95.00%
		Data	99.23%	99.31%
	E Grade 7	Target ≥	95.00%	95.00%
		Data	99.15%	99.05%
	F Grade 8	Target ≥	95.00%	95.00%
		Data	99.00%	98.95%
	G HS	Target ≥	95.00%	95.00%
		Data	95.92%	96.58%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

	FFY	2017	2018
Reading	A ≤ Grade 3	95.00%	95.00%
	B ≤ Grade 4	95.00%	95.00%
	C ≤ Grade 5	95.00%	95.00%
	D ≤ Grade 6	95.00%	95.00%
	E ≤ Grade 7	95.00%	95.00%
	F ≤ Grade 8	95.00%	95.00%
	G ≤ HS	95.00%	95.00%
Math	A ≤ Grade 3	95.00%	95.00%
	B ≤ Grade 4	95.00%	95.00%
	C ≤ Grade 5	95.00%	95.00%
	D ≤ Grade 6	95.00%	95.00%
	E ≤ Grade 7	95.00%	95.00%
	F ≤ Grade 8	95.00%	95.00%
	G ≤ HS	95.00%	95.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Would you like to use the assessment data below to automatically calculate the actual data reported in your FFY 2017 APR by the grade groups you provided on the Reporting Group Selection page? yes

Would you like the disaggregated data to be displayed in your final APR? yes

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Data Source: SY 2017-18 Assessment Data Groups - Reading (EDFacts file spec C188; Data Group: 589) **Date:** 12/13/2018

Reading assessment participation data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	16083	16774	16826	16407	15296	14807	n	13314	n	n	n
b. IEPs in regular assessment with no accommodations	5155	4990	5910	6005	6089	6145		4257			
c. IEPs in regular assessment with accommodations	9603	10467	9552	8974	7887	7210		7683			
d. IEPs in alternate assessment against grade-level standards											
e. IEPs in alternate assessment against modified standards											
f. IEPs in alternate assessment against alternate standards	1266	1259	1306	1312	1187	1278		1000			

Data Source: SY 2017-18 Assessment Data Groups - Math (EDFacts file spec C185; Data Group: 588) **Date:** 12/13/2018

Math assessment participation data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	16083	16773	16824	16406	15299	14803	n	n	11318	n	n
b. IEPs in regular assessment with no accommodations	4384	4145	5313	5541	5669	5829			2422		
c. IEPs in regular assessment with accommodations	10368	11307	10140	9407	8292	7516			7485		
d. IEPs in alternate assessment against grade-level standards											
e. IEPs in alternate assessment against modified standards											
f. IEPs in alternate assessment against alternate standards	1263	1258	1305	1310	1186	1277			1161		

FFY 2017 SPP/APR Data: Reading Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A Grade 3	16,083	16,024	99.59%	95.00%	99.63%
B Grade 4	16,774	16,716	99.64%	95.00%	99.65%
C Grade 5	16,826	16,768	99.65%	95.00%	99.66%
D Grade 6	16,407	16,291	99.31%	95.00%	99.29%
E Grade 7	15,296	15,163	99.04%	95.00%	99.13%
F Grade 8	14,807	14,633	98.98%	95.00%	98.82%
G HS	13,314	12,940	96.83%	95.00%	97.19%

FFY 2017 SPP/APR Data: Math Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A Grade 3	16,083	16,015	99.61%	95.00%	99.58%
B Grade 4	16,773	16,710	99.61%	95.00%	99.62%
C Grade 5	16,824	16,758	99.65%	95.00%	99.61%
D Grade 6	16,406	16,258	99.31%	95.00%	99.10%

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
E Grade 7	15,299	15,147	99.05%	95.00%	99.01%
F Grade 8	14,803	14,622	98.95%	95.00%	98.78%
G HS	11,318	11,068	96.58%	95.00%	97.79%

Public Reporting Information

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

For participation of students with disabilities (SWD) on state assessments disaggregated by with and without accommodations, use the link:
http://www.ncpublicschools.org/accountability/reporting/leaperformancearchive/
Under Students with Disabilities Assessment Participation With and Without Accommodations click on the xlsx file for 2017-2018 to view and/or download the report.

For participation of students with disabilities (SWD) on alternate assessments, use the link:
http://www.ncpublicschools.org/accountability/reporting/leaperformancearchive/
Under Reports of Supplemental Disaggregated State, School System (LEA) and School Performance Data click on Disaggregated Performance Data for 2017-18 to view and/or download the report, that includes two documents. One document provides a description of files and codes used. The other document contains the data for each LEA, school, and the State. In the type column, the Extend 1 alternate assessment is denoted by X1. In the subgroup column, students with disabilities are denoted by SWD, and the number tested column includes the number of students tested with valid scores. In order to download and/or open the zip file, an updated version of the web browser used may be necessary, a different web browser may be used, or the web link may need to be copied and pasted into the browser.

☑ Provide additional information about this indicator (optional)

In 2017-18, the grade group for high school mathematics was changed from grade 10 to grade 11. In past years high school scores for mathematics were banked and then assigned to grade 10. Beginning in 2017-18, the mathematics assessment scores were not banked/assigned to grade 10 and assigned to the appropriate grade level 11.

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3C: Proficiency for Students with IEPs

Monitoring Priority: FAPE in the LRE

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

A. Indicator 3A – Reserved
B. Participation rate for children with IEPs.
C. Proficiency rate for children with IEPs against grade level and alternate academic achievement standards.

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

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Reading	A Grade 3	2012	Target ≥				66.00%	43.20%	43.20%	71.60%	44.50%	12.90%	21.60%	30.30%
			Data		51.00%	55.20%	29.60%	38.80%	39.30%	39.30%	38.70%	17.40%	16.52%	18.38%
	B Grade 4	2012	Target ≥				63.90%	43.20%	43.20%	71.60%	44.50%	12.90%	21.60%	30.30%
			Data		48.90%	58.20%	30.80%	39.60%	49.70%	42.10%	40.90%	15.00%	14.04%	16.46%
	C Grade 5	2012	Target ≥				72.30%	43.20%	43.20%	71.60%	44.50%	12.90%	21.60%	30.30%
			Data		57.30%	62.90%	27.10%	39.10%	48.00%	42.10%	42.10%	12.70%	12.48%	13.47%
	D Grade 6	2012	Target ≥				58.40%	43.20%	43.20%	71.60%	44.50%	12.90%	21.60%	30.30%
			Data		43.40%	51.80%	27.60%	38.80%	44.20%	43.60%	43.20%	12.70%	11.59%	13.17%
	E Grade 7	2012	Target ≥				63.80%	43.20%	43.20%	71.60%	44.50%	12.90%	21.60%	30.30%
			Data		48.80%	56.70%	22.30%	35.10%	38.50%	37.50%	37.80%	13.30%	12.78%	13.04%
	F Grade 8	2012	Target ≥				68.40%	43.20%	43.20%	71.60%	44.50%	12.90%	21.60%	30.30%
			Data		53.40%	60.70%	24.30%	35.40%	40.10%	38.70%	38.90%	10.10%	9.82%	10.64%
	G HS	2012	Target ≥				23.00%	43.20%	38.50%	69.30%	50.90%	14.00%	22.60%	31.20%
			Data		14.00%	85.00%	25.30%	25.50%	25.10%	25.00%	46.10%	14.40%	15.10%	13.53%
Mat A	A Grade 3	2012	Target ≥				61.30%	77.20%	77.20%	88.60%	59.90%	12.40%	21.20%	30.00%
			Data		61.30%	49.50%	51.60%	59.30%	59.40%	59.40%	58.40%	19.30%	19.62%	20.77%
	B Grade 4	2012	Target ≥				70.30%	77.20%	77.20%	88.60%	59.90%	12.40%	21.20%	30.00%
			Data		70.30%	44.10%	47.70%	57.10%	64.20%	59.50%	59.30%	18.60%	16.90%	19.24%
	C Grade 5	2012	Target ≥				62.90%	77.20%	77.20%	88.60%	59.90%	12.40%	21.20%	30.00%
			Data		62.90%	40.00%	45.30%	54.80%	59.20%	56.10%	56.30%	15.90%	15.44%	16.79%
	D Grade 6	2012	Target ≥				58.90%	77.20%	77.20%	88.60%	59.90%	12.40%	21.20%	30.00%
			Data		58.60%	37.70%	43.00%	52.70%	55.80%	56.00%	54.30%	9.70%	9.42%	10.35%
	E Grade 7	2012	Target ≥				49.30%	77.20%	77.20%	88.60%	59.90%	12.40%	21.20%	30.00%
			Data		49.30%	35.20%	41.00%	51.30%	53.90%	53.60%	53.30%	7.90%	7.48%	8.01%
	F Grade 8	2012	Target ≥				48.30%	77.20%	77.20%	88.60%	59.90%	12.40%	21.20%	30.00%
			Data		48.30%	36.40%	40.90%	53.30%	58.70%	59.20%	59.20%	6.90%	6.35%	7.39%
	G HS	2012	Target ≥				55.60%	77.20%	68.40%	84.20%	51.10%	9.70%	18.70%	27.70%
			Data		43.60%	27.50%	42.30%	42.60%	50.00%	47.90%	45.00%	9.90%	9.56%	10.99%

	Group Name	FFY	2015	2016
Reading	A Grade 3	Target ≥	39.00%	47.70%
		Data	18.38%	18.55%
	B Grade 4	Target ≥	39.00%	47.70%
		Data	15.62%	14.69%
	C Grade 5	Target ≥	39.00%	47.70%
		Data	14.28%	13.91%
	D Grade 6	Target ≥	39.00%	47.70%
		Data	14.06%	14.37%
	E Grade 7	Target ≥	39.00%	47.70%
		Data	12.60%	13.26%
	F Grade 8	Target ≥	39.00%	47.70%
		Data	10.29%	10.16%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

	Group Name	FFY	2015	2016
	G HS	Target ≥	39.80%	48.40%
		Data	13.07%	13.38%
Math	A Grade 3	Target ≥	38.80%	47.60%
		Data	22.04%	22.71%
	B Grade 4	Target ≥	38.80%	47.60%
		Data	20.38%	19.68%
	C Grade 5	Target ≥	38.80%	47.60%
		Data	18.93%	18.44%
	D Grade 6	Target ≥	38.80%	47.60%
		Data	11.36%	12.97%
	E Grade 7	Target ≥	38.80%	47.60%
		Data	8.68%	8.37%
	F Grade 8	Target ≥	38.80%	47.60%
		Data	7.37%	7.56%
	G HS	Target ≥	36.70%	45.70%
		Data	10.95%	10.81%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

	FFY	2017	2018
Reading	A ≥ Grade 3	56.40%	56.40%
	B ≥ Grade 4	56.40%	56.40%
	C ≥ Grade 5	56.40%	56.40%
	D ≥ Grade 6	56.40%	56.40%
	E ≥ Grade 7	56.40%	56.40%
	F ≥ Grade 8	56.40%	56.40%
	G ≥ HS	57.00%	57.00%
Math	A ≥ Grade 3	56.40%	56.40%
	B ≥ Grade 4	56.40%	56.40%
	C ≥ Grade 5	56.40%	56.40%
	D ≥ Grade 6	56.40%	56.40%
	E ≥ Grade 7	56.40%	56.40%
	F ≥ Grade 8	56.40%	56.40%
	G ≥ HS	Key: 54.70%	54.70%

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2017 SPP/APR Data: Reading Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A Grade 3	16,024	2,912	18.55%	56.40%	18.17%
B Grade 4	16,716	2,659	14.69%	56.40%	15.91%
C Grade 5	16,768	2,236	13.91%	56.40%	13.33%
D Grade 6	16,291	2,359	14.37%	56.40%	14.48%
E Grade 7	15,163	2,233	13.26%	56.40%	14.73%
F Grade 8	14,633	1,494	10.16%	56.40%	10.21%
G HS	12,940	1,551	13.38%	57.00%	11.99%

Reasons for Group G Slippage

North Carolina did not meet its target for Group G High School reading assessment performance and had slippage of 1.39 percentage points. In 2017-18 the number of students with disabilities in 10th grade/high school who received a valid score and for whom a proficiency level was assigned decreased by 2.95% (394 students) and the number of students with disabilities who scored at or above proficient decreased by 13.05% (233 students). Although the data for this indicator are based on achievement standards for levels 4 and 5 which are college and career ready proficiency, it's important to identify the data for level 3 that are students who performed at NC's grade level proficiency. In addition to the 11.99% students with disabilities in 10th grade who scored at levels 4 and 5/college and career ready proficiency, an additional 6.66% (862) scored at level 3/grade level proficiency. The increased rigor in academic achievement standards has had an impact on students with disabilities who were on the cusp of cut scores and academic achievement standards. EC Division staff will continue to work collaboratively with consultants in NCDPI's Divisions: K-12 Curriculum and Instruction; and Integrated Academic and Behavior Systems to review the data and determine other root causes/factors that contributed to the slippage in order to identify appropriate strategies for implementation/improvement.

FFY 2017 SPP/APR Data: Math Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A Grade 3	16,015	3,630	22.71%	56.40%	22.67%
B Grade 4	16,710	3,295	19.68%	56.40%	19.72%
C Grade 5	16,758	2,987	18.44%	56.40%	17.82%
D Grade 6	16,258	1,881	12.97%	56.40%	11.57%
E Grade 7	15,147	1,507	8.37%	56.40%	9.95%
F Grade 8	14,622	1,084	7.56%	56.40%	7.41%
G HS	11,068	1,284	10.81%	54.70%	11.60%

Reasons for Group D Slippage

North Carolina did not meet its target for Group D grade 6 math assessment performance and had slippage of 1.40 percentage points. In 2017-18 the number of students with disabilities in 6th grade who received a valid score and for whom a proficiency level was assigned increased by 4.73% (769 students) and the number of students with disabilities who scored at or above proficient decreased by 6.37% (128 students). Although the data for this indicator are based on achievement standards for levels 4 and 5 which are college and career ready proficiency, it's important to identify the data for level 3 that are students who performed at NC's grade level proficiency. In addition to the 11.57% students with disabilities in 6th grade who scored at levels 4 and 5/college and career ready proficiency, an additional 5.07% (824) scored at level 3/grade level proficiency. The increased rigor in academic achievement standards has had an impact on students with disabilities who were on the cusp of cut scores and academic achievement standards. EC Division staff will continue to work collaboratively with consultants in NCDPI's Divisions: K-12 Curriculum and Instruction; and Integrated Academic and Behavior Systems to review the data and determine other root causes/factors that contributed to the slippage in order to identify appropriate strategies for implementation/improvement.

Reasons for Group F Slippage

North Carolina did not meet its target for Group F grade 8 math assessment performance and had slippage of a 0.15 percentage point. For a small percentage (less than 10%), it is considered slippage if the worsening is more than a 0.1 percentage point. In 2017-18 the number of students with disabilities in 8th grade who received a valid score and for whom a proficiency level was assigned decreased by 3.19% (482 students) and the number of students with disabilities who scored at or above proficient decreased by 5.08% (58 students). Although the data for this indicator are based on achievement standards for levels 4 and 5 which are college and career ready proficiency, it's important to identify the data for level 3 that are students who performed at NC's grade level proficiency. In addition to the 7.41% students with disabilities in 8th grade who scored at levels 4 and 5/college and career ready proficiency, an additional 4.08% (596) scored at level 3/grade level proficiency. The increased rigor in academic achievement standards has had an impact on students with disabilities who were on the cusp of cut scores and academic achievement standards. EC Division staff will continue to work collaboratively with consultants in NCDPI's Divisions: K-12 Curriculum and Instruction; and Integrated Academic and Behavior Systems to review the data and determine other root causes/factors that contributed to the slippage in order to identify appropriate strategies for implementation/improvement.

Public Reporting Information

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

For participation of students with disabilities (SWD) on state assessments disaggregated by with and without accommodations, use the link: http://www.ncpublicschools.org/accountability/reporting/leaperformancearchive/
Under Students with Disabilities Assessment Participation With and Without Accommodations click on the xlsx file for 2017-2018 to view and/or download the report.

For participation of students with disabilities (SWD) on alternate assessments, use the link:
http://www.ncpublicschools.org/accountability/reporting/leaperformancearchive/
Under Reports of Supplemental Disaggregated State, School System (LEA) and School Performance Data click on Disaggregated Performance Data for 2017-18 to view and/or download the report, that includes two documents. One document provides a description of files and codes used. The other document contains the data for each LEA, school, and the State. In the type column, the Extend 1 alternate assessment is denoted by X1. In the subgroup column, students with disabilities are denoted by SWD, and the number tested column includes the number of students tested with valid scores. In order to download and/or open the zip file, an updated version of

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

As required, targets for this indicator are based on achievement standards for levels 4 and 5 which are college and career ready proficiency. However, it's important to identify the data for level 3 that are students who performed at grade level proficiency and with the continuing use of evidence-based strategies may achieve at level 4 or 5 in the future.

FFY 2017 Level 3/Grade Level Proficiency: Reading Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs at Level 3/Grade Level Proficiency	FFY 2017 Data for Level 3/Grade Level Proficiency
A Grade 3	16,024	1,009	6.30%
B Grade 4	16,716	1,215	7.27%
C Grade 5	16,768	1,098	6.55%
D Grade 6	16,291	1,108	6.80%
E Grade 7	15,163	901	5.94%
F Grade 8	14,633	895	6.12%
G Grade HS (10)	12,940	862	6.66%

FFY 2017 Level 3/Grade Level Proficiency: Mathematics Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs at Level 3/Grade Level Proficiency	FFY 2017 Data for Level 3/Grade Level Proficiency
A Grade 3	16,015	1,599	9.98%
B Grade 4	16,710	994	5.95%
C Grade 5	16,758	874	5.22%
D Grade 6	16,258	824	5.07%
E Grade 7	15,147	633	4.18%
F Grade 8	14,622	596	4.08%
G Grade HS (11)	11,068	899	8.12%

Also in 2017-18, the grade group for high school mathematics was changed from grade 10 to grade 11. In past years high school scores for mathematics were banked and then assigned to grade 10. Beginning in 2017-18, the mathematics assessment scores were not banked/assigned to grade 10 and assigned to the appropriate grade level 11.

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4A: Suspension/Expulsion

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≤			9.10%	8.00%	8.00%	7.00%	6.00%	5.00%	5.00%	2.50%	2.50%
Data		2.60%	5.20%	2.30%	2.30%	4.70%	1.90%	2.30%	0.90%	0.44%	0%

FFY	2015	2016
Target ≤	2.50%	2.50%
Data	0.40%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≤	2.50%	2.50%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2017 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

Number of districts that have a significant discrepancy	Number of districts in the State	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
0	287	0%	2.50%	0%

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

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

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

State's definition of "significant discrepancy" and methodology

North Carolina's definition of "significant discrepancy" with regard to suspensions/expulsions for student with IEPs is greater than/equal to twice the State average rate of suspensions/expulsions of students with IEPs.

Significant discrepancy = # of students with IEPs with suspensions/expulsions >10 days in school year/# of students with IEPs X 100 = State Average Rate X 2

Suspension and expulsion rates are computed for LEAs with a minimum cell size of 10 students with IEPs suspended/expelled, but a minimum "n" size is not used. Raw data are reviewed separately for LEAs with less than the minimum cell size to determine if a significant discrepancy exists. If determined that a significant discrepancy exists for an LEA with less than the minimum cell size, the LEA is included in the calculation's numerator. Since data are reviewed for all LEAs in the State and accordingly a determination is made about whether or not a significant discrepancy exists for each LEA, all LEAs are included in the calculation's denominator.

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2016 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2017 using 2016-2017 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

No LEA had a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; therefore no LEA had to review its policies, procedures or practices that contributed to a significant discrepancy and didn't comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. However, if an LEA had a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, with its LEA Self-Assessment submitted to the NCDPI's EC Division in May 2018, the LEA would have been required to submit a review of its policies, procedures, and practices pertaining to the suspension and discipline of students with disabilities in the school district, with a particular emphasis on those policies, procedures and practices which involved development and implementation of IEPs, the use of positve behavioral interventions and supports, and procedural safeguards. If such a review were submitted with an LEA's annual LEA Self-Assessment update, EC Division staff would review the documentation and make a determination about whether: 1) the policies, procedures and practices were compliant; and 2) if revisions to ensure compliance with IDEA requirements were required. When an LEA is required to revise its policies, procedures, and practices, the NCDPI -EC Division also requires the LEA to report the revisions publicly.

- (•) The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)
- ( ) The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b). If YES, select one of the following:

Correction of Findings of Noncompliance Identified in FFY 2016

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

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4B: Suspension/Expulsion

Monitoring Priority: FAPE in the LRE

Compliance indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data						0.50%	0%	0%	0%	0%	0%

FFY	2015	2016
Target	0%	0%
Data	0%	0%

Key: ☐ Gray – Data Prior to Baseline ☐ Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	0%	0%

FFY 2017 SPP/APR Data

Has the State Established a minimum n-size requirement? ○ Yes ◉ No

Number of districts that have a significant discrepancy, by race or ethnicity	Number of those districts that have policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements	Number of districts in the State	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
0	0	287	0%	0%	0%

☑ **All races and ethnicities were included in the review**

State's definition of "significant discrepancy" and methodology

North Carolina's definition of "significant discrepancy" with regard to suspensions/expulsions for student with IEPs is greater than/equal to twice the State average rate of suspensions/expulsions of students with IEPs.

Significant discrepancy = # of students with IEPs with suspensions/expulsions >10 days in school year/# of students with IEPs X 100 = State Average Rate X 2

Suspension and expulsion rates, by race or ethnicity, are computed for LEAs with a minimum cell size of 10 students with IEPs suspended/expelled, and a minimum "n" size is not used. Data are reviewed separately for LEAs with less than the minimum cell size to determine if a significant discrepancy exists. If determined that a significant discrepancy exists for an LEA with less than the minimum cell size the LEA is included in the calculation's numerator. Since data are reviewed for all LEAs in the State and accordingly a determination is made about whether or not a significant discrepancy exists for each LEA, all LEAs are included in the calculation's denominator.

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will

FFY 2016 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2017 using 2016-2017 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

No LEA had a significant discrepancy, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; therefore no LEA had to review its policies, procedures or practices that contributed to a significant discrepancy and didn't comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. However, if an LEA had a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, with its LEA Self-Assessment submitted to the NCDPI's EC Division in May 2018, the LEA would have been required to submit a review of its policies, procedures, and practices pertaining to the suspension and discipline of students with disabilities in the school district, with a particular emphasis on those policies, procedures and practices which involved development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. If such a review were submitted with an LEA's annual LEA Self-Assessment update, EC Division staff would review the documentation and make a determination about whether: 1) the policies, procedures and practices were compliant; and 2) if revisions to ensure compliance with IDEA requirements were required. When an LEA is required to revise its policies, procedures, and practices, the NCDPI -EC Division also requires the LEA to report the revisions publicly.

- (●) The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)
- ( ) The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b). If YES, select one of the following:

Correction of Findings of Noncompliance Identified in FFY 2016

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

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 5: Educational Environments (children 6-21)

Monitoring Priority: FAPE in the LRE

Results Indicator: Percent of children with IEPs aged 6 through 21 served:

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2005	Target ≥			61.59%	62.60%	63.60%	64.60%	65.60%	65.60%	65.60%	65.60%	65.50%
		Data		61.56%	63.18%	64.00%	64.10%	63.10%	64.80%	65.70%	66.20%	66.25%	66.45%
B	2005	Target ≤			16.87%	16.50%	16.10%	15.70%	15.30%	15.30%	15.30%	15.30%	15.30%
		Data		16.82%	16.20%	15.80%	15.60%	15.60%	14.50%	13.90%	13.60%	13.55%	13.74%
C	2005	Target ≤			2.18%	2.00%	2.10%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%
		Data		2.27%	2.34%	2.30%	2.20%	2.30%	2.10%	2.10%	2.00%	1.98%	1.90%

	FFY	2015	2016
A	Target ≥	65.40%	65.30%
	Data	66.78%	66.80%
B	Target ≤	15.20%	15.20%
	Data	13.87%	13.98%
C	Target ≤	2.00%	2.00%
	Data	1.89%	1.83%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A ≥	65.20%	65.00%
Target B ≤	15.10%	15.00%
Target C ≤	2.00%	2.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/12/2018	Total number of children with IEPs aged 6 through 21	181,006	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/12/2018	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	120,994	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/12/2018	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	25,369	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/12/2018	c1. Number of children with IEPs aged 6 through 21 in separate schools	1,806	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/12/2018	c2. Number of children with IEPs aged 6 through 21 in residential facilities	361	null

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/12/2018	c3, Number of children with IEPs aged 6 through 21 in homebound/hospital placements	1,107	null

FFY 2017 SPP/APR Data

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	120,994	181,006	66.80%	65.20%	66.85%
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	25,369	181,006	13.98%	15.10%	14.02%
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	3,274	181,006	1.83%	2.00%	1.81%

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Preschool Environments

Monitoring Priority: FAPE in the LRE

Results Indicator: Percent of children with IEPs aged 3 through 5 attending a:

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2014	Target ≥									51.50%	51.50%	36.70%
		Data								51.00%	49.90%	50.26%	36.65%
B	2014	Target ≤									20.50%	20.50%	21.60%
		Data								21.00%	21.20%	21.98%	21.60%

	FFY	2015	2016
A	Target ≥	37.00%	37.30%
	Data	36.91%	35.86%
B	Target ≤	21.30%	20.00%
	Data	21.64%	21.73%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A ≥	37.60%	38.00%
Target B ≤	19.70%	19.40%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/12/2018	Total number of children with IEPs aged 3 through 5	19,899	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/12/2018	a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	6,951	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/12/2018	b1. Number of children attending separate special education class	4,139	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/12/2018	b2. Number of children attending separate school	203	null
SY 2017-18 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/12/2018	b3. Number of children attending residential facility	17	null

FFY 2017 SPP/APR Data

	Number of children with IEPs aged 3 through 5 attending	Total number of children with IEPs aged 3 through 5	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A. A regular early childhood program and receiving the majority of special education and related services in the regular early	6,951	19,899	35.86%	37.60%	34.93%

	Number of children with IEPs aged 3 through 5 attending	Total number of children with IEPs aged 3 through 5	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
childhood program					
B. Separate special education class, separate school or residential facility	4,359	19,899	21.73%	19.70%	21.91%

Use a different calculation methodology

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 7: Preschool Outcomes

Monitoring Priority: FAPE in the LRE

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2013	Target ≥						85.90%	85.90%	85.90%	86.00%	82.34%	82.34%
		Data					88.90%	85.90%	79.20%	79.30%	82.30%	82.34%	84.80%
A2	2013	Target ≥						48.30%	48.30%	48.30%	48.40%	35.08%	35.08%
		Data					57.00%	48.30%	41.90%	36.50%	39.10%	35.08%	36.71%
B1	2013	Target ≥							86.90%	86.90%	87.00%	82.52%	82.52%
		Data					89.00%	86.90%	79.80%	79.30%	81.30%	82.52%	83.17%
B2	2013	Target ≥						46.60%	46.60%	46.60%	46.70%	34.24%	34.24%
		Data					54.10%	46.60%	79.80%	36.50%	37.60%	34.24%	35.05%
C1	2013	Target ≥						86.10%	86.10%	86.10%	86.20%	81.81%	81.81%
		Data					88.30%	86.10%	79.00%	81.00%	81.30%	81.81%	84.07%
C2	2013	Target ≥						60.60%	60.60%	60.60%	60.70%	52.05%	52.05%
		Data					67.90%	60.60%	54.80%	53.30%	53.60%	52.05%	54.46%

	FFY	2015	2016
A1	Target ≥	82.50%	82.50%
	Data	85.34%	84.85%
A2	Target ≥	35.20%	35.20%
	Data	34.53%	34.73%
B1	Target ≥	82.52%	82.52%
	Data	82.67%	82.96%
B2	Target ≥	34.46%	34.46%
	Data	33.38%	34.14%
C1	Target ≥	82.00%	82.00%
	Data	82.94%	84.01%
C2	Target ≥	52.17%	52.17%
	Data	50.98%	50.69%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A1 ≥	82.50%	82.55%
Target A2 ≥	35.20%	35.40%
Target B1 ≥	82.52%	82.60%
Target B2 ≥	34.46%	34.50%
Target C1 ≥	82.00%	82.20%
Target C2 ≥	52.17%	52.20%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2017 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed	6,728

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

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	45	0.67%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	892	13.26%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,241	48.17%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,994	29.64%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	556	8.26%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. (c+d)/(a+b+c+d)	5235.00	6172.00	84.85%	82.50%	84.82%
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. (d+e)/(a+b+c+d+e)	2550.00	6728.00	34.73%	35.20%	37.90%

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

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	38	0.56%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,040	15.46%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,134	46.58%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,090	31.06%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	426	6.33%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
B1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. (c+d)/(a+b+c+d)	5224.00	6302.00	82.96%	82.52%	82.89%
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. (d+e)/(a+b+c+d+e)	2516.00	6728.00	34.14%	34.46%	37.40%

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	56	0.83%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	841	12.50%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,190	32.55%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,366	35.17%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,275	18.95%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
C1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. (c+d)/(a+b+c+d)	4556.00	5453.00	84.01%	82.00%	83.55%
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. (d+e)/(a+b+c+d+e)	3641.00	6728.00	50.69%	52.17%	54.12%

Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? Yes

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes

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

LEAs used the Child Outcomes Summary Form (COSF) to collect "entry" and "exit" data regarding outcomes for preschool children aged 3 through 5 with IEPs. An NCDPI memorandum was issued May 10, 2018 to LEAs regarding the data submission due dates for certain indicators, including Indicator 7 (August 15, 2018) and how to access the Indicator 7 spreadsheet for data submission. LEAs then submitted data for Indicator 7 through NCDPI's Comprehensive Exceptional Children Accountability System (CECAS). The Indicator 7 spreadsheet for submitting the data was posted to the CECAS communication site on the Reporting Users tab http://www.ncceceas.org/reportinguser/reportinguser.html . The Indicator 8 Spreadsheet includes an algorithm to ensure that only children who received special education and related services for at least six months during the age span of three through five years be included in the measurement. The Indicator 7 spreadsheet has also been updated with columns to notify LEAs if students have gained or lost more than three points progress. This is only a validation warning, so that LEAs can verify that the data is correct.

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8: Parent Involvement

Monitoring Priority: FAPE in the LRE

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

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

Do you use a separate data collection methodology for preschool children? No

Historical Data

Baseline Data: 2006

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			26.00%	28.00%	40.00%	45.00%	50.00%	50.00%	50.00%	50.00%	50.00%
Data			26.00%	33.00%	39.20%	41.00%	43.30%	44.20%	44.20%	46.37%	43.83%

FFY	2015	2016
Target ≥	50.00%	50.00%
Data	46.22%	43.43%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	50.00%	50.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2017 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
833	1,883	43.43%	50.00%	44.24%

The number of parents to whom the surveys were distributed.	10.92%	17246.00

The percentage shown is the number of respondent parents divided by the number of parents to whom the survey was distributed.

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

The North Carolina Department of Public Instruction (NCDPI) used a 25-item survey with a rating scale,the *Schools' Efforts to Partner with Parents Scale* (SEPPS), developed and validated previously by the National Center for Special Education Accountability (NCSEAM). For parents of children ages 5-21, NCDPI uses the NCSEAM 25-item Part B Survey Form 2.0 that addresses family involvement. For parents of preschool children, NCDPI uses the NCSEAM 25-item Preschool 619 Survey. Each family selected to participate in the annual sample receives a survey printed on an optical scan form accompanied by a cover letter explaining the importance of the survey and guaranteeing the confidentiality of the parent's responses. The packet also includes a pre-addressed, postage-prepaid envelope for the return of the survey. Data from the surveys of families of children ages 3-21 are scanned into an electronic database. The database is then sent to PEIDRA Data Services which analyzes the data and produces reports at both the state and LEA level. North Carolina adheres to the standard recommended by NCSEAM's national stakeholder group in calculating the percentage of parents with measures at or above a level indicating their perception that schools facilitated their involvement.
Two versions of the SEPPS rating scale were used: one for parents of children with disabilities in grades K-12 and one for parents of preschool children with disabilities. The items on each scale were fully equated in the development phases so that the measures on the two scales have the same meaning, the same standard applies, and measures from the two scales can be aggregated. NCDPI aggregated the measures from the two scales.

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

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

The North Carolina Department of Public Instruction (NCDPI) used a 25-item survey with a rating scale, the Schools' Efforts to Partner with Parents Scale (SEPPS), developed and validated previously by the National Center for Special Education Accountability (NCSEAM). For parents of children ages 5-21, NCDPI uses the NCSEAM 25-item Part B Survey Form 2.0 that addresses family involvement. For parents of preschool children, NCDPI uses the NCSEAM 25-item Preschool 619 Survey. Five (5) Local Education Agencies (LEAs) with an average enrollment of 50,000 students or more are included in the annual sampling plan. Additionally, approximately one-fifth of the remaining districts balanced by size and location with consideration for race/ethnicity, grade level and disability category are included in the sample each year.

Was a survey used? Yes

Is it a new or revised survey? No

The demographics of the parents responding are representative of the demographics of children receiving special education services. No

Describe the strategies the State will use to ensure that in the future the response data are representative of those demographics.

A comparison of the respondents in the annual sample to the representative survey distribution, suggests that certain response groups, as noted in the section about the State's analyses, did not match the representative sample surveyed. To offset the underrepresentation in the response group, the NCDPI once again oversampled in the survey distribution. The oversampling would normally impact the response rates of under-represented groups. For FFY 2018, the State will no longer contract with an out-of-state vendor for the distribution/receipt of the surveys and evaluation of the responses, but instead will conduct these processes internally with assistance from one of the State's public universities during the evaluation process. By distributing and receiving the surveys within the state, it is anticipated that under-represented response groups will be more willing to respond to the survey. We also plan to provide an electronic version/submission for the first time. The State will be able to monitor this process more closely throughout the process.

Include the State's analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

A total of 17,246 surveys (school-age and preschool) were shipped to forty-four (44) LEAs sampled across the state of North Carolina. A total of 1,883 surveys were completed and returned for a response rate of 10.92%. This was an increase of a 0.95 percentage point from the previous year's response rate.

a) The FFY 2017 data suggest that African-American students were under-represented (24.0%) while students of other races, except white, were over-represented (24.0%).

Distribution by Race			
Surveys	African - American	White	Other
Distributed	30.8%	52.0%	17.2%
Returned	24.0%	52.0%	24.0%
Difference*	- 6.8	+/- 0	- 6.8

b) In FFY 2017, preschool children were over-represented (27.0%), while students in grades K-12 were under-represented (73.0%) as compared to surveys distributed. This gap was similar to the previous year.

Distribution by Grade		
Surveys	Preschool	School-Age
Distributed	22.4%	77.6%
Returned	27.0%	73.0%
Difference*	+ 4.6	- 4.6

c) In FFY 2017, students with autism (15.0%) and developmental delays (17.0%) were over-represented while students with specific learning disabilities (22.0%) and speech-language impairments (17.0%) were under-represented.

Distribution by Disability							
Surveys	Autism	Developmental Delay	Intellectual Disability	Other Health Impairment	Specific Learning Disability	Speech-Language Impairment	Other
Distributed	7.3%	12.2%	9.3%	14.1%	28.9%	21.6%	6.6%
Returned	15.0%	17.0%	9.0%	14.0%	22.0%	17.0%	6.0%
Difference*	+ 7.7	+ 4.8	- 0.3	- 0.1	- 6.9	- 4.6	- 0.6

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

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 9: Disproportionate Representation

Monitoring Priority: Disproportionate Representation

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

FFY	2015	2016
Target	0%	0%
Data	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	0%	0%

FFY 2017 SPP/APR Data

Has the State established a minimum n and/or cell size requirement? (•) Yes ( ) No

The State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts totally excluded from the calculation as a result of the requirement because the district did not meet the minimum n and/or cell size. 2

Number of districts with disproportionate representation of racial and ethnic groups in special education and related services	Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n-size	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
0	0	291	0%	0%	0%

Were all races and ethnicities included in the review? (•) Yes ( ) No

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

In North Carolina, disproportionate representation of racial and ethnic groups in special education is defined as a risk ratio of ≥ 3.0*.

To determine the number of LEAs with disproportionate representation that is the result of inappropriate identification, the North Carolina Department of Public Instruction:

1. Identifies LEAs with disproportionate representation of racial and ethnic groups in special education and related services, by annually using the First Month Race and Gender Enrollment data and the December 1 Periodic Child Count data in Westat's Disproportionality Excel Spreadsheet Application;

No (0) LEAs had disproportionate representation in 2017-18, which is determined by a risk ratio of ≥ 3.0*.

If an LEA had been determined to have disproportionate representation in 2017-18, the NCDPI would have completed steps 2 and 3 for the LEA identified with disproportionate representation. Steps 2 and 3 are described in the section: Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

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

To determine whether the disproportionate representation the State identified of racial and ethnic groups in special education and related services was the result of inappropriate identification, the NCDPI:

2. requires LEAs with disproportionate representation of racial and ethnic groups in special education and related services, to include in its annual LEA Self-Assessment update an updated description of an examination of local policies, procedures and practices under 618(d); and

3. reviews the results of the updated description of an examination of local policies, procedures and practices under 618(d)included in the the LEA Self-Assessment along with other factors such as trend data and student record reviews, available through on-site Program Compliance Reviews or otherwise determined necessary, to make a determination about whether or not the disproportionate representation was a result of inappropriate identification.

Since no (0) LEAs had disproportionate of racial and ethnic groups in special education and related services in 2017-18, the above steps, to determine if such disproportionate representation was a result of inappropriate identification, did not have to be used.

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

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

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 10: Disproportionate Representation in Specific Disability Categories

Monitoring Priority: Disproportionate Representation

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

FFY	2015	2016
Target	0%	0%
Data	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	0%	0%

FFY 2017 SPP/APR Data

Has the State established a minimum n and/or cell size requirement? (•) Yes ( ) No

The State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts totally excluded from the calculation as a result of the requirement because the district did not meet the minimum n and/or cell size. 2

Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n-size	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
33	0	291	0%	0%	0%

Were all races and ethnicities included in the review? (•) Yes ( ) No

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

In North Carolina, disproportionate representation of racial and ethnic groups in specific disability categories is defined as a risk ratio of ≥ 3.0.

To determine the number of districts with disproportionate representation that is the result of inappropriate identification, the North Carolina Department of Public Instruction:

1. Identifies districts with disproportionate representation of racial and ethnic groups in specific disability categories annually, by using the First Month Race and Gender Enrollment data and the December 1 Periodic Child Count data in Westat's Disproportionality Excel Spreadsheet Application;

Thirty-three (33) LEAs had disproportionate representation of racial and ethnic groups in specific disability categories in 2017-18 which is determined by a risk ratio of ≥ 3.0* of a racial/ethnic group in a specific disability category.

For the districts identified with disproportionate representation, the NCDPI completed steps 2 and 3. Steps 2 and 3 are described in the section: Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

* Risk ratios are computed for LEAs with a minimum of 30 students of the particular race/ethnicity identified in the disability category.

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

To determine whether the disproportionate overrepresentation the State identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification, the NCDPI:

2. requires LEAs with disproportionate representation of racial and ethnic groups in specific disability categories, to include in its annual LEA Self-Assessment update an updated description of an examination of local policies, procedures and practices under 618(d); and

3. reviews the results of the updated description of an examination of local policies, procedures and practices under 618(d)included in the LEA Self-Assessment along with other factors such as trend data and student record reviews, available through on-site Program Compliance Reviews or otherwise determined necessary, to make a determination about whether or not the disproportionate representation was a result of inappropriate identification.

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

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

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 11: Child Find

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		84.62%	85.44%	85.50%	90.70%	90.14%	91.07%	92.41%	93.30%	92.82%	92.52%

FFY	2015	2016
Target	100%	100%
Data	91.55%	91.98%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
40,276	36,335	91.98%	100%	90.22%

Number of children included in (a), but not included in (b) [a-b]	3,941

Reasons for Slippage

North Caroline did not meet the 100% target for Indicator 11. It's FFY 2017 rate of 90.22% indicated slippage of 1.76 percentage points. Although the State's overall number of referrals received, for whom parents consented to evaluations, decreased in 2017 from the previous year by 4.18%, the primary reason for slippage was due to two (2) large districts that had a combined slippage of 2.48 percentage points. The districts' slippages were due to lack of timely transition of preschool children from Part C (see Indicator 12) that also impacted the State's required 90-day timeline from receipt of referral to the placement determination. In addition to the State verifying within one year of notification that the districts are correctly implementing the regulatory requirements and have corrected individual findings of non-compliance, the State has initiated individual technical assistance and support to assist these two LEAs.

Account for children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

Range of days beyond 90 days -

1-5 days - 681

6-15 days - 785

16-25 days - 471

26-35 days - 331

36-45 days - 304

46 days or more - 1,369

Total - 3,941

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

Referral paperwork not processed in a timely manner - 2,025

Excessive student absences - 109

Weather delays - 335

Delay in getting parent consent for evaluation - 320

Other - 1,152

Total - 3,941

Indicate the evaluation timeline used

- ○ **The State used the 60 day timeframe within which the evaluation must be conducted.**
- ◉ **The State established a timeline within which the evaluation must be conducted.**

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

- ○ **State monitoring**
- ◉ **State database that includes data for the entire reporting year**

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

The 2017-18 data were collected for all LEAs through the Comprehensive Exceptional Children Accountability System (CECAS). Allowable exceptions, that were removed from the number of referrals received, were included in CECAS as follows: children who transferred in or out of the LEA, dropped out, or died within 90 days of receipt of referral; children who transferred into the LEA after the 90 day timeline expired; and children whose parent(s) repeatedly failed or refused to produce them for the evaluation.

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
146	145	0	1

FFY 2016 Findings of Noncompliance Verified as Corrected

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

The 146 LEAs with findings of non-compliance were required to access the reports tool in the Comprehensive Exceptional Children Accountability System (CECAS), or another electronic system for the few LEAs only using CECAS to report data, and update their data, at a minimum on a quarterly basis in order for the EC Division to review new data/student records to verify that each LEA with non-compliance was correctly implementing the regulatory requirements. Any LEA whose data were non-compliant in the first quarter was reviewed on a quarterly basis or sooner and was required to submit data/evidence to NCDPI's EC Division of any changes made to improve processes as part of correcting non-compliance prior to the EC Division reviewing additional new records in a subsequent quarterly review. During this time, the EC Division provided additional technical assistance, prior to the review of new data/student records, to LEAs that had low compliance rates. Upon review of the new data/student records for the 146 LEAs with findings of non-compliance, the EC Division has verified that 145 LEAs were correctly implementing the regulatory requirements.

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

The 146 LEAs with non-compliant findings had 3,371 child-specific findings of non-compliance in 2016-17. At the time of the initial determination of compliance for Indicator 11, the EC Division verified that the LEAs with non-compliance also submitted/updated data/evidence through the Comprehensive Exceptional Children Accountability System (CECAS) that 2,245 child-specific instances of non-compliance had been corrected. LEAs were also required to submit data/evidence through CECAS to the NCDPI, as soon as possible and no later than one year from notification of the non-compliant findings, that the remaining 1,126 child-specific instances of non-compliance had been corrected. EC Division staff reviewed the submitted data/evidence through CECAS and verified that the required corrections had been completed for all child-specific instances of non-compliance.

FFY 2016 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Although all child-specific findings of non-compliance were corrected, following the review of new data/student records, one (1) LEA exhibited a continuing, low compliance rate and the EC Division could not verify within one year or subsequently that the LEA was correctly implementing the regulatory timelines. The LEA's ability to correctly impact the regulatory requirements was impacted by turnover in administrative positions in 2016-17 and significant flooding from a hurricane in October 2016. As a result, the NCDPI is providing technical assistance/support and requiring the LEA to take the following steps to correct the non-compliance and ensure the regulatory timelines are correctly implemented:

1) within 30 days of notification that the LEA did not correct or subsequently correct the non-compliant finding, the LEA is required to submit to NCDPI the root cause(s) for failure to meet the 90-day referral to placement timeline (root causes must further clarify the reasons for delay provided in the original submission of data);

2) within 30 days of notification that the LEA did not correct or subsequently correct the non-compliant finding, the LEA is required to submit to the NCDPI information documenting revisions to systems for monitoring the referral process and timelines that address the root cause(s) for failure to meet the 90-day timeline and any revisions to policies, procedures, and/or other practices that contributed to or resulted in the noncompliance; and

3) within 90 days of notification that the LEA did not correct or subsequently correct the non-compliant finding, the LEA is required to submit to the NCDPI new data/student records to ensure the LEA is correctly implementing the specific regulatory requirements. NCDPI staff will review the data/records submitted to verify compliance. In the event compliance is not achieved, the NCDPI will identify additional corrective and/or enforcement action(s) to be issued.

FFY 2015 Findings of Noncompliance Verified as Corrected

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

The 4 LEAs, that were not correctly implementing the regulatory requirements, were provided additional technical assistance and support from EC Division staff. During the ongoing provision of technical assistance and support, the 4 LEAs were required to again access the reports tool in the Comprehensive Exceptional Children Accountability System (CECAS), and update their data, at a minimum on a quarterly basis in order for the EC Division to review new data/student records to verify that each LEA with non-compliance was correctly implementing the regulatory requirements. The LEAs were also required to submit data/evidence to NCDPI's EC Division of changes made to improve processes as part of correcting non-compliance. Upon review of the new data/student records for the 4 LEAs, the EC Division has verified that 4 LEAs were correctly implementing the regulatory requirements.

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

Initially, the 4 LEAs had corrected all individual findings of non-compliance. Within one year of notification of non-compliant findings, the State pulled new files to verify that the LEAs were correctly implementing the regulatory requirements. When one of these files was found to be non-compliant for any of the 4 LEAS, the LEA was required to submit data/evidence in CECAS to the NCDPI. EC Division staff reviewed the submitted data/evidence through CECAS and verified that the required corrections had been completed for all child-specific instances of non-compliance.

Indicator 12: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		48.40%	72.27%	82.35%	92.80%	94.00%	94.91%	96.53%	97.75%	98.09%	98.84%

FFY	2015	2016
Target	100%	100%
Data	97.74%	96.48%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	7,072
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.	739
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,838
d. Number of children for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	2,914
e. Number of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.	120
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. [c/(a-b-d-e-f)]x100	2,838	3,299	96.48%	100%	86.03%

Number of children who have been served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f	461

Reasons for Slippage

North Carolina did not meet the target of 100% for Indicator 12. The Department's transition data of 86.03% indicated a slippage of 10.49 percentage points from FFY 2016 (96.50%). The total number of children transitioning from the Part C system (7072) was an increase of 437 total children from FFY 2016 (6635) which represented a 6.59% increase.

The primary cause of North Carolina's slippage is due to significant slippage in performance from two large districts that previously had high rates of compliance. One district, without compliance issues the previous year, had a 25.78% compliance rate in FFY 2017. The other district's FFY 2017 compliance rate was 45.51%.

Initial interviews with leadership in one of the districts indicated that while they had four full time preschool assessment teams, the increase in the number of assessments conducted (+139) resulted in them changing their procedure to enlist the assistance of psychologists based in elementary schools to help conduct entry level evaluations on 4-year olds enrolled in preschool classes in those schools. There was also an administrative decision to curtail assessments conducted over the summer that resulted in a backlog of assessments and initial IEP placements. The LEA has agreed to eliminate this practice and provide compensatory education for those children determined eligible beyond the required timeline.

Initial interviews with leadership in the other large district indicated reasons relating to capacity for initial evaluations due to 1) increased

requirements for entry level assessments for feeding issues and traumatic brain injury resulting from a due process case; 2) significant levels of assessment team staff absences due to family medical leave, and 3) change in process around writing of the reports that exacted negative timeline effects. The increased requirements and processes did not began during the second quarter of the 2017-18 school year, negatively affecting the district's data into the third and fourth quarters of the school year.

In addition to the State verifying within one year of notification that the districts are correctly implementing the regulatory requirements and have corrected individual findings of non-compliance, the State has initiated individual technical assistance and support to assist these two LEAs. NCDPI monitoring consultants are working with all LEAs that have any non-compliant findings and are providing additional technical assistance and support to those LEAs at 75% or less compliance to conduct follow-up on children who did not receive timely transitions. Monthly follow-ups will be conducted by staff to monitor progress toward improvement goals.

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

Number of children delayed beyond 3rd birthday the following number of days:

1 to 5 days	42
6 to 15 days	73
16 to 25 days	69
26 to 35 days	54
36 to 45 days	46
46 days or more	177
TOTAL	461

Number of children delayed due to the following reasons:

a. Family Circumstance (e.g. illness/death in family, change in custody)	27
b. Child Circumstance (e.g. child was sick)	22
c. Part B Circumstance (e.g. delays completing evaluations, timely meetings, arranging transportation, enrollment, etc.)	400
d. Part C Circumstance (e.g. delays in notifying or issuing transition planning meeting invitation)	12
TOTAL	461

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

- ○ **State monitoring**
- ◉ **State database that includes data for the entire reporting year**

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

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

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
18	18	0	0

FFY 2016 Findings of Noncompliance Verified as Corrected

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

Eighteen (18) LEAs with non-compliant findings submitted the following documentation that they are correctly implementing the specific regulatory requirements: 1) the signed local interagency agreement "Catchment Area Transition Plan"; 2) Infant Toddler to Preschool Program Notification Spreadsheet for children referred from August to March 2017, and 3) new Indicator 12 data for the first quarter of 2017. EC Division consultants reviewed the new data and information and verified that the LEAs are correctly implementing the specific regulatory requirements.

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

The eighteen (18) LEAs with non-compliant findings had one hundred eleven (111) child-specific findings of non-compliance in 2016-17. At the time of the initial determination of compliance for Indicator 12, the EC Division verified that the LEAs with non-compliance also submitted/updated data/evidence that eighty-three (83) child-specific instances of non-compliance had been corrected. Ten (10) LEAs were also required to submit data/evidence to the NCDPI, as soon as possible and no later than one year from notification of the non-compliant findings, that the remaining twenty-eight (28) child-specific instances of non-compliance had been corrected. EC Division staff reviewed the submitted data/evidence and verified that the required determinations had been completed for all child-specific instances of non-compliance.

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 13: Secondary Transition

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data						94.70%	94.30%	89.90%	64.40%	85.07%	88.42%

FFY	2015	2016
Target	100%	100%
Data	88.14%	85.35%

Key: ☐ Gray – Data Prior to Baseline ☐ Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
658	770	85.35%	100%	85.45%

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

- (•) **State monitoring**
- ( ) **State database that includes data for the entire reporting year**

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

During the 2017-18 school year, data for this indicator were gathered through on-site Program Compliance Reviews conducted in thirty-eight (38) LEAs, including twenty-four (24) traditional LEAs and fourteen (14) charter schools with students age 16 and above. Monitoring consultants and other EC Division staff members conducted the Program Compliance Reviews. When reviewing records to determine compliance with Indicator 13, staff used the EC Division's Special Education Student Record Review Protocol with compliance items based on The Indicator 13 Checklist, developed by the National Secondary Transition and Technical Assistance Center (NSTTAC).

Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?

- ( ) Yes
- (•) No

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
38	38	0	0

FFY 2016 Findings of Noncompliance Verified as Corrected

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

Thirty-eight (38) of the forty-four (44) LEAs with Program Compliance Reviews and students with disabilities, ages 16 and older, had findings of non-compliance in one or more student records. NCDPI staff reviewed additional (new) student records for each of the thirty-eight (38) LEAs where non-compliance was identified and verified, as required, that all of the non-compliance had been systemically corrected in each LEA. NCDPI reviewed the new student records while on-site in the LEA or electronically through CECAS.

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

Thirty-eight (38) of forty-four (44) LEAs with Program Compliance Reviews and students with disabilities, ages 16 and older, had findings of non-compliance in one or more student records. The LEAs that had identified non-compliance were required to submit a copy of each student's IEP that documented the correction of student specific noncompliance (126 individual student records) for NCDPI review and verification. If an IEP(s) could be accessed electronically through CECAS, the NCDPI Monitoring Consultants verified correction using the electronic submission/version of the IEP(s). NCDPI verified the correction of the 126 IEPs that had non-compliant findings related to the transition requirements.

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 14: Post-School Outcomes

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2009	Target ≥							39.00%	39.00%	39.50%	39.50%	39.50%
		Data						39.00%	34.00%	29.00%	31.00%	29.77%	31.88%
B	2009	Target ≥							62.00%	62.00%	62.50%	62.50%	62.50%
		Data						62.00%	58.00%	57.00%	57.00%	54.45%	61.11%
C	2009	Target ≥							73.00%	73.00%	73.50%	73.50%	73.50%
		Data						73.00%	70.00%	66.00%	63.00%	68.96%	72.71%

	FFY	2015	2016
A	Target ≥	39.50%	39.50%
	Data	38.39%	27.27%
B	Target ≥	62.50%	62.50%
	Data	71.73%	62.51%
C	Target ≥	73.50%	73.50%
	Data	77.98%	78.14%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A ≥	39.75%	40.00%
Target B ≥	62.75%	63.00%
Target C ≥	73.75%	74.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2017 SPP/APR Data

Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	807.00
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	218.00
2. Number of respondent youth who competitively employed within one year of leaving high school	289.00
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	49.00
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	71.00

	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A. Enrolled in higher education (1)	218.00	807.00	27.27%	39.75%	27.01%

	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	507.00	807.00	62.51%	62.75%	62.83%
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	627.00	807.00	78.14%	73.75%	77.70%

Please select the reporting option your State is using:

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

Option 2: Report in alignment with the term "competitive integrated employment" and its definition, in section 7(5) of the Rehabilitation Act, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). For the purpose of defining the rate of compensation for students working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Was sampling used? Yes
Has your previously-approved sampling plan changed? No

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

North Carolina conducts a sampling of local education agencies (LEAs), charter schools and State-Operated Programs (SOPs). A sampling calculator developed by the National Post-school Outcomes Center was used to establish representative samples through fiscal year 2020-21. District level information was entered into the Sampling Calculator and a sampling of districts, based on a multi-way cluster model, was produced. Samples were equivalent for size of district, percentage of females, students with disabilities, and minority race. All LEAs are sampled at least once every five years. The five LEAs with an Average Daily Membership (ADM) of 50,000 or more are sampled each year. Students in the sample include all students with IEPs who graduated with a regular diploma, aged out, received a certificate, dropped out, or were expected to return but did not.

A total of 1,759 Exiters were included in the 2018 follow-up survey of the 2016-17 school Exiters. A total of 807 surveys were completed for an overall response rate of 45.88%, representing a slight rate increase of a 0.22 percentage point from the previous year.

Was a survey used? Yes
Is it a new or revised survey? No

Include the State's analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

The response data are representative for gender, race, and disability categories. However, the sample of Exiters who completed the survey is under-represented by those who dropped out (- 4 percentage points). Students who dropped out represented approximately 19% of the students in the sample, and only 15% of the respondents. While this potential of nonresponse bias, regarding those who dropped out, is similar to previous years' discrepancies between the population and sample, the data indicate the discrepancy has decreased by 5.8 percentage points from the previous year.

To examine potential nonresponse bias, a comparison of the known characteristics of all 2016-17 Exiters to the characteristics of those who completed the survey was conducted and noted in the following table.

Percentages of Total School Exiters, Survey Completers, and Differences between Percentages

School Leaver Characteristics	Total school Exiters	(%)Completed survey	(%)Difference* (percentage points)
Gender			
Female	33	35	+ 2
Male	67	65	- 2
Race			
African American	36	34	- 2
Hispanic	12	11	- 1
White	46	48	+ 2
Other Races	6	7	+ 1
Disability			
Autism	8	9	+ 1
Intellectual Disability	13	14	+ 1
Other Health Impaired	25	26	+ 1
Serious Emotional Disability	5	4	- 1
Specific Learning Disability	45	43	- 2
Other Disabilities	4	4	+/- 0
Type of Exit			
Graduated	75	77	+ 2
Certificate	5	7	+ 2
Dropped Out	19	15	- 4
Reached Maximum Age	1	1	+/- 0

*Difference between the percentage of school Exiters and the percentage of Exiters in the sample who completed the survey. The acceptable range of over/under-representation is typically +/-3 percentage points. Some percentages may not add to 100 due to rounding.

Are the response data representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school? No

Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

As noted above, the response data were representative about gender, race, and disability categories. The sample of Exiters who completed the survey is under-represented by those who dropped out (- 4 percentage points). Students who had dropped out represented approximately 19% of the students in the sample, and only 15% of the respondents. While this potential of nonresponse bias, regarding those who dropped out, is similar to previous years' discrepancies between the population and sample, the data indicate the discrepancy has decreased by 5.8 percentage points from the previous year, so progress has been made.

For FFY 2016, the State changed its data collection process to address concerns about low response rates, the under-representation of drop-outs in the response rate, and to provide LEAs with better, more useful data. For the second year each LEA, in the approved Indicator 14 sample, conducted the survey interviews/collected and submitted its data to the NCDPI-EC Division. During training for LEAs in the approved sample, the importance of

a strong response rate and response data representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school are emphasized. As a result, response rate for FFY 2017 remained at a high level (45.88%) and the discrepancy between drop-outs in the survey sample and drop-outs who responded decreased by 5.8 percentage points from the previous year. LEAs attempted to contact all students in the sample and when telephone numbers and/or email addresses didn't work, they employed methods such as finding students through social media, relatives and friends. Even with these methods, LEAs were unable to contact some former students. Also, some former students who the LEAs were able to contact, including those who dropped out, chose not to participate in the survey.

Actions required in FFY 2016 response

none

Indicator 15: Resolution Sessions

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

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

Historical Data

Baseline Data: 2005

FFY	2004	2005			2006			2007			2008		
Target			-		86.00%	-	86.00%	75.00%	-	85.00%	75.00%	-	85.00%
Data		86.00%			75.00%			55.60%			72.10%		

FFY	2009			2010			2011			2012		
Target	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%
Data	62.80%			42.86%			42.42%			48.15%		

FFY	2013			2014			2015			2016		
Target	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%
Data	50.00%			16.67%			48.84%			38.46%		

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017			2018		
Target	75.00%	-	85.00%	75.00%	-	85.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/8/2018	3.1(a) Number resolution sessions resolved through settlement agreements	18	null
SY 2017-18 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/8/2018	3.1 Number of resolution sessions	38	null

FFY 2017 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
18	38	38.46%	75.00% - 85.00%	47.37%

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 16: Mediation

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of mediations held that resulted in mediation agreements.

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

Historical Data

Baseline Data: 2005

FFY	2004	2005			2006			2007			2008		
Target			-		84.00%	-	84.00%	75.00%	-	85.00%	75.00%	-	85.00%
Data		71.00%			83.00%			68.00%			80.00%		

FFY	2009			2010			2011			2012		
Target	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%
Data	71.80%			54.50%			75.68%			83.78%		

FFY	2013			2014			2015			2016		
Target	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%
Data	77.27%			65.71%			61.54%			78.95%		

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017			2018		
Target	75.00%	-	85.00%	75.00%	-	85.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.a.i Mediations agreements related to due process complaints	16	null
SY 2017-18 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.b.i Mediations agreements not related to due process complaints	20	null
SY 2017-18 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1 Mediations held	66	null

FFY 2017 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
16	20	66	78.95%	75.00% - 85.00%	54.55%

Reasons for Slippage

Data indicated that the total number of mediations held (66) increased substantially by 73.68% in 2017-18 from the previous year (38). The total number of mediation agreements (36) only increased by 20% from the previous year (30). Mediations held that were related to due process complaints increased by 50% from the previous year; however the number of mediation agreements related to due process complaints remained the same (16) as the previous year (0% increase). Feedback from participants involved in mediations, as well as other anecdotal information gathered during various stakeholder meetings throughout the year, indicated in some instances there was a lack of interest to resolve disagreements during mediation, particularly those related to due process complaints. In some instances the intent was only to complete the process in order to go to due process hearings and/or collect attorney fees. The NCDPI-EC Division continues to analyze its data more closely regarding various aspects of the dispute resolution process, including: access to high quality attorneys for families with low-income if attorneys' fees were not available; training and qualifications of mediators and individuals conducting facilitated IEP meetings; and other means of communication to encourage the continued and increased use of early resolution processes.

Actions required in FFY 2016 response

none

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 17: State Systemic Improvement Plan

Monitoring Priority: General Supervision

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

Reported Data

Baseline Data: 2013

FFY	2013	2014	2015	2016	2017
Target ≥					
Data					

Key: ☐ Gray – Data Prior to Baseline ☐ Yellow – Baseline
Blue – Data Update

FFY 2018 Target

FFY	2018
Target ≥	

Key:

Description of Measure

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

☐ Enter additional information about stakeholder involvement

Overview

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Children with Disabilities, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., LEA, region, race/ethnicity, gender, disability category, placement, etc.). As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in LEAs to implement, scale up, and sustain the use of evidence-based practices to improve results for children with disabilities. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and initiatives, including special and general education improvement plans and initiatives, and describe the extent that these initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

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

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified result(s) must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified result(s) must be clearly based on the Data and State Infrastructure Analyses and must be a child-level outcome in contrast to a process outcome. The State may select a single result (e.g., increasing the graduation rate for children with disabilities) or a cluster of related results (e.g., increasing the graduation rate and decreasing the dropout rate for children with disabilities).

FFY 2017 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Statement

Description

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified result(s). The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support LEA implementation of evidence-based practices to improve the State-identified Measurable Result(s) for Children with Disabilities. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build LEA capacity to achieve the State-identified Measurable Result(s) for Children with Disabilities.

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in LEAs, and achieve improvement in the Stat identified Measurable Result(s) for Children with Disabilities.

Submitted Theory of Action: No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

Infrastructure Development

(a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
(b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
(c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
(d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

Support for EIS programs and providers Implementation of Evidence-Based Practices

(a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
(b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charg of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
(c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practice once they have been implemented with fidelity.

Evaluation

(a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
(b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
(c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
(d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

Phase III submissions should include:

- Data-based justifications for any changes in implementation activities.
- Data to support that the State is on the right path, if no adjustments are being proposed.
- Descriptions of how stakeholders have been involved, including in decision-making.

A. Summary of Phase 3

1. Theory of action or logic model for the SSIP, including the SiMR.
2. The coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies.
3. The specific evidence-based practices that have been implemented to date.
4. Brief overview of the year's evaluation activities, measures, and outcomes.
5. Highlights of changes to implementation and improvement strategies.

See attachment - NC SSIP Phase Three, Year Three

B. Progress in Implementing the SSIP

1. Description of the State's SSIP implementation progress: (a) Description of extent to which the State has carried out its planned activities with fidelity—what has been accomplished, what milestones have been met, and whether the intended timeline has been followed and (b) Intended outputs that have been accomplished as a result of the implementation activities.
2. Stakeholder involvement in SSIP implementation: (a) How stakeholders have been informed of the ongoing implementation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP.

See attachment - NC SSIP Phase Three, Year Three

C. Data on Implementation and Outcomes

1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan: (a) How evaluation measures align with the theory of action, (b) Data sources for each key measure, (c) Description of baseline data for key measures, (d) Data collection procedures and associated timelines, (e) [If applicable] Sampling procedures, (f) [If appropriate] Planned data comparisons, and (g) How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements
2. How the State has demonstrated progress and made modifications to the SSIP as necessary: (a) How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR, (b) Evidence of change to baseline data for key measures, (c) How data support changes that have been made to implementation and improvement strategies, (d) How data are informing next steps in the SSIP implementation, and (e) How data support planned modifications to intended outcomes (including the SIMR)—rationale or justification for the changes or how data support that the SSIP is on the right path
3. Stakeholder involvement in the SSIP evaluation: (a) How stakeholders have been informed of the ongoing evaluation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing evaluation of the SSIP

See attachment - NC SSIP Phase Three, Year Three

D. Data Quality Issues: Data limitations that affected reports of progress in implementing the SSIP and achieving the SIMR

1. Concern or limitations related to the quality or quantity of the data used to report progress or results
2. Implications for assessing progress or results
3. Plans for improving data quality

See attachment - NC SSIP Phase Three, Year Three

E. Progress Toward Achieving Intended Improvements

1. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up
2. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects
3. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SIMR
4. Measurable improvements in the SIMR in relation to targets

See attachment - NC SSIP Phase Three, Year Three

F. Plans for Next Year

1. Additional activities to be implemented next year, with timeline
2. Planned evaluation activities including data collection, measures, and expected outcomes
3. Anticipated barriers and steps to address those barriers
4. The State describes any needs for additional support and/or technical assistance

See attachment - NC SSIP Phase Three, Year Three

Certify and Submit your SPP/APR

I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.

Selected: Designated by the Chief State School Officer to certify

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

Name: Nancy T. Johnson, Ed.D.

Title: NCDPI-EC SPP/APR Coordinator

Email: ntjohnso@uncc.edu

Phone: 704-576-2760