

# **STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B**

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

**For reporting on  
FFY 2020**

**Indiana**



**PART B DUE February 1, 2022**

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

## Introduction

### Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

### Intro - Indicator Data

#### Executive Summary

The Indiana state education agency (SEA) is Indiana Department of Education (IDOE). The Office of Special Education (OSE) is part of IDOE's Academics Division, which works in close partnership with the Student Pathways and Opportunities Division. The SEA offers support to the OSE through ancillary divisions such as: Finance, Communications, General Counsel, External Affairs & Partnerships (including Legislative Affairs), Assessment, Accountability, Information/Data Management, and Social, Emotional & Behavioral Wellness.

For the IDOE organizational chart, please see: <https://drive.google.com/file/d/1IW9ykkldsrst2CnJAnnPYFdHEC3LWomp/view>

The OSE continues to strengthen relationships between various offices such as School Improvement, Assessment, Early Learning, Title Programs, and Educator Effectiveness through work on the State Systemic Improvement Plan (Indicator 17).

Based on the Individuals with Disabilities Education Act (IDEA), Every Student Succeed Act (ESSA) and the Office of Special Education Programs (OSEP) 2015 Dear Colleague Letter on the Provision of a Free Appropriate Public Education (FAPE), IDOE/OSE has established the foundation for our state's Every Student Succeeds initiative. This initiative is represented via an infographic that contains the following key provisions:

1. Central is the philosophy equity plus access equals outcomes;
2. This is achieved through the tenets of high expectations, shared accountability, and shared responsibility;
3. Supporting those tenets are collaboration, instruction, assessment, and curriculum; and
4. The overall system is designed around a Results Driven Accountability (RDA) Framework and supported through an environment of Universal Design for Learning and a Multi-Tiered System of Supports.

In November 2021, Indiana made Local Educational Agency (LEA) determinations based upon an RDA system which includes differentiated support. Results indicators and other results data, compliance indicators and data timeliness are components and the cornerstone of RDA. Each of these components are then made up of specific elements which are assigned points dependent upon whether a target is met. These points are part of a calculation by which the LEA determination is assigned and differentiated support is decided. This has been a multi-year project developed and implemented on the input of stakeholders from throughout Indiana to improve educational opportunities and results for all students, including students with disabilities (SWDs).

OSE full-time staff provide general supervision to the state through two teams: Fiscal and Monitoring/compliance. In addition to the State Director, OSE administration also includes an Assistant Director for each of those three areas. The OSE collaborates with the Office of Student Supports and Accessibility (OSSA) to address Technical Assistance and Professional Development. Indiana also contracts with several entities which comprise the Indiana Resource Network (IRN). These entities provide professional development (PD) and TA under direction of OSE by working directly with LEAs across the state. As a result of a long and productive relationship with our state Parent Training and Information Center (IN\*SOURCE), IDOE also provides office space for an IN\*SOURCE staff member, which fosters ongoing collaboration between the two entities and provides responsive parent support.

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

IDOE has implemented Data Exchange, a project to improve the process of data transfer and certification for student and educator level data submitted by schools and school corporations. Data Exchange implementation began in the 2020-21 school year and, while there have been some issues noted, is intended to address continuous data quality improvement.

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

406

#### General Supervision System:

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

As a result of increased accountability and changes in OSEP's monitoring priorities, IDOE developed a results driven accountability (RDA) system. With IDOE's implementation of RDA, efforts shifted to a framework that focuses on both compliance and improved results. This RDA system aligns with the IDEA requirements, RDA as outlined by OSEP, the Elementary and Secondary Education Act as revised by the ESSA, and state statutes and regulations. RDA is an integrated process involving data collection and verification, LEA corrective action, TA, reporting, and sanctions as applicable. RDA also emphasizes child outcomes: assessment performance, graduation rates, LRE, and early childhood outcomes, as well as data timeliness. This system is designed to ensure state and district compliance with federal special education requirements and improved academic, behavioral, and social outcomes for SWDs.

IDOE's system aligns with OSEP's 8 key components for improving educational results and functional outcomes for all SWDs:

##### 1 State Performance Plan /Annual Performance Report (SPP/APR)

The current SPP/APR, effective from FFY2013-19, describes the 17 federal indicators and provides a target for each. Each indicator is categorized as either compliance or results, with targets set based on trend analysis and stakeholder input. The APR reflects the performance of LEAs based on indicator data (including findings), allowing a year for correction by LEAs that did not meet the targets for specific indicators.

##### 2 Implementation of Policies & Procedures

Indiana's special education rules are found in the Indiana Administrative Code at 511 IAC 7-32 through 7-49 (Article 7). Article 7 is aligned with IDEA and implemented by local programs, including LEAs. IDOE encourages LEAs to proactively seek assistance as needed to implement state policies and procedures. A phone line and email account are monitored daily by special education staff to assist LEAs. In addition, guidance/clarification is often included in the OSE newsletter.

##### 3 Integrated Monitoring

IDOE conducts monitoring activities focused on improving educational results and functional outcomes for all SWDs, and ensuring that LEAs and other educational programs meet the requirements of the IDEA. IDOE monitors through the collection and analysis of data the LEAs submit. These data are compared to targets as defined in the SPP/APR.

IDOE monitors LEAs using an RDA framework, including compliance indicator data, results data, and data timeliness. Each compliance indicator is

assigned a status of compliant, finding of noncompliance, or N/A. A score is assigned to each of the indicators, based upon the status. The compliance scores and data timeliness scores are added and weighted to calculate the LEA determination. Based on the determination, IDOE may offer TA/PD, require a corrective action plan to resolve the root cause issue(s), and/or put special conditions on funds.

Statewide grade 3 reading test data, 1% alternate assessment cap data, and data points from Indicators 1, 3, 5, and 7 are used to calculate results. A differentiated level of support is assigned based on the final results calculation: Level 1 (universal support), Level 2 (targeted PD), and Level 3 (one-on-one support from an OSE specialist to work on correction of compliance/improving results as needed).

#### 4 Fiscal Management

Part B LEA allocations are calculated in accordance with 34 CFR §§300.705 (subgrants of section 611 funds) and 300.815 & 816 (subgrants of section 619 funds). Once calculated, allocations are posted to IDOE's internal system, and LEAs complete and submit grant applications for approval.

Applications are as follows: Part B 611 (budget/part one), Part B 611 (MOE/part two), Part B 619, and Part B Mandatory CCEIS.

Part B applications are uploaded by fiscal agencies to a web-based grant management system for initial review by a fiscal team member. Once approved, a second fiscal team member reviews the application. Applications are reviewed for allowable costs, proportionate share amounts, CEIS amounts, signatures, and all other IDEA requirements. Application data is entered into an internal tracking sheet by grant year. Upon approval, LEAs receive a letter granting reimbursement requests. If an LEA requests modification, IDOE specialists use a two-party review to ensure accuracy and allowability. The reimbursement template (as of 2019) requires LEAs to report the number of students receiving CCEIS and the number in that category who receive an IEP. Reimbursement requests are split by scope (Special Education, CCEIS, and Proportionate Share) to ensure funds are being used in the manner approved and to benefit SWDs in each scope. At the end of a grant cycle, LEAs must submit a final expenditure report with a final reimbursement request to confirm funds were expended as approved. For any funds expended in a nonapproved manner, LEAs are contacted and required to return the funds for repayment to the USED. IDOE utilizes a portion of Part B funds for administrative support and discretionary activities, including contracts to entities for the provision of TA and PD to LEAs.

#### 5 Data

Public schools, including charter schools, and accredited nonpublic schools submit data regarding students, personnel, and other required information via online data portal. Required submissions, some of which are specific to SWDs, include: child count, personnel, education settings, exiting information, discipline, assessment, and dispute resolution. Data, including 618 data, is used to inform all of the projects in which IDOE is involved, including the RDA system and completion of the SPP/APR. In 2020 IDOE conducted RDA Data Retreats where LEAs reviewed local data and discussed next steps and developing goals. The Data Retreats assisted LEAs in understanding RDA calculations and determinations, changes from last year, the RDA Planning Tool, and findings received based on special education indicators. Upon request, IDOE provides data to members of the general public, school personnel, State Board of Education, and legislators following confidentiality laws (FERPA and Article 7). (<https://www.doe.in.gov/specialed/data>)

#### 6 Sustaining Compliance & Improvement

Based on both prongs of our RDA framework, LEAs receive individualized levels of assistance to: sustain compliance, encourage growth, and analyze systemic efforts to improve outcomes for students with disabilities. If an LEA has a finding of noncompliance, the LEA must complete, as necessary, a root cause analysis to determine the reason(s) for non-compliance and then develop a corrective action plan. The plan must be implemented, and noncompliance fixed within a year of the finding. If the noncompliance is not corrected within 1 year, the LEA is determined to be in continued noncompliance, and if not fixed after a second year, the LEA goes into long-standing noncompliance. In recent years, 1 LEA has been determined to need substantial intervention. This resulted in Special Conditions being placed on the Part B Grant, along with other sanctions.

#### 7 Dispute Resolution

IDOE encourages communication between parents and LEAs when a dispute arises related to special education. When informal efforts prove unsuccessful, IDOE makes available all of IDEA's dispute resolution mechanisms: mediation, state complaint, and due process hearing. In addition to the 3 processes identified in Article 7, IDOE also provides Facilitated IEP services to address concerns within the IEP team meeting on request at no cost to the parties. IDOE works with LEAs and IN\*SOURCE to ensure that parents receive and understand their rights and responsibilities.

<https://www.doe.in.gov/specialed/dispute-resolution>

8 Technical Assistance: See next section.

#### Technical Assistance System:

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

For purposes of this section, TA is defined as the provision of advice and assistance in the implementation, installation and maintenance of the concepts related to improving the performance of students with disabilities. In Indiana, the provision of LEA TA and PD go hand in hand. With the implementation of Indiana's RDA framework, the support is matched to the LEA determination and/or results indicator level, and subsequent assistance will be differentiated. Depending on the subject matter and the intensity of the need, the IDOE and IRN (Indiana Resource Network) specialists offer various levels of TA and/or professional development. TA and professional development are provided based upon three levels of need: universal, targeted, and intensive.

The universal level is available to all LEAs and includes: discussion with or training by IDOE or IRN staff members; IDOE and IRN websites including topic-specific communities of learning; information about state and national resources; links and contact information to relevant local, regional and state resources; written guidance about specific topics; video; webinars; and question and answer documents. The targeted level of assistance is available to those LEAs who have identified noncompliance found through our RDA monitoring processes described elsewhere in this introduction, or if the LEA is in danger of being out of compliance if policy, procedure, and practice revisions are not made. The targeted level also includes those LEAs who have had personnel changes and require assistance to ensure new staff gain the knowledge of the expectations under IDEA. Assistance is provided via: webinars, conference calls, virtual meetings, and on-site or regional training opportunities that include evidence-based practices, and summits. The intensive level of assistance focuses on LEAs where the issue or issues are identified as systemic and/or requiring rigorous LEA work and focused assistance by the IDOE and/or the IRN. Assistance will be individualized dependent upon the identified issue(s) and includes one-to-one consultation and/or topic-specific training provided to LEA staff by the IDOE and/or the IRN. With the implementation of RDA, there is a direct correlation between the LEA determination score and the differentiated level of TA/PD assistance provided. With respect to Results Technical Assistance levels, Level 1 LEAs are generally provided universal TA; Level 2s are targeted; Level 3s are intensive. As TA and professional development occur in Indiana, IDOE follows the principles of adult learning and includes evidence-based practices. 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. Depending on the subject matter and the intensity of the need, IDOE offers various levels of TA and/or professional development to LEAs either directly, virtually, indirectly via online resources, and through IRN service providers. These IRN partners' services are briefly described below and can be directly accessed by the LEAs in the state: Indiana IEP Resource Center (IEPRC) provides resources, professional learning opportunities, and technical assistance related to the Indiana IEP system, Article 7 compliance, IEP processes and improving local practices. Indiana Center on Teacher Quality (ICTQ) improves educational outcomes for students with disabilities by ensuring their access to a PreK -12 continuum of instruction from high-quality teachers. The project uses Implementation Science as a framework for building capacity at the universal, targeted, and intensive levels. The Indiana Resource Center for Families with Special Needs, or INSOURCE, provides parents, families, individuals, and service providers the information necessary to assure effective educational programs and appropriate services for individuals with disabilities. Promoting Achievement for Students with Sensory Loss (PASS) provides statewide support, technical assistance, and professional development opportunities for educators that will improve instructional quality, promote academic achievement, and foster successful post-secondary transition outcomes for students with sensory loss. The PATINS Project supports schools in creating and sustaining an equitable learning environment for every student through assistive and accessible technologies, accessible educational materials, and Universal Design for Learning. Indiana Center for Accessible Instructional Materials (ICAM) is a managed web-based system designed to provide support to LEAs in meeting the NIMAS regulations of the

IDEA 2004. Indiana Secondary Transition Resource Center (INSTRC) works closely with transition educators and teams throughout the state, providing technical assistance, troubleshooting challenges, and assisting schools as they collaborate with state agencies and organizations to build seamless transitions for their students. The Indiana Disproportionality Resource Center (IDRC) assists the IDOE in defining and identifying disproportionality in special education, and provides TA to LEAs in order to increase equity in special education throughout the state. Virtuoso Education Consulting develops practitioners' awareness, knowledge, and skills related to best practices in the PK-12 environment. The team helps educators meet school improvement goals, remediate disproportionality, close discipline and achievement gaps, and develop proficiency in culturally responsive practices. The Early Childhood Center (ECC) provides training, technical assistance, data analyses, and strategic planning to support schools in improving the quality and impact of their preschool programs with specific attention to inclusion and early literacy. There are other technical assistance / professional development resources in the state that can be accessed by the LEAs; however, IDOE does not have a direct contract relationship. They include: The Indiana Deafblind Services Project is designed to improve the quality of educational services available to Indiana's infants, toddlers, children, and youth who have a combined vision and hearing loss. Positive Behavior Interventions & Supports Resource Center develops and establishes a statewide network of culturally responsive school-wide positive behavior support sites and increases educators' knowledge and understanding of how PBIS impacts student achievement, family engagement, dropout rate, and least restrictive environment placements. HANDS (Helping Answer Needs by Developing Specialists) in Autism Resource Center builds local capacity in the use of behavioral and educational practices supported with the data-driven HANDS Model curriculum, framework, and process of outreach, education, and training that is accessible, usable and relevant across systems, providers and communities serving individuals and families affected not only by autism spectrum disorder but a full range of disabilities, ages, intellectual and functional abilities, and neurodevelopmental, behavioral and other challenges. Center on Education and Lifelong Learning (CELL) provides tools, training, and TA as schools increase student achievement, build staff capacity, and align resources focusing on professional development related to teacher evaluation systems, differentiated instruction, classroom management, co-teaching, instructional consultation teams, culturally responsive practices, and PBIS. The Indiana Resource Center for Autism (IRCA) staff are actively engaged in work that leads to improved outcomes for individuals on the autism spectrum and related disorders, and their families by providing professionals, family members, and individuals with ASD with the knowledge and skills to support children and adults in typical early intervention, school, community, work, postsecondary and home settings.

### **Professional Development System:**

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

For purposes of this section, TA is defined as the provision of advice and assistance in the implementation, installation and maintenance of the concepts related to improving the performance of students with disabilities. In Indiana, the provision of LEA TA and PD go hand in hand. With the implementation of Indiana's RDA framework, the support is matched to the LEA determination and/or results indicator level, and subsequent assistance will be differentiated. Depending on the subject matter and the intensity of the need, the IDOE and Indiana Resource Network- IRN (Indiana's technical assistance partners) specialists offer various levels of TA and/or professional development. TA and professional development are provided based upon three levels of need: universal, targeted, and intensive.

The universal level is available to all LEAs and includes: discussion with or training by IDOE or IRN staff members; IDOE and IRN websites including topic-specific communities of learning; the IDOE Moodle Communities; information about state and national resources (including the OSEP funded national TA centers as well as the IRN ); links and contact information to relevant local, regional and state resources; written guidance about specific topics; short video clips; webinars; and question and answer documents.

The targeted level of assistance is available to those LEAs who have identified noncompliance found through our RDA monitoring processes identified elsewhere in this introduction, or if the LEA is in danger of being out of compliance if policy /procedure /practice revisions are not made. The targeted level also includes those LEAs who have had personnel changes and require assistance to ensure new staff gain the knowledge of the expectations under IDEA. Assistance is provided via: webinars, conference calls, virtual meetings, and on-site or regional training opportunities that include evidence-based practices, and summits.

The intensive level of assistance focuses on LEAs where the issue or issues are identified as systemic and/or requiring rigorous LEA work and focused assistance by the IDOE and/or the IRN. Assistance will be individualized dependent upon the identified issue(s) and includes one-to-one consultation (telephone, email, virtual, or on-site meeting) and/or topic-specific training provided to LEA staff by the IDOE and/or the IRN. With the implementation of RDA, there is a direct correlation between the LEA determination score and the differentiated level of TA/PD assistance provided.

With respect to Results Technical Assistance levels, Level 1 LEAs are generally provided universal TA; Level 2s are targeted; Level 3s are intensive.

As TA and professional development occur in Indiana, IDOE follows the principles of adult learning and includes evidence-based practices. The effectiveness of the implementation is measured through the data collected for the specific indicators or evidence that practice has changed.

**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. Depending on the subject matter and the intensity of the need, IDOE offers various levels of TA and/or professional development to LEAs either directly (telephone/email and on-site), virtually (both synchronous and asynchronous), indirectly via online resources, and through Indiana Resource Network (IRN) service providers.

These IRN partners' services are briefly described below and can be directly accessed by the LEAs in the state:

Indiana IEP Resource Center (IEPRC) provides resources, professional learning opportunities, and technical assistance related to the Indiana IEP system, Article 7 compliance, IEP processes and improving local practices.

Indiana Center on Teacher Quality (ICTQ) improves educational outcomes for students with disabilities by ensuring their access to a PreK -12 continuum of instruction from high-quality teachers. The project uses Implementation Science as a framework for building capacity at the universal, targeted, and intensive levels.

The Indiana Resource Center for Families with Special Needs, or IN\*SOURCE, provides parents, families, individuals, and service providers the information and training necessary to help assure effective educational programs and appropriate services for individuals with disabilities.

Promoting Achievement for Students with Sensory Loss (PASS): PASS Project provides statewide support, technical assistance, and professional development opportunities for educators that will improve instructional quality, promote academic achievement, and foster successful post-secondary transition outcomes for students with sensory loss.

PATINS Project: The PATINS Project supports schools in creating and sustaining an equitable learning environment for every student through assistive and accessible technologies, accessible educational materials, and Universal Design for Learning. Indiana Center for Accessible Instructional Materials (ICAM): ICAM is a managed web-based system designed to provide support to LEAs in meeting the NIMAS regulations of the IDEA 2004.

Indiana Secondary Transition Resource Center (INSTRC): INSTRC works closely with transition educators and teams throughout the state, providing technical assistance, troubleshooting challenges, and assisting schools as they collaborate with state agencies and organizations to build seamless transitions for their students.

The Indiana Disproportionality Resource Center (IDRC): IDRC assists the IDOE in defining and identifying disproportionality in special education, and provides TA to LEAs in order to increase equity in special education throughout the state. Virtuoso Education Consulting: Virtuosos develops practitioners' awareness, knowledge, and skills related to best practices in the PK-12 environment. The team helps educators meet school improvement goals, remediate disproportionality, close discipline and achievement gaps, and develop proficiency in culturally responsive practices.

Indiana School Mental Health Initiative (ISMHI): ISMHI provides resources, consultation, professional development, and education that promote and sustain the social, emotional, behavioral, mental, and physical health of Indiana's school-aged children, including those with disabilities, with the goal of increasing school engagement and improving educational and life outcomes.

The Early Childhood Center (ECC): ECC provides training, technical assistance, data analyses, and strategic planning to support schools in improving the quality and impact of their preschool programs with specific attention to inclusion and early literacy.

**Broad Stakeholder Input:**

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

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

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

YES

**Number of Parent Members:**

48

**Parent Members Engagement:**

**Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.**

Parent input was obtained from a variety of means. Meetings were offered in a synchronous format, and feedback was obtained through: an online polling mechanism, response in the online chat, verbal responses, and email. Additionally, meetings were recorded and made available asynchronously on the

IDOE website with an option to email any comments or feedback.

**Activities to Improve Outcomes for Children with Disabilities:**

**The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.**

All stakeholder meetings were organized and facilitated by OSE. The meetings provided information on the 17 indicators to inform the stakeholders of the history and data trends so that they could make informed recommendations. The presentations included how each indicator is defined, measured, and calculated. An in-depth history of statewide results over the last five years, information on how Indiana compares to similar states, and data forecasting were also included. Each session sought stakeholder feedback on setting targets, developing improvement strategies, and evaluating statewide progress (where applicable).

**Soliciting Public Input:**

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

Beginning in April 2021, IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -

educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

All of the stakeholder meetings were organized and facilitated by OSE. The meetings provided information on the 17 indicators to inform the stakeholders of the history and data trends so that they could make informed recommendations. The presentations included how each indicator is defined, measured, and calculated. An in-depth history of statewide results over the last five years, information on how Indiana compares to similar states, and data forecasting were also included. Each session sought stakeholder feedback on setting targets, developing improvement strategies, and evaluating statewide progress (where applicable).

From April to July 2021, 13 SPP/APR Stakeholder Meetings were held. These were hosted virtually to maximize participation, and both morning and evening sessions were offered. Each session focused on a single indicator, with the exception of the following pairings: Indicators 1 and 2; Indicators 9 and 10; Indicators 11 and 12; and Indicators 15 and 16. Over the course of the 13 stakeholder meetings, there were 411 registered participants.

**Making Results Available to the Public:**

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

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations. Using a virtual meeting platform, all interested participants were allowed to participate. Translation services and closed captioning were offered.

**Reporting to the Public**

**How and where the State reported to the public on the FFY 2019 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 2019 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.**

The State reported the FFY 2019 performance of each LEA located in the State through public posting. The posting was made available at <https://www.in.gov/doe/students/special-education/> under the heading Data (2019-2022) (<https://www.in.gov/doe/files/2019-2022-Data.pdf>).

A complete copy of Indiana's State Performance Plan/Annual Performance Report (SPP/APR) is located on the Web site at <https://www.in.gov/doe/students/special-education/> (under the heading State Performance Plan/Annual Performance Report (SPP/APR)-[https://docs.google.com/document/d/1D-r3cW6yeom1aFNA86mfKUtCmDGex98B8z4js\\_4PnmA/edit](https://docs.google.com/document/d/1D-r3cW6yeom1aFNA86mfKUtCmDGex98B8z4js_4PnmA/edit)).

**Intro - Prior FFY Required Actions**

None

**Intro - OSEP Response**

**Intro - Required Actions**

# Indicator 1: Graduation

## Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

### Data Source

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

### Measurement

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

### Instructions

*Sampling is not allowed.*

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), and compare the results to the target. Provide the actual numbers used in the calculation.

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

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

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

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2020	83.33%

FFY	2015	2016	2017	2018	2019
Target >=	70.00%	72.00%	74.00%	76.00%	76.50%
Data	70.87%	72.03%	70.87%	72.64%	71.44%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	83.88%	84.33%	84.88%	85.33%	85.88%	86.33%

### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 1, stakeholders had concerns related to the inclusion of students who receive a Certificate of Completion in the calculations. It was discussed that OSEP mandates the measurement as students receiving a regular diploma.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	6,857
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	918
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	6
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	448

**FFY 2020 SPP/APR Data**

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
6,857	8,229	71.44%	83.88%	83.33%	N/A	N/A

**Graduation Conditions**

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

To graduate with a general (regular) diploma, students must:

1) pass 40 credits of high school instruction, including specific requirements across subject areas in English, mathematics, social studies, science, physical education, health, and college and career readiness; AND

2) either:

a) pass the graduation qualifying exam administered by the state or be granted a waiver under certain conditions if they do not pass this exam, OR  
 b) be certified with a graduation pathway that includes an employability skills component and a postsecondary education readiness component.

Requirements for students with disabilities are the same as those without.

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

NO

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

Indiana's special education program extends to students turning 22 during their final year of schooling. These students are not reported on the EDFACTS exiting report as they are no longer being educated under IDEA. The exiting graduation rate is thus higher than if the students aged 22 and exiting were included in the calculation.

Stakeholders do prioritize the growth of graduation rate for students with disabilities but ensuring that targets are realistic is of concern given current barriers being faced by students and LEAs. With that, an alternating rate increase was proposed and accepted with a +.45% increase followed by a +.55% increase for 2021-2025.

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**1 - Required Actions**



## Indicator 2: Drop Out

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

#### Data Source

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

#### Measurement

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

#### Instructions

*Sampling is not allowed.*

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), and compare the results to the target.

With the FFY 2020 SPP/APR, due February 1, 2022, States may use either option 1 or 2. States using Option 2 must provide the actual numbers used in the calculation.

OPTION 1:

**Use 618 exiting data** for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

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

OPTION 2:

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

If the State has made or proposes to make changes to the data source or measurement under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012, the State should include a justification as to why such changes are warranted.

Options 1 and 2:

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

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023,** States must report data using Option 1 (i.e., the same data as used for reporting to the Department under section 618 of the IDEA). Option 2 will not be available beginning with the FFY 2021 SPP/APR.

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2018	7.50%

FFY	2015	2016	2017	2018	2019
Target <=	8.01%	7.51%	7.01%	6.51%	6.01%
Data	7.60%	5.90%	7.04%	7.50%	9.86%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	7.25%	7.00%	6.75%	6.50%	6.25%	6.00%

### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

There were not concerns of suggestions provided by stakeholders related to Indicator 2.

**Please indicate the reporting option used on this indicator**

Option 1

**Prepopulated Data**

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	6,857
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	918
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	6
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	448

**FFY 2020 SPP/APR Data**

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
448	8,229	9.86%	7.25%	5.44%	Met target	No Slippage

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

All students who are no longer enrolled in a school, and for whom there are not proper mobility documentation demonstrating continuing education consistent with the state's compulsory education law or documentation of receipt of a diploma or certificate of completion as specified in the student's IEP (except for those students who died during the school year or aged-out of special education services under Indiana law), are recorded as a dropout. For purposes of Indicator 2, this includes all youth aged 14 to 21. Per federal regulations, a student cannot be reported as a dropout for a school year that the student has completed. Therefore, students finishing a school year without a diploma or certificate are reported as dropouts at the beginning of the next school year if and when they do not return to school.

**Is there a difference in what counts as dropping out for youth with IEPs? (yes/no)**

NO

**If yes, explain the difference in what counts as dropping out for youth with IEPs.**

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

Baselines were set using data from FFY2018 as this data was not substantially impacted by COVID-19 considerations, as may be the case for FFY2019 data. FFY2020 was not selected as there is insufficient evidence to indicate a trend at this time. Stakeholders conclude that a decrease in the dropout rate of 0.25 per year as measured by this indicator is a realistic target to set to meet progress.

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**2 - Required Actions**

## Indicator 3A: Participation for Children with IEPs

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS185 and 188.

#### Measurement

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

#### Instructions

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

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

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

### 3A - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2018	99.38%
Reading	B	Grade 8	2018	99.27%
Reading	C	Grade HS	2018	96.23%
Math	A	Grade 4	2018	99.33%
Math	B	Grade 8	2018	99.18%
Math	C	Grade HS	2018	96.43%

#### Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%

**Targets: Description of Stakeholder Input**

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 3, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include: Ensure that all accommodations are available on statewide assessments for students with disabilities.

Ensure dissemination of assessment scores are shared with both special and general educators.

Provide additional training for school staff on assessment best-practices and accessibility for low-incidence populations.

Disaggregate results of assessment data by special education eligibility categories.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

03/30/2022

**Reading Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	13,619	13,290	12,393
b. Children with IEPs in regular assessment with no accommodations	4,157	2,628	422
c. Children with IEPs in regular assessment with accommodations	8,389	8,789	8,339
d. Children with IEPs in alternate assessment against alternate standards	622	951	928

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

03/30/2022

**Math Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	13,621	13,292	12,386
b. Children with IEPs in regular assessment with no accommodations	3,063	1,400	366
c. Children with IEPs in regular assessment with accommodations	9,472	10,008	8,539
d. Children with IEPs in alternate assessment against alternate standards	623	948	921

\*The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the pre-filled data in this indicator.

**FFY 2020 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	13,168	13,619		95.00%	96.69%	Met target	N/A
B	Grade 8	12,368	13,290		95.00%	93.06%	Did not meet target	N/A

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C	Grade HS	9,689	12,393		95.00%	78.18%	Did not meet target	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	13,158	13,621		95.00%	96.60%	Met target	N/A
B	Grade 8	12,356	13,292		95.00%	92.96%	Did not meet target	N/A
C	Grade HS	9,826	12,386		95.00%	79.33%	Did not meet target	N/A

**Regulatory Information**

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

**Public Reporting Information**

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

Assessment participation numbers and rates and proficiency rates for all students with and without disabilities for statewide assessments required by ESEA by LEA and school are linked at the following webpage:

<https://www.in.gov/doi/files/2020-2021-Data.pdf>

Click on the link at the bottom of the page reading: Compliance/Results Indicator Data for All Corporations Compared to Targets SY 2020-2021.

This document also includes information regarding each LEA's performance relative to target on all indicators of the SPP-APR.

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

Due to the change in the measurement table for participation rate information provided in Indicator 3A (previously Indicator 3B), Indiana has elected to reset its baseline reflecting its participation numbers in the now separately required grades four, eight, and High School from FFY2018. These numbers reflect numbers from the first year of current test administration parameters. FFY2020 was not utilized, as Indiana saw a decrease in participation rate largely attributed to COVID-19 considerations and therefore likely ephemeral.

**3A - Prior FFY Required Actions**

None

**3A - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**3A - Required Actions**

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

## 3B - Indicator Data

### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2018	17.22%
Reading	B	Grade 8	2018	12.93%
Reading	C	Grade HS	2018	19.55%
Math	A	Grade 4	2018	25.30%
Math	B	Grade 8	2018	8.62%
Math	C	Grade HS	2018	7.66%

### Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	18.22%	19.22%	20.22%	21.22%	22.22%	23.22%
Reading	B >=	Grade 8	13.93%	14.93%	15.93%	16.93%	17.93%	18.93%
Reading	C >=	Grade HS	20.55%	21.55%	22.55%	23.55%	24.55%	25.55%
Math	A >=	Grade 4	26.30%	27.30%	28.30%	29.20%	30.30%	31.30%
Math	B >=	Grade 8	9.62%	10.62%	11.62%	12.62%	13.62%	14.62%
Math	C >=	Grade HS	8.66%	9.66%	10.66%	11.66%	12.66%	13.66%

### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 3, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include:  
 Ensure that all accommodations are available on statewide assessments for students with disabilities.  
 Ensure dissemination of assessment scores are shared with both special and general educators.  
 Provide additional training for school staff on assessment best-practices and accessibility for low-incidence populations.  
 Disaggregate results of assessment data by special education eligibility categories.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	12,546	11,417	8,761
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,453	741	231
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	373	464	1,653

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	12,535	11,408	8,905
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,423	285	126
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	963	371	509

**FFY 2020 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	1,826	12,546		18.22%	14.55%	Did not meet target	N/A
B	Grade 8	1,205	11,417		13.93%	10.55%	Did not meet target	N/A

<b>Group</b>	<b>Group Name</b>	<b>Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards</b>	<b>Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment</b>	<b>FFY 2019 Data</b>	<b>FFY 2020 Target</b>	<b>FFY 2020 Data</b>	<b>Status</b>	<b>Slippage</b>
<b>C</b>	Grade HS	1,884	8,761		20.55%	21.50%	Met target	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

<b>Group</b>	<b>Group Name</b>	<b>Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards</b>	<b>Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment</b>	<b>FFY 2019 Data</b>	<b>FFY 2020 Target</b>	<b>FFY 2020 Data</b>	<b>Status</b>	<b>Slippage</b>
<b>A</b>	Grade 4	2,386	12,535		26.30%	19.03%	Did not meet target	N/A
<b>B</b>	Grade 8	656	11,408		9.62%	5.75%	Did not meet target	N/A
<b>C</b>	Grade HS	635	8,905		8.66%	7.13%	Did not meet target	N/A



### **Regulatory Information**

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

### **Public Reporting Information**

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

Assessment participation numbers and rates and proficiency rates for all students with and without disabilities for statewide assessments required by ESEA by LEA and school are linked at the following webpage:

<https://www.in.gov/doi/files/2020-2021-Data.pdf>

Click on the link at the bottom of the page reading: Compliance/Results Indicator Data for All Corporations Compared to Targets SY 2020-2021.

This document also includes information regarding each LEA's performance relative to target on all indicators of the SPP-APR.

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

Baselines have been set based on 2018 data as this represents the most current assessment data for inclusion with targets increasing at level determined to be reasonable given the academic impact resulting from the pandemic.

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

None

### **3B - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

### **3B - Required Actions**

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3C - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2018	43.05%
Reading	B	Grade 8	2018	47.31%
Reading	C	Grade HS	2018	77.85%
Math	A	Grade 4	2018	47.30%
Math	B	Grade 8	2018	40.33%
Math	C	Grade HS	2018	54.09%

#### Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	44.05%	45.05%	46.05%	47.05%	48.05%	49.05%
Reading	B >=	Grade 8	48.31%	49.31%	50.31%	51.31%	52.31%	53.31%
Reading	C >=	Grade HS	78.85%	79.85%	80.85%	81.85%	82.85%	83.85%
Math	A >=	Grade 4	48.30%	49.30%	50.30%	51.30%	52.30%	53.30%
Math	B >=	Grade 8	41.33%	42.33%	43.33%	44.33%	45.33%	46.33%
Math	C >=	Grade HS	55.09%	56.09%	57.09%	58.09%	59.09%	60.09%

**Targets: Description of Stakeholder Input**

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 3, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include: Ensure that all accommodations are available on statewide assessments for students with disabilities.

Ensure dissemination of assessment scores are shared with both special and general educators.

Provide additional training for school staff on assessment best-practices and accessibility for low-incidence populations.

Disaggregate results of assessment data by special education eligibility categories.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	622	951	928
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	255	387	465

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	623	948	921
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	277	394	327

**FFY 2020 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	255	622		44.05%	41.00%	Did not meet target	N/A
B	Grade 8	387	951		48.31%	40.69%	Did not meet target	N/A

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C	Grade HS	465	928		78.85%	50.11%	Did not meet target	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	277	623		48.30%	44.46%	Did not meet target	N/A
B	Grade 8	394	948		41.33%	41.56%	Met target	N/A
C	Grade HS	327	921		55.09%	35.50%	Did not meet target	N/A

**Regulatory Information**

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

**Public Reporting Information**

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

Assessment participation numbers and rates and proficiency rates for all students with and without disabilities for statewide assessments required by ESEA by LEA and school are linked at the following webpage:

<https://www.in.gov/doi/files/2020-2021-Data.pdf>

Click on the the link at the bottom of the page reading: Compliance/Results Indicator Data for All Corporations Compared to Targets SY 2020-2021.

This document also includes information regarding each LEA's performance relative to target on all indicators of the SPP-APR.

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

Baselines have been set based on 2018 data as this represents the most current assessment data for inclusion with targets increasing at level determined to be reasonable given the academic impact resulting from the pandemic.

IDOE has become aware of an error in the reading and math assessment participation data for students participating in the alternate assessment. The issue is related to the Indiana assessment plan which includes students in the 10th grade participating in alternate assessment while students in the 11th grade participate in the general assessment. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment for high school is reported as 6, and the number of children is being corrected to reflect 5284 in reading and 5266 in math. Children with IEPs in alternate assessment against alternate standards scored at or above proficient is reported as 3 in reading and 2 in math, with the number of children being corrected to reflect 2427 in reading and 2326 in math. This represents FFY 2020 data as 45.93% in reading and 44.17% in math.

**3C - Prior FFY Required Actions**

None

**3C - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**3C - Required Actions**

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2020-2021 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2020-2021 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

#### Instructions

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

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

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2020-2021 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2020-2021 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

### 3D - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2018	27.67
Reading	B	Grade 8	2018	36.52
Reading	C	Grade HS	2018	42.25
Math	A	Grade 4	2018	28.04
Math	B	Grade 8	2018	28.50
Math	C	Grade HS	2018	26.98

#### Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	27.17	26.67	26.17	25.67	25.17	24.67
Reading	B <=	Grade 8	36.02	35.52	35.02	34.52	34.02	33.52
Reading	C <=	Grade HS	41.75	41.25	40.75	40.25	39.75	39.25
Math	A <=	Grade 4	27.54	27.04	26.54	26.04	25.54	25.04
Math	B <=	Grade 8	28.00	27.50	27.00	26.50	26.00	25.50
Math	C <=	Grade HS	26.48	25.98	25.48	24.98	24.48	23.98

#### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state

technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 3, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include:

Ensure that all accommodations are available on statewide assessments for students with disabilities.

Ensure dissemination of assessment scores are shared with both special and general educators.

Provide additional training for school staff on assessment best-practices and accessibility for low-incidence populations.

Disaggregate results of assessment data by special education eligibility categories.

### FFY 2020 Data Disaggregation from EDFacts

**Data Source:**

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	72,855	76,836	69,988
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	12,546	11,417	8,761
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	26,547	31,793	42,218
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,369	817	3,050
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,453	741	231
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	373	464	1,653

**Data Source:**

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	72,870	76,858	70,448
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	12,535	11,408	8,905
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	28,714	19,897	23,933
d. All students in regular assessment with accommodations scored at or above proficient against grade level	2,320	626	1,260
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,423	285	126
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	963	371	509

**FFY 2020 SPP/APR Data: Reading Assessment**

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	14.55%	38.32%		27.17	23.76	Met target	N/A
B	Grade 8	10.55%	42.44%		36.02	31.89	Met target	N/A
C	Grade HS	21.50%	64.68%		41.75	43.18	Did not meet target	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	19.03%	42.59%		27.54	23.55	Met target	N/A
B	Grade 8	5.75%	26.70%		28.00	20.95	Met target	N/A
C	Grade HS	7.13%	35.76%		26.48	28.63	Did not meet target	N/A

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

The baseline for each indicator is set to match outcomes from FFY2018. The current measurement table for this new indicator has been applied to existing data held by IDOE and submitted to USED at that time via EDFACTS. It was determined not to use FFY2020 as academic impacts from COVID-19 factors have influenced the gap. With input from stakeholders, it was determined that a 0.5 improvement would be reasonable per year. This improvement is a reduction in the gap between all students and students with disabilities in regard to proficiency performance.

**3D - Prior FFY Required Actions**

None

**3D - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**3D - Required Actions**



## Indicator 4A: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 SPP/APR introduction).

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

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 4A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2019	1.75%

FFY	2015	2016	2017	2018	2019
Target <=	1.20%	0.43%	0.33%	0.23%	0.00%
Data	0.53%	0.00%	NVR	7.14%	1.75%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target <=	1.70%	1.65%	1.60%	1.55%	1.50%	1.45%

**Targets: Description of Stakeholder Input**

IDOE’s Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana’s parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 4, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include: Increase proactive trainings for special education and general education teachers in behavior interventions, social emotional learning, and implicit bias. Increase support for LEAs out of compliance for more than one year.

Provide more information on proactive tools and tracking systems.  
Investigate more about suspensions and expulsions in preschool.

**FFY 2020 SPP/APR Data**

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

YES

**If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.**

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Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
4	18	1.75%	1.70%	22.22%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

Reasons for slippage indicated in the data include changes to the SEA data collection protocols and disaggregation. Along with the struggles of maintaining accurate and reliable data sources during COVID, the IDOE has taken into account the comments and required actions of OSEP in prior year’s SPP/APR determinations and began to investigate its data protocols and make adjustments as needed. The slippage documented this year is indicative of those changes towards an accurate and reliable data protocol.

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

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

**State’s definition of “significant discrepancy” and methodology**

IDOE defines Indicator 4A “significant discrepancy of students with disabilities in the rates of suspensions and expulsions greater than 10 days” as a comparison of the risk index of all races/ethnicities of students with disabilities in the LEA to the risk index of all races/ethnicities of students with disabilities combined in the state. The risk ratio must be greater than 2.0 for each of three consecutive years of data. IDOE has a required minimum of 15 students of all races or ethnicities with a disability suspended or expelled for more than 10 days for both the target and comparison group.

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

Baseline is being set based on 2019 data as this represents a realistic and reasonable target based on current data trends. As the goal is to decrease this rate, targets decline by .5% annually.

**Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 data)**

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

For each LEA that the State identifies as having a significant discrepancy in the rate of suspensions or expulsions of greater than 10 days in a school year for children with IEPs, Indiana completed the following process:

LEAs were notified that the LEA had significant discrepancy in discipline (over the Indiana defined risk ratio threshold of 2.0 for each of three years) and the annual data analysis reflected possible noncompliance for this indicator.

A review team of technical assistance providers, subcontractors, and DOE specialists is developed and trained for inter-rater reliability.

The team reviews each LEA required to participate in a policy and procedure review; this includes reviewing the following information:

Requiring that the case conference committee (CCC) consider positive behavioral interventions and supports to address any of the student’s behaviors that impede the student’s learning or the learning of others

Requiring teachers of record to ensure that a student’s IEP, including any behavioral intervention plan (BIP), is being implemented as written

Explaining that the school will count a short-term removal from the student’s placement for any part of the student’s day as a day of suspension when

the removal is not pursuant to the student's IEP  
 Requiring compliance with I.C. 20-33-8-7 when a student is removed from the student's placement for any part of the day when the removal is not pursuant to the student's IEP  
 Describing who is responsible for determining if a change of placement has occurred when a student has been removed/suspended for more than 10 cumulative days in a school year  
 Describing the factors to be taken into account when making that decision  
 Describing when the CCC must meet to determine if the student's misconduct is a manifestation of the student's disability  
 Describing what the CCC must consider in determining if the misconduct is a manifestation of the student's disability  
 Describing when a functional behavioral assessment (FBA) is required to be conducted  
 Describing what information is to be included in a FBA and how it is to be conducted  
 Requiring that a FBA be conducted prior to developing a BIP  
 Describing what must be included in a BIP

Each LEA was required to participate in a practice- based file review (practices) (minimum of 5 files). A review team (as described above) reviews the following Topics/areas:

Parent notification of change of placement  
 Appropriate services provided during the removal  
 CCC meeting held within 10 instructional days of the decision to change the student's placement  
 CCC reviewed relevant information in the student's file, including the student's IEP, any teacher observations, and information provided by the parent to determine if the conduct in question was 1) caused by, or had a direct and substantial relationship, to the student's disability; or 2) the direct result of the school's failure to implement the student's IEP  
 School took steps to remedy the deficiencies  
 New or existing FBA and BIP reviewed  
 Student placement discussion  
 Student received appropriate services during removal  
 Review of documentation concerning removal to an Interim Alternative Educational Setting (IAES) if a student: 1) carries a weapon to school or possesses a weapon, 2) knowingly possesses or uses illegal drugs or sells or solicits the sale of a controlled substance, or 3) inflicts serious bodily injury upon another person; while at school, on school premises, or at a school function  
 CCC determines the IAES and appropriate services needed to enable the student to 1) continue to participate in the GE curriculum, although in another setting; 2) progress toward meeting IEP goals; 3) receive, as appropriate, a FBA and behavioral intervention services and modifications designed to address the behavior violation so that it does not recur

Upon completion of reviews, the review team leader provides IDOE specialists all documentation for completed reviews and if policies, procedures and/or practices (including the use of positive behavioral interventions and supports and procedural safeguards) were determined to be inappropriate, IDOE issues a finding of noncompliance.

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

**If YES, select one of the following:**

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.**

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).

In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and conduct a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included were the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). The IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The above LEA identified as not having been verified as corrected will continue to be provided technical assistance support from IDOE specialist and its affiliates. This technical assistance may include on-site visits (when possible), development of an action plan, monthly progress monitoring meetings, additional file reviews, and any other additional prescriptive support deemed necessary and appropriate to aid in correction. The IDOE-OSE will consistently assess the progress of the LEA and increase or decrease intensity of support based on the LEA's progress.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

<b>Year Findings of Noncompliance Were Identified</b>	<b>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR</b>	<b>Findings of Noncompliance Verified as Corrected</b>	<b>Findings Not Yet Verified as Corrected</b>
FFY 2018	1	0	1
FFY 2013	1	1	0

**FFY 2018**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

LEAs identified as not having corrected issues of noncompliance were reviewed in the same manner as years prior and identified as being either continuing (2 years of noncompliance) or longstanding (3 years or more). This change of status was noted in the LEAs Results driven accountability determination and resulted in increased support and oversight by way of TA providers and OSE specialists.

**FFY 2013**

**Findings of Noncompliance Verified as Corrected**

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

As of January 2021, the LEA has been released from Special Conditions due to their overall increased compliance including findings of noncompliance for FFY 2013 and verification that the LEA is correctly implementing the regulatory requirements. This has been verified by way of monthly meetings, review of policies and procedures, and consistent review of data submitted to the state as part of technical assistance and through the state data collection system resulting in the district no longer being identified as noncompliant.

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

As of January 2021, the LEA has been released from Special Conditions due to their overall increased compliance including findings of noncompliance for FFY 2013 and verification that the LEA corrected and each individual issue of non-compliance. This has been verified by way of monthly meetings, review of policies and procedures, and consistent review of data submitted to the state as part of technical assistance and through the state data collection and analysis demonstrating that each individual case of noncompliance was corrected.

**4A - Prior FFY Required Actions**

The State must report, in the FFY 2020 SPP/APR, on the correction of noncompliance that the State identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

The State reported that noncompliance identified in FFY 2018 and FFY 2013 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was not corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2020 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2018 and FFY 2013: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

**Response to actions required in FFY 2019 SPP/APR**

FFY 2019- The LEA was provided the support and guidance from a TA provider which outlined activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance, Throughout the year, the TA provider completed data requests from the LEA which provided insight on individual corrections and ensured global compliance. Failure to exhibit global compliance resulted in the change in status for the LEA (e.g. continuing or longstanding).

FFY 2018 and 2013- this LEA was under Special Conditions and as a result was required to comply with all activities with IDOE and TA providers as outlined. Further verification of correction consisted of monthly meetings with the LEA and the prior serving Assistant Director of Special Education to confirm correction of individual cases, continued successful implementation of policies and procedures related to discipline, ensure systemization of data collection procedures for the purposes of monitoring, and review district level data. Due to the intense nature of noncompliance findings, the LEA was subject to monthly review of files in identified areas of noncompliance, this included those previously identified as well as any file selected for the purpose of ensuring systemic change to prevent future issues of noncompliance. Each file was reviewed by a DOE specialist or an TA provider and the LEA was given feedback for continuous improvement.

**4A - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**4A - Required Actions**

The State must report, in the FFY 2021 SPP/APR, on the correction of noncompliance that the State identified in FFY 2020 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that

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

The State reported that noncompliance identified in FFY 2019 and FFY 2018 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was not corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2021 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2019 and FFY 2018: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

## Indicator 4B: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 SPP/APR introduction).

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

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

## 4B - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

### Historical Data

Baseline Year	Baseline Data
2016	0.00%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.53%	0.00%	NVR	NVR	0.00%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

**FFY 2020 SPP/APR Data**

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

YES

**If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.**

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Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
4	2	6	0.00%	0%	33.33%	Did not meet target	Slippage

**Provide reasons for slippage, if not applicable**

Reasons for slippage indicated in the data include changes to the SEA data collection protocols and disaggregation. Along with the struggles of maintaining accurate and reliable data sources during COVID, the IDOE has taken into account the comments and required actions of OSEP in prior year's SPP/APR determinations and began to investigate its data protocols and make adjustments as needed. The slippage documented this year is indicative of those changes towards an accurate and reliable data protocol.

**Were all races and ethnicities included in the review?**

YES

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

IDOE's definition identifies significant discrepancy of racial and ethnic groups (American Indian or Alaska Native, Asian, Native Hawaiian or other Pacific Islander, Hispanic/Latino, Black or African American, White, and Multiracial) as the risk index for a given racial/ethnic group in the LEA compared with the risk index for all students with disabilities in the state. The rate ratio must be greater than 2.0 for each of three consecutive years. IDOE has a required minimum of 15 students with a disability in a racial/ethnic group suspended or expelled for more than 10 days for the target group and has a required minimum of 15 students of all races or ethnicities with a disability suspended or expelled for more than 10 days for the comparison group.

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

**Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 data)**

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

For each LEA that the State identifies as having a significant discrepancy in the rate of suspensions or expulsions of greater than 10 days in a school year for children with IEPs, Indiana completed the following process:

LEAs were notified that the LEA had significant discrepancy in discipline (over the Indiana defined risk ratio threshold of 2.0 for each of three years) and the annual data analysis reflected possible noncompliance for this indicator.

A review team of technical assistance providers, subcontractors, and DOE specialists is developed and trained for inter-rater reliability.

The team reviews each LEA required to participate in a policy and procedure review; this includes reviewing the following

information:

Requiring that the case conference committee (CCC) consider positive behavioral interventions and supports to address any of the student's behaviors that impede the student's learning or the learning of others

Requiring teachers of record to ensure that a student's IEP, including any behavioral intervention plan (BIP), is being implemented as written

Explaining that the school will count a short-term removal from the student's placement for any part of the student's day as a day of suspension when the removal is not pursuant to the student's IEP

Requiring compliance with I.C. 20-33-8-7 when a student is removed from the student's placement for any part of the day when the removal is not pursuant to the student's IEP

Describing who is responsible for determining if a change of placement has occurred when a student has been removed/suspended for more than 10 cumulative days in a school year

Describing the factors to be taken into account when making that decision

Describing when the CCC must meet to determine if the student's misconduct is a manifestation of the student's disability

Describing what the CCC must consider in determining if the misconduct is a manifestation of the student's disability

Describing when a functional behavioral assessment (FBA) is required to be conducted

Describing what information is to be included in a FBA and how it is to be conducted

Requiring that a FBA be conducted prior to developing a BIP

Describing what must be included in a BIP

Each LEA was required to participate in a practice-based file review (practices) (minimum of 5 files). A review team (as described above) reviews the following Topics/areas:

Parent notification of change of placement

Appropriate services provided during the removal

CCC meeting held within 10 instructional days of the decision to change the student's placement

CCC reviewed relevant information in the student's file, including the student's IEP, any teacher observations, and information provided by the parent to determine if the conduct in question was 1) caused by, or had a direct and substantial relationship, to the student's disability; or 2) the direct result of the school's failure to implement the student's IEP

School took steps to remedy the deficiencies

New or existing FBA and BIP reviewed

Student placement discussion

Student received appropriate services during removal

Review of documentation concerning removal to an Interim Alternative Educational Setting (IAES) if a student: 1) carries a weapon to school or possesses a weapon, 2) knowingly possesses or uses illegal drugs or sells or solicits the sale of a controlled substance, or 3) inflicts serious bodily injury upon another person; while at school, on school premises, or at a school function

CCC determines the IAES and appropriate services needed to enable the student to 1) continue to participate in the GE curriculum, although in another setting; 2) progress toward meeting IEP goals; 3) receive, as appropriate, a FBA and behavioral intervention services and modifications designed to address the behavior violation so that it does not recur

Upon completion of reviews, the review team leader provides IDOE specialists all documentation for completed reviews and if policies, procedures and/or practices (including the use of positive behavioral interventions and supports and procedural safeguards) were determined to be inappropriate, IDOE issues a finding of noncompliance.

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

**If YES, select one of the following:**

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.**

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).

In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and conduct a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included were the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**Correction of Findings of Noncompliance Identified in FFY 2019**



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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	1	1	0
FFY 2017	2	2	0
FFY 2014	1	1	0

**FFY 2018**

**Findings of Noncompliance Verified as Corrected**

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

The LEA identified as noncompliant FFY 2018 was subject to increased oversight and monitoring and provided support and guidance from a Technical Assistance provider and Office of Special Education specialist. In a collaborative effort, these parties outlined activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance. As a result of these activities, the state was able to verify that the LEA is correctly implementing the specific regulatory requirements through the state data collection system resulting in the district no longer being identified as noncompliant.

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

As a result of the activities described above (activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance), the state was able to verify correction of each individual case of noncompliance through the LEA data submissions as part of technical assistance and through the state data collection system demonstrating the each individual case of noncompliance was corrected.

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

The LEAs identified as noncompliant FFY 2017 were subject to increased oversight and monitoring and provided support and guidance from a Technical Assistance provider and Office of Special Education specialist. In a collaborative effort, these parties outlined activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance. As a result of these activities, the state was able to verify that the LEA is correctly implementing the specific regulatory requirements through the state data collection system resulting in the district no longer being identified as noncompliant.

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

As a result of the activities described above (activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance), the state was able to verify correction of each individual case of noncompliance through the LEA data submissions as part of technical assistance and through the state data collection and analysis demonstrating the each individual case of noncompliance was corrected.

**FFY 2014**

**Findings of Noncompliance Verified as Corrected**

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

The LEA identified as noncompliant FFY 2014 was subject to increased oversight and monitoring and provided support and guidance from a Technical Assistance provider and Office of Special Education specialist. In a collaborative effort, these parties outlined activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance. As a result of these activities, the state was able to verify that the LEA is correctly implementing the specific regulatory requirements through the state data collection system resulting in the district no longer being identified as noncompliant.

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

As a result of the activities described above (activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance), the state was able to verify correction of each individual case of noncompliance through the LEA data submissions as part of technical assistance and through the state data collection system demonstrating the each individual case of noncompliance was corrected.

**4B - Prior FFY Required Actions**

The State reported that noncompliance identified in FFY 2017 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was partially corrected. When reporting on the correction of noncompliance, the State must demonstrate, in the FFY 2020 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2018, FFY 2017, and FFY 2014: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

**Response to actions required in FFY 2019 SPP/APR**

Noncompliance identified in 2018, 2017, and 2014 were subject to increased oversight and monitoring and were provided the support and guidance from a TA provider and OSE specialist. In a collaborative effort, these parties outlined activities specifically designed to identify the systemic problem, rectify it, properly train all staff, and monitor newly developed systems to regulate compliance. These activities included but were not limited to prescriptive technical assistance conferences, monthly meetings, monthly data updates and submissions, file reviews and feedback, and action plan monitoring. Throughout the year, the TA provider provided insight on individual corrections and ensured global compliance. Failure to exhibit global compliance resulted in the change in status for the LEA (e.g. continuing or longstanding).

#### **4B - OSEP Response**

The State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2018, FFY 2017, and FFY 2014 because it did not report that it verified correction of those findings, consistent with OSEP Memo 09-02. Specifically, the State did not report that it verified that each LEA with noncompliance identified in FFY 2018, FFY 2017, and FFY 2014 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

#### **4B- Required Actions**

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2018, two uncorrected findings of noncompliance identified in FFY 2017, and one uncorrected finding of noncompliance identified in FFY 2014 were corrected. The State must demonstrate, in the FFY 2021 SPP/APR, that the districts identified with noncompliance in FFY 2020 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6. Describe the results of the calculations and compare the results to the target.

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

## 5 - Indicator Data

### Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A	2020	Target >=	69.00%	70.00%	71.00%	72.00%	73.00%
A	77.45%	Data	71.40%	72.62%	73.98%	75.33%	76.21%
B	2020	Target <=	11.00%	10.50%	10.00%	9.50%	9.00%
B	7.97%	Data	10.42%	9.84%	9.34%	8.68%	8.28%
C	2020	Target <=	2.14%	2.13%	2.12%	2.11%	2.10%
C	1.65%	Data	2.02%	1.86%	1.82%	1.87%	1.94%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	77.45%	77.70%	77.95%	78.20%	78.45%	78.70%
Target B <=	7.97%	7.87%	7.77%	7.67%	7.57%	7.47%
Target C <=	1.65%	1.55%	1.45%	1.34%	1.24%	1.14%

### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR.

These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 5, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include: Connect with IN\*SOURCE to identify parent concerns regarding inclusion/Least Restrictive Environment (LRE) to inform technical assistance.

Partner with other IDOE offices to strengthen Multi-Tiered System of Supports (MTSS) professional development and/or technical assistance.

Consider collecting longitudinal data on student's LRE as they progress through school.

Develop materials to foster discussion around LRE as a continuum of placement options.

**Prepopulated Data**

Source	Date	Description	Data
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	Total number of children with IEPs aged 5 (kindergarten) through 21	168,399
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	130,430
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	13,415
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,381
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	465
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	926

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

NO

**FFY 2020 SPP/APR Data**

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	130,430	168,399	76.21%	77.45%	77.45%	N/A	N/A
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	13,415	168,399	8.28%	7.97%	7.97%	N/A	N/A
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	2,772	168,399	1.94%	1.65%	1.65%	N/A	N/A

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

During the stakeholder meeting for Indicator 5, stakeholders were asked whether baseline year and data should be updated to reflect the most recent data. Consensus from stakeholders was to update the baseline year and data to the information submitted for FFY 2019 as this reflected the increase in percentage of children inside the regular class 80% of the day and the decrease in percentage for both the number of children inside the regular class less than 40% of the day and inside separate schools, residential facilities, or homebound/hospital placements.

Data reviewed as part of the stakeholder session indicates that Indiana exceeds the national percentage for students participating in general education 80% or more of the day for eleven of the thirteen disability categories. The two categories not exceeding the national percentage are Deaf-Blind and Multiple Disabilities. Indiana is currently piloting a program with the TIES Center to improve inclusion of students with significant disabilities hoping to impact these areas. (Source: FFY 2017 (US Dept. of Education - 41st Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act)

## **5 - Prior FFY Required Actions**

None

## **5 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## **5 - Required Actions**

## Indicator 6: Preschool Environments

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

For Indicator 6C: States may express their targets in a range (e.g., 75-85%). Describe the results of the calculations and compare the results to the target.

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

## 6 - Indicator Data

**Not Applicable**

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

NO

### Historical Data – 6A, 6B

Part	FFY	2015	2016	2017	2018	2019
A	Target >=	40.50%	41.00%	41.50%	42.00%	42.00%
A	Data	39.08%	38.12%	39.98%	39.38%	38.50%
B	Target <=	32.90%	32.80%	32.70%	32.60%	32.60%
B	Data	34.09%	33.71%	32.56%	32.35%	31.54%

#### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Stakeholder concerns and suggestions related to Indicator 6 address the development and implementation of activities to improve outcomes including the following:

Provide information and training for LEAs to remedy the lack of access to general education placements within a district through creative solutions and collaboration with other schools and community settings.

Educate and coach classroom teachers, special educators, and administrators about the legal requirements of LRE, the importance of effective inclusion

and UDL practices and how to implement them effectively, and the science behind brain development and the importance of early intervention.

Educate and collaborate with parents, emphasizing the importance of inclusion and early intervention, their rights as the parents of a child with a disability, and how to advocate for their child.

Remember that all students are general education students first when discussing placement options.

Provide clearly defined accountability from the SEA through Results Driven Accountability (RDA) for districts to examine their data, find solutions, and create buy-in from building and district level administrators.

### Targets

**Please select if the State wants to set baseline and targets based on individual age ranges (i.e. separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.**

Inclusive Targets

**Please select if the State wants to use target ranges for 6C.**

Target Range not used

### Baselines for Inclusive Targets option (A, B, C)

Part	Baseline Year	Baseline Data
A	2020	27.22%
B	2020	39.15%
C	2020	0.61%

### Inclusive Targets – 6A, 6B

FFY	2020	2021	2022	2023	2024	2025
Target A >=	27.22%	27.72%	28.22%	28.72%	29.22%	29.72%
Target B <=	39.15%	38.90%	38.65%	38.40%	38.15%	37.90%

### Inclusive Targets – 6C

FFY	2020	2021	2022	2023	2024	2025
Target C <=	0.61%	0.60%	0.59%	0.58%	0.57%	0.56%

### Prepopulated Data

#### Data Source:

SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

#### Date:

07/07/2021

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	3,989	5,919	2,482	12,390
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	812	1,739	822	3,373
b1. Number of children attending separate special education class	1,799	2,128	733	4,660
b2. Number of children attending separate school	51	94	42	187
b3. Number of children attending residential facility	2	2	0	4
c1. Number of children receiving special education and related services in the home	25	36	14	75

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

NO

**FFY 2020 SPP/APR Data - Aged 3 through 5**

<b>Preschool Environments</b>	<b>Number of children with IEPs aged 3 through 5 served</b>	<b>Total number of children with IEPs aged 3 through 5</b>	<b>FFY 2019 Data</b>	<b>FFY 2020 Target</b>	<b>FFY 2020 Data</b>	<b>Status</b>	<b>Slippage</b>
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	3,373	12,390	38.50%	27.22%	27.22%	N/A	N/A
B. Separate special education class, separate school or residential facility	4,851	12,390	31.54%	39.15%	39.15%	N/A	N/A
C. Home	75	12,390		0.61%	0.61%	N/A	N/A

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

For Indicator 6, the baseline and targets proposed in the stakeholder report were updated based on feedback received following the initial development indicating that the baseline must be based on data that has been submitted and approved by OSEP. This led to the baseline data year moving to 2020 data as 5 year old kindergarten students had not been included. The baseline using 2020 data is comparable to the previously proposed data. The annual changes in target are based on the goal of increasing the number of students in regular early childhood programs and decreasing more restrictive settings. While this is a goal, given the barriers that districts are facing related to decreases in the availability of regular early childhood programs, the amount of change in the yearly targets related to 6B and 6C was conservative to ensure that the targets were realistic.

**6 - Prior FFY Required Actions**

None

**6 - OSEP Response**

The State has revised the baseline for 6A and 6B and established the baseline for 6C for this indicator, using data from FFY 2020, and OSEP accepts those baselines.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**6 - Required Actions**



## Indicator 7: Preschool Outcomes

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

#### Summary Statements for Each of the Three Outcomes:

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

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

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

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

#### Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 2 for additional instructions on sampling.)

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

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

NO

#### Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A1	2018	Target >=	74.00%	75.00%	76.00%	77.00%	77.00%
A1	75.41%	Data	73.00%	72.00%	74.14%	75.41%	
A2	2018	Target >=	24.00%	25.00%	26.00%	27.00%	27.00%

A2	19.36%	Data	20.09%	17.29%	18.98%	19.36%	
B1	2018	Target >=	81.50%	82.00%	82.50%	83.00%	83.00%
B1	81.82%	Data	79.77%	80.09%	82.05%	81.82%	
B2	2018	Target >=	16.00%	16.50%	17.00%	17.50%	17.50%
B2	10.15%	Data	10.69%	8.29%	10.17%	10.15%	
C1	2018	Target >=	84.00%	84.50%	85.00%	85.50%	85.50%
C1	84.27%	Data	82.59%	82.66%	84.31%	84.27%	
C2	2018	Target >=	17.50%	18.00%	18.50%	19.00%	19.00%
C2	11.80%	Data	12.18%	9.85%	11.38%	11.80%	

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target A1 >=	75.25%	75.50%	75.75%	76.00%	76.25%	76.50%
Target A2 >=	21.00%	22.00%	23.00%	24.00%	25.00%	26.00%
Target B1 >=	82.25%	82.50%	82.75%	83.00%	83.25%	83.50%
Target B2 >=	11.75%	12.50%	13.25%	14.00%	14.75%	15.50%
Target C1 >=	84.25%	84.50%	84.75%	85.00%	85.25%	85.50%
Target C2 >=	13.00%	14.00%	15.00%	16.00%	17.00%	18.00%

**Targets: Description of Stakeholder Input**

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Stakeholder concerns and suggestions related to Indicator 7 address the development and implementation of activities to improve outcomes including the following:

Provide ongoing professional development and coaching for practitioners on: evidence-based social emotional learning practices, the inclusion of students with disabilities in general education settings, evidence-based instructional practices and curricula, the creation and implementation of behavioral systems for all children, and writing and implementing FBAs and BIPs for students with high levels of behavioral need.

Examine student IEP goals, how goals are being addressed, curricula being used to teach, and current progress monitoring practices.

Provide examples of model districts and classrooms in which these practices are being implemented effectively.

Collaborate with parents and provide professional development that supports parent involvement in their child's education.

**FFY 2020 SPP/APR Data**

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

3,400

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

Outcome A Progress Category	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	705	20.74%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	603	17.74%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,207	35.50%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	670	19.71%

Outcome A Progress Category	Number of children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	215	6.32%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,877	3,185		75.25%	58.93%	Did not meet target	N/A
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	885	3,400		21.00%	26.03%	Met target	N/A

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	822	24.18%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	485	14.26%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,486	43.71%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	494	14.53%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	113	3.32%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,980	3,287		82.25%	60.24%	Did not meet target	N/A
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	607	3,400		11.75%	17.85%	Met target	N/A

**Outcome C: Use of appropriate behaviors to meet their needs**

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	967	28.44%

Outcome C Progress Category	Number of Children	Percentage of Children
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	448	13.18%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,395	41.03%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	504	14.82%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	86	2.53%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,899	3,314		84.25%	57.30%	Did not meet target	N/A
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	590	3,400		13.00%	17.35%	Met target	N/A

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

NO

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

IDOE utilized the Indiana Student Performance Readiness and Observation of Understanding Tool (ISPROUT) assessment tool in SY 2020-21, and the ISTAR-KR assessment tool in prior years. Both of these tools are derivative of the Foundations to the Indiana Academic Standards and are aligned to the Indiana Standards for Kindergarten in the areas of mathematics, English/language arts and three functional areas, including physical skills, personal care skills and social-emotional skills. Teachers or speech language pathologists (SLPs) complete the online questionnaire annually at the entrance and exit of the program. The initial entrance and final exit scores are used to assess growth. Correlation of ISTAR-KR and ISPROUT has been completed to allow for calculation of growth if the entrance and exit assessments were completed with different tools. Based on the student data, a score that is equal to or above the expected score would be considered evidence of achievement at a level that is "comparable to same-age peers."

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

ISPROUT is a tool used by educators to: a) identify student skills, knowledge, and behaviors; and b) monitor growth through daily observations. ISPROUT is required for all preschool-aged students with an IEP. Students are required to be observed by ISPROUT-certified special education teachers or SLPs. The students are rated during their first six weeks of receiving services and within the final six weeks prior to being released from their IEP or exiting to kindergarten.

Provide additional information about this indicator (optional)

Upon review of the last 4 years of available data for indicator 7 (FFY 2015-2018), it is noted that the data for 2018, in addition to being the most recent assessment data, is also above or within 1% of the highest percentage achieved over that timeframe. With stakeholder input, it was determined that the baseline would be changed to reflect 2018 data as it is representative of the state's performance. The FFY 2025 target for each outcome does reflect improvement over the State's corresponding proposed baseline data revision to FFY 2018 data (A1 Baseline 75.41%/FFY 2025 Target 76.5%; A2 Baseline 19.36%/FFY 2025 Target 26%; B1 Baseline 81.82%/FFY 2025 Target 83.5%; B2 Baseline 10.15%/FFY 2025 Target 15.5%; C1 Baseline 84.27%/FFY 2025 Target 85.5%; C2 Baseline 11.80%/FFY 2025 Target 18%).

## 7 - Prior FFY Required Actions

None

## **7 - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## **7 - Required Actions**

## Indicator 8: Parent involvement

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

#### Data Source

State selected data source.

#### Measurement

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

#### Instructions

*Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 2 for additional instructions on sampling.)*

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

Provide the actual numbers used in the calculation.

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

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

Include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.

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

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

**Beginning with the FFY 2021 SPP/APR, due February 1, 2023**, when reporting the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services, States must include race/ethnicity in their analysis. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

## 8 - Indicator Data

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

### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Stakeholder response to Indicator 8 was robust and the SEA held a follow up meeting with Stakeholders to allow for detailed input. Stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes included:

Revise and update the survey to make the language more parent friendly.

Consider having parent groups distribute the survey to encourage parents to respond.

Educate Special Education directors and Teachers of Record on the importance of collecting the survey data.

### Historical Data

Baseline Year	Baseline Data
2019	93.67%

FFY	2015	2016	2017	2018	2019
Target >=	71.00%	72.00%	73.00%	74.00%	75.00%
Data	96.05%	97.11%	79.92%	94.44%	93.67%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target >=	94.67%	95.67%	96.67%	97.67%	98.67%	99.67%

**FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1,925	2,070	93.67%	94.67%	93.00%	Did not meet target	No Slippage

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

The questions designed on the Indiana Parent Survey are intended to be answerable across the range of school-aged and preschool-aged students. Parents are given the option to answer "not applicable" on questions that may not address particular areas of their child's program. Additionally, the findings of facilitation are generated by a multivariate measure that incorporates multiple aspects of the child's educational program, regardless of setting. Please note that respondents were representative of the overall population according to the grade of the child, as discussed in the next section of this report.

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

180,911

**Percentage of respondent parents**

1.14%

**Response Rate**

FFY	2019	2020
Response Rate	3.72%	1.14%

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

Indiana is employing additional reminders to ask teachers of record to encourage parents to complete the survey as a follow-up to an annual case review. Indiana is providing real time updates to local special education administrators as to the response rates of parents in their school system. Indiana is partnering with parents centers to increase awareness of the survey and to encourage parents to participate. The survey is being translated into additional languages. Indiana is redesigning its survey utilizing stakeholder feedback, with the goal of streamlining the survey and improving language to increase participation and usefulness to local education agencies and other stakeholders. The updated survey will deploy in July 2022.

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

Indiana's analysis by demographics shows there is a reduced response bias for Black/African American and Hispanic/Latino as well the disability categories of Specific Learning Disabilities and Other Health Impairment. Indiana is taking the following steps to reduce identified bias and promote response from a broad cross section of parents of children with disabilities: 1) Track what geographic parts of the state are responding to the survey throughout the school year in order to reach out to LEAs where their geographic region is not being represented. 2) Provide the survey in a variety of mediums in order to encourage participation through online or paper surveys.

**Include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.**

Indiana identified underrepresentation in the following areas of Black/African American (5%) and Hispanic/Latino (4%) as well as in the disability categories of Specific Learning Disabilities (6%) and Other Health Impairment (5%). In regards to the category of grade level, the data is representative of the state population.

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

NO

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

Indiana is employing additional reminders to ask teachers of record to encourage parents to complete the survey as a follow-up to an annual case review. Indiana is providing real time updates to local special education administrators as to the response rates of parents in their school system. Indiana is partnering with parents centers to increase awareness of the survey and to encourage parents to participate. The survey is being translated into additional languages. Indiana is redesigning its survey utilizing stakeholder feedback, with the goal of streamlining the survey and improving language to increase participation and usefulness to local education agencies and other stakeholders. The updated survey will deploy in July 2022. IDOE will target extra participants for LEAs containing large proportions of the underrepresented groups.

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

The representativeness metric is +/- 3% discrepancy in proportion of responders.

Sampling Question	Yes / No
Was sampling used?	NO

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

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

The effects of the COVID-19 pandemic included a reduced response rate of parent surveys, likely because many case conference meetings were held remotely, and Indiana's previous procedure for encouraging survey responsiveness involved a letter given in hard copy to parents. Indiana is updating its procedures accordingly. When reviewing historical data and targets for Indicator 8, data has ranged from 79.92% to 97.11% from 2014 to 2019 while targets have been 70% to 74%. To align with data, the baseline year was updated to 2019 and the targets are being set to reflect the goal of 94.67% or greater.

**8 - Prior FFY Required Actions**

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

**Response to actions required in FFY 2019 SPP/APR**

As noted in previous responses, IDOE has determined that the response group is not representative of the demographics of children receiving special education service and has described the actions being take to address this issue. IDOE has also described the analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

**8 - OSEP Response**

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

**8 - Required Actions**

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.



## Indicator 9: Disproportionate Representation

### Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

#### Data Source

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

#### Measurement

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2020 reporting period (i.e., after June 30, 2021).

#### Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 9 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2020	0.79%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.29%	0.00%	0.28%	0.00%

#### Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

#### FFY 2020 SPP/APR Data

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

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

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Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3	3	378	0.00%	0%	0.79%	N/A	N/A

Were all races and ethnicities included in the review?

YES

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

IDOE defines disproportionate representation as the risk index of students identified with a disability in a particular racial/ethnic category within an LEA compared to the risk index of students with a disability of all other racial/ethnic categories identified within that LEA. The risk ratio must be greater than 2.0 for each of three consecutive years. IDOE has a required minimum of 15 students with a disability in a particular racial/ethnic category, as well as a minimum of 15 in all other racial/ethnic categories.

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.

LEAs were notified that the LEA had disproportionate representation in identification (over the Indiana defined risk ratio threshold of 2.0 for each of three years), and the annual data analysis reflected possible noncompliance for this indicator. A review team of technical assistance providers, subcontractors, and DOE specialists is developed and trained for inter-rater reliability.

This team reviews each LEA required to participate in a policy and procedure review; this includes reviewing the following information:

Detailing how LEA responds to requests for educational evaluations, including how a parent or agency may request the initial evaluation and the procedures for reevaluations

Describing how a multidisciplinary team will be assigned to conduct educational evaluations

Ensuring that assessments and evaluation materials are provided in the student's native language or other mode of communication

Ensuring that assessments and evaluation materials are provided in a form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally

Ensuring that assessments and evaluation materials are selected and administered so as not to be discriminatory on a racial or cultural basis  
Ensuring that assessments and evaluation materials are used for the purposes for which the assessments or measures are valid and reliable

Ensuring that assessments and evaluation materials are administered by trained personnel and in accordance with the evaluation/assessment protocol

Ensuring that assessments and evaluation materials include those tailored to assess specific areas of educational need and not merely those designed to provide a single general IQ

Ensuring that assessments and evaluation materials are selected and administered to ensure that the assessment accurately reflects the student's achievement rather than reflect the student's impaired sensory, manual, or speaking skills (unless the instrument is designed to assess those areas)

Ensuring that the student is assessed (or that information is collected) in all areas related to the suspected disability

Ensuring that assessment tools and strategies provide relevant information that directly assists the case conference committee (CCC) in determining the student's eligibility for special education

Requiring the multidisciplinary team to use a variety of assessment tools and strategies to gather required and relevant information about the student

Ensuring that the multidisciplinary team includes the requisite qualified professionals

Requiring the multidisciplinary team to review existing evaluation data on the student, obtain input from the student's parent, identify the suspected disability, and determine additional data needed to determine the student's eligibility for special education services

Ensuring that the evaluation report for a student with the suspected disability of Autism Spectrum Disorder includes assessment results and other information collected as aligned to the characteristics of Autism Spectrum Disorder

Ensuring the evaluation report for a student with the suspected disability of Specific Learning Disability includes the elements described in Indiana Administrative Code

Ensuring that the CCC does not determine that a student is eligible for special education if the determinant factor is the lack of instruction in reading or math or the student's limited English proficiency

Ensuring that the CCC does not determine that a student is eligible for special education if the student does not meet the eligibility criteria for the disability

Ensuring that the CCC does not determine the student eligible for special education when the student's only need is a related service

Ensuring that the CCC includes the requisite members

Ensuring that at least one of the qualified professionals from the multidisciplinary team attends the initial CCC meeting

Each LEA was required to participate in a file review (practices) (minimum of five files). Topics/areas reviewed:

1. General Initial Evaluation Requirements

1.1 Written notice of evaluation.

1.2 Signed parental consent for evaluation.

1.3 Written notice prior to the initial CCC containing:

(1) A description and overall findings of each:

(A) evaluation;

(B) procedure;

(C) assessment;

(D) record; or

(E) report;

that the school used as a basis for any proposed action.

(2) A description of action that the school may propose.

(3) An explanation of why the school may propose an action.

1.4 Educational evaluation conducted by a multidisciplinary team that includes, but is not limited to: (1) At least one teacher licensed in or other specialist with knowledge in, the area of suspected disability; (2) A school psychologist except for suspected disabilities of DD, LI, SI; (3) For suspected SLD, the student's general education teacher; (4) For BLV, DHH, MD, representatives of the state-operated schools.

1.5 Findings of the evaluation compiled into an educational evaluation report and provided to the parent prior to or at the CCC.

1.6 Educational evaluation report contains information collected or considered for all areas addressed during the evaluation.

1.7 Notice of CCC meeting.

1.8 Notice of ineligibility or proposed IEP.

2. Disability-Specific Evaluation Requirements

Evaluation included the necessary components given the suspected area(s) of disability. Consider the requirements for the relevant suspected disability(ies). (Information on specific eligibility requirements in rubric available upon request)

3. Eligibility Determination

3.1 Parent participation as a member of the CCC.

3.2 Required members of the CCC were present including at least one of the qualified professionals from the evaluation team.

3.3 The CCC considered all information contained in the educational evaluation report when determining eligibility.

3.4 The CCC did not rely on any single measure of assessment as the sole criterion for determining eligibility or services.

3.5 CCC must not determine that a student is eligible if the determinant factor is lack of appropriate instruction in reading or math.

3.6 CCC must not determine that a student is eligible if the determinant factor is limited English proficiency.

3.7 Evaluation results support the eligibility decision made by the CCC.

If policies, procedures and/or practices were determined to be inappropriate, findings of noncompliance were issued.

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

N/A

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	1	1	0

**FFY 2018**

**Findings of Noncompliance Verified as Corrected**

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

Verification that the source of noncompliance is correctly implementing regulatory requirements is completed through the annual determination process described above with the previous noncompliance being demonstrated as compliant.

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

Verification of each individual case of noncompliance is corrected through the following actions:

All IEPs found to have non compliance have been corrected and the correction verified by IDOE Special Education Specialist. (Prong 1)

The LEA has completed and submitted all necessary components of the RDA Planning Tool.

Technical assistance and/or professional development was given or conducted.

### **9 - Prior FFY Required Actions**

The State must demonstrate, in the FFY 2020 SPP/APR, that the one district identified in FFY 2018 with disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that the district with noncompliance identified in FFY 2018: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

### **Response to actions required in FFY 2019 SPP/APR**

The LEA identified in FFY 2018 has not yet been corrected. They are undergoing intensive technical assistance which includes expected participation in activities designed to identify root cause with an assigned TA provider, review of data monthly, development of district team, noting any changes to policies, procedures, and practices, and continued support to systematize any changes. With the ever changing landscape of schools due to COVID, completing activities to ensure sustainability have been difficult, however, the oversight and monitoring continues with consistent communication of OSE's expectations of correction.

### **9 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2020 and OSEP accepts that revision.

### **9 - Required Actions**

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

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

# Indicator 10: Disproportionate Representation in Specific Disability Categories

## Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

### Data Source

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

### Measurement

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

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

Based on its review of the 618 data for FFY 2020, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2020 reporting period (i.e., after June 30, 2021).

### Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 10 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

### Historical Data

Baseline Year	Baseline Data
2016	2.78%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	1.84%	2.78%	3.11%	NVR	1.11%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

**FFY 2020 SPP/APR Data**

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

YES

**If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.**

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Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
19	11	333	1.11%	0%	3.30%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

Reasons for slippage indicated in the data include changes to the SEA data collection protocols and disaggregation. Along with the struggles of maintaining accurate and reliable data sources during COVID, the IDOE has taken into account the comments and required actions of OSEP in prior year's SPP/APR determinations and began to investigate its data protocols and make adjustments as needed. The slippage documented this year is indicative of those changes towards an accurate and reliable data protocol.

**Were all races and ethnicities included in the review?**

YES

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

IDOE defines disproportionate representation of racial and ethnic groups (American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander, Hispanic or Latino, Black or African American, White, Multiracial) in specific disability categories (Cognitive Disability, Specific Learning Disability, Emotional Disability, Language or Speech Impairment, Other Health Impairment, and Autism Spectrum Disorder) as the risk index of students identified with a disability in a particular racial/ethnic category and particular disability category within an LEA to the risk index of students with a disability of all other racial/ethnic categories identified for that disability category within that LEA. The risk ratio must be greater than 2.0 for each of three consecutive years. IDOE has a required minimum of 15 students with a disability in each racial/ethnic category, as well as a minimum of 15 in all other racial/ethnic categories.

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

LEAs were notified that the LEA had disproportionate representation in identification (over the Indiana defined risk ratio threshold of 2.0 for each of three years), and the annual data analysis reflected possible noncompliance for this indicator. A review team of technical assistance providers, subcontractors, and DOE specialists is developed and trained for inter-rater reliability.

The team reviews each LEA required to participate in a policy and procedure review; this includes reviewing the following information:

Detailing how LEA responds to requests for educational evaluations, including how a parent or agency may request the initial evaluation and the procedures for reevaluations

Describing how a multidisciplinary team will be assigned to conduct educational evaluations

Ensuring that assessments and evaluation materials are provided in the student's native language or other mode of communication

Ensuring that assessments and evaluation materials are provided in a form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally

Ensuring that assessments and evaluation materials are selected and administered so as not to be discriminatory on a racial or cultural basis

Ensuring that assessments and evaluation materials are used for the purposes for which the assessments or measures are valid and reliable

Ensuring that assessments and evaluation materials are administered by trained personnel and in accordance with the evaluation/assessment protocol

Ensuring that assessments and evaluation materials include those tailored to assess specific areas of educational need and not merely those designed to provide a single general IQ

Ensuring that assessments and evaluation materials are selected and administered to ensure that the assessment accurately reflects the student's achievement rather than reflect the student's impaired sensory, manual, or speaking skills (unless the instrument is designed to assess those areas)

Ensuring that the student is assessed (or that information is collected) in all areas related to the suspected disability

Ensuring that assessment tools and strategies provide relevant information that directly assists the case conference committee (CCC) in determining the student's eligibility for special education

Requiring the multidisciplinary team to use a variety of assessment tools and strategies to gather required and relevant information about the student

Ensuring that the multidisciplinary team includes the requisite qualified professionals

Requiring the multidisciplinary team to review existing evaluation data on the student, obtain input from the student's parent, identify the suspected disability, and determine additional data needed to determine the student's eligibility for special education services

Ensuring that the evaluation report for a student with the suspected disability of Autism Spectrum Disorder includes assessment results and other information collected as aligned to the characteristics of Autism Spectrum Disorder

Ensuring the evaluation report for a student with the suspected disability of Specific Learning Disability includes the elements described in Indiana Administrative Code

Ensuring that the CCC does not determine that a student is eligible for special education if the determinant factor is the lack of instruction in reading or math or the student's limited English proficiency

Ensuring that the CCC does not determine that a student is eligible for special education if the student does not meet the eligibility criteria for the disability

Ensuring that the CCC does not determine the student eligible for special education when the student's only need is a related service

Ensuring that the CCC includes the requisite members

Ensuring that at least one of the qualified professionals from the multidisciplinary team attends the initial CCC meeting

Each LEA was required to participate in a file review (practices) (minimum of five files). A review team (as described above) reviews the following topics/areas:

1. General Initial Evaluation Requirements

1.1 Written notice of evaluation.

1.2 Signed parental consent for evaluation.

1.3 Written notice prior to the initial CCC containing:

(1) A description and overall findings of each:

(A) evaluation;

(B) procedure;

(C) assessment;

(D) record; or

(E) report;

that the school used as a basis for any proposed action.

(2) A description of action that the school may propose.

(3) An explanation of why the school may propose an action.

1.4 Educational evaluation conducted by a multidisciplinary team that includes, but is not limited to: (1) At least one teacher licensed in or other specialist with knowledge in, the area of suspected disability; (2) A school psychologist except for suspected disabilities of DD, LI, SI; (3) For suspected SLD, the student's general education teacher; (4) For BLV, DHH, MD, representatives of the state-operated schools.

1.5 Findings of the evaluation compiled into an educational evaluation report and provided to the parent prior to or at the CCC.

1.6 Educational evaluation report contains information collected or considered for all areas addressed during the evaluation.

1.7 Notice of CCC meeting.

1.8 Notice of ineligibility or proposed IEP.

2. Disability-Specific Evaluation Requirements

Evaluation included the necessary components given the suspected area(s) of disability. Consider the requirements for the relevant suspected disability(ies). (Information on specific eligibility requirements in rubric available upon request)

3. Eligibility Determination

3.1 Parent participation as a member of the CCC.

3.2 Required members of the CCC were present including at least one of the qualified professionals from the evaluation team.

3.3 The CCC considered all information contained in the educational evaluation report when determining eligibility.

3.4 The CCC did not rely on any single measure of assessment as the sole criterion for determining eligibility or services.

3.5 CCC must not determine that a student is eligible if the determinant factor is lack of appropriate instruction in reading or math.

3.6 CCC must not determine that a student is eligible if the determinant factor is limited English proficiency.

3.7 Evaluation results support the eligibility decision made by the CCC.

Upon completion of reviews, the review team leader provides IDOE specialists all documentation for completed reviews and if policies, procedures and/or practices (including the use of positive behavioral interventions and supports and procedural safeguards) were determined to be inappropriate, IDOE issues a finding of noncompliance.

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Findings of noncompliance not yet corrected are evaluated using the same measures previously to assess for continued noncompliance in addition to non correction. If there is compliance based on new data, then LEAs will have to submit files and evidence that each of the individual cases of noncompliance was corrected. However, if there is an issue of continued noncompliance and non correction then LEAs must participate in escalated levels of TA support and their compliance status changes (e.g. continuing or longstanding) and is noted in their respective RDA results. This continues until a combination of correction and compliance are achieved.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	4	3	1
FFY 2017	4	3	1
FFY 2016	1	1	0

**FFY 2018**

**Findings of Noncompliance Verified as Corrected**

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

Of the 4 LEAs identified in 2018, 3 of the 4 have been verified as corrected and are correctly implementing all regulatory requirements and have achieved 100% compliance. These corrections were verified using a combination file reviews and required data submissions demonstrating that the LEAs meet criteria for compliance.

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

The State verified that each individual case of noncompliance was corrected using a combination of file reviews and required data submissions which demonstrate that each individual case has been corrected.

**FFY 2018**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Findings of noncompliance not yet corrected are evaluated using the same measures previously to assess for continued noncompliance in addition to non correction. If there is compliance based on new data, then LEAs will have to submit files and evidence that each of the individual cases of noncompliance was corrected. However, if there is an issue of continued noncompliance and noncorrection then LEAs must participate in escalated levels of TA support and their compliance status changes (e.g. continuing or longstanding) and is noted in their respective RDA results. This continues until a combination of correction and compliance are achieved.

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Of the 4 LEAs identified in 2017, 3 of the 4 have been verified as corrected and are correctly implementing all regulatory requirements and have achieved 100% compliance. These corrections were verified using a combination file reviews and required data submissions demonstrating that the LEAs meet criteria for compliance.

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

The State verified that each individual case of noncompliance was corrected using a combination of file reviews and required data submissions which demonstrate that each individual case has been corrected.

**FFY 2017**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Findings of noncompliance not yet corrected are evaluated using the same measures previously to assess for continued noncompliance in addition to non correction. If there is compliance based on new data, then LEAs will have to submit files and evidence that each of the individual cases of noncompliance was corrected. However, if there is an issue of continued noncompliance and noncorrection then LEAs must participate in escalated levels of TA support and their compliance status changes (e.g. continuing or longstanding) and is noted in their respective RDA results. This continues until a combination of correction and compliance are achieved.

**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 LEA identified in 2016 has now been verified as corrected and is correctly implementing all regulatory requirements and has achieved 100% compliance. These corrections were verified using a combination file reviews and required data submissions demonstrating that the LEAs meet criteria for compliance.

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

The State verified that each individual case of noncompliance was corrected using a combination of file reviews and required data submissions which demonstrate that each individual case has been corrected.



## 10 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. The State must demonstrate, in the FFY 2020 SPP/APR, that the four districts identified in FFY 2019 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining four districts identified in FFY 2018, the remaining four districts identified in FFY 2017, the remaining one district identified in FFY 2016, and the remaining one district identified in FFY 2013 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification, are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. In demonstrating the correction of the noncompliance identified in FFY 2018, FFY 2017, FFY 2016, and FFY 2013, the State must report, in the FFY 2020 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018, FFY 2017, FFY 2016, and FFY 2013: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

### Response to actions required in FFY 2019 SPP/APR

Findings of noncompliance have not been corrected. These LEAs are currently taking part in intensive TA and receive OSE oversight. The TA plan includes but is not limited to review of LEA data monthly, development of district teams, activities based in root cause analysis, training for staff, action planning, and progress monitoring for correction of individual cases and compliance. Continued issues will result in change of status (continuing or longstanding), affecting RDA results and required actions and plans from OSE.

As of January 2021, this LEA has been released from Special Conditions due to their compliance and correction of items noted. Indiana has verified through a review of data submitted in our RDA Planning Tool and one-on-one technical assistance meetings and other support with the prior serving Assistant Director of the Office of Special Education that this district with a finding of noncompliance reflected in the FFY 2013 data reported for this indicator has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district or LEA consistent with OSEP Memorandum 09-02. Further verification of correction, per OSEP required actions outlined in FFY 2019 SPP/APR, consisted of monthly meetings with the LEA and the prior serving Assistant Director of Special Education to confirm correction of individual cases, continued successful implementation of policies and procedures, ensure systemization of data collection procedures for the purposes of monitoring, and review district level data.

## 10 - OSEP Response

The State reported its baseline for this indicator using data from FFY 2016, however, OSEP cannot accept this baseline because of revisions to the Measurement Table. Specifically, with the FFY 2020 APR submission, all States are now required to provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories. Therefore, the State must revise its baseline using FFY 2020 data.

OSEP's response to the State's FFY 2019 SPP/APR required the State to include in the FFY 2020 SPP/APR that the remaining four districts identified in FFY 2018, the remaining four districts identified in FFY 2017, the remaining one district identified in FFY 2016, and the remaining one district identified in FFY 2013 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification, are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. In demonstrating the correction of the noncompliance identified in FFY 2018, FFY 2017, FFY 2016, and FFY 2013, the State must report, in the FFY 2020 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018, FFY 2017, FFY 2016, and FFY 2013: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction. OSEP could not determine if the State provided all of the the required information because in the table under "Correction of Findings of Noncompliance Identified Prior to FFY 2019", the State did not include FFY 2013 in its reporting of correction. However, in its response to the actions required in FFY 2019 SPP/APR, the State indicated the LEA identified in FFY 2013 has been verified as corrected.

## 10 - Required Actions

The State did not revise the baseline as required in the FFY 2020 Measurement Table which requires all States to provide racial/ethnic disproportionality for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories. The State must, in the FFY 2021 SPP/APR, revise the baseline using FFY 2020 data.

Because the State reported less than 100% compliance for FFY 2020 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the 11 districts identified in FFY 2020 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Further, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining four districts identified in FFY 2019, one district identified in FFY 2018, one district identified in FFY 2017 and one district identified in FFY 2013 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification, are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. In demonstrating the correction of the noncompliance identified in FFY 2019, FFY 2018, FFY 2017, and FFY 2013, the State must report, in the FFY 2021 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019, FFY 2018, FFY 2017, and FFY 2013: (1) is correctly implementing the specific regulatory

requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

## Indicator 11: Child Find

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Child Find

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 11 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2020	94.92%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	98.71%	98.46%	98.72%	98.34%	96.14%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

### FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
21,709	20,831	96.14%	100%	95.96%	N/A	N/A

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

878

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

1-5 days: 139

5-10 days:96

11-15 days: 71

Over 15 or did not complete that school year: 572

Total 878

638 were missed due to COVID quarantining and/or school closures

**Indicate the evaluation timeline used:**

The State established a timeline within which the evaluation must be conducted

**What is the State's timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).**

Indiana's initial evaluation timeline is 50 instructional days. The only exceptions to this are as follows: when the evaluation occurs after a child has participated in a process that assesses the student's response to scientific research-based interventions; or, when a referral is made for an initial evaluation during the time period in which the student is subjected to suspension, expulsion, or placement in an interim alternative educational setting. In these cases, the evaluation timeline is 20 instructional days.

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

State database that includes data for the entire reporting year

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

The data for this indicator was submitted to IDOE via a secure site known as the Student Test Number (STN) Application Center. Each LEA must upload child count, performance data, and compliance data to the STN Application Center. This data is then stored in the IDOE data warehouse where it can be extracted and used for state and federal funding, performance indicators, and compliance indicators. Target data was gathered from the IDOE-Evaluation report and then verified with LEAs to ensure accuracy. Data used in the APR is derived from the final verification reports submitted by LEAs.

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

Due to the ongoing COVID pandemic, schools have had to provide virtual instruction as well as close schools due to outbreaks and staffing issues. The pandemic has prevented school psychologists from being able to meet with students due to quarantine and school closure which delayed timelines.

During the Indicator 11 stakeholder meeting, stakeholders were asked to consider whether the baseline year and data reflected our current landscape for completing initial evaluations. Stakeholder consensus was to update our baseline year and data to FFY 2020 to reflect the current impact of COVID.

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
175	114	0	61

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

Subsequent to verifying individual correction, using the EV Report (which includes student information, date of parental consent, date of the case conference - meeting to determine eligibility, and whether the student was found eligible) found in Indiana IEP (the system Indiana uses to document and store eligibility information as well as IEPs), IDOE monitored updated LEA data to ensure that each LEA met all subsequent timelines and is implementing the regulations at 100% compliance. This was verified for 114 of the LEAs with noncompliance.

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

For the 114 LEAs that are reported as corrected, the state reviewed updated data in the IEP system and verified that each of the 114 LEAs have achieved 100% compliance and are correctly implementing the regulatory requirement.

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

LEAs identified as not meeting the required timeline for compliance were required to develop a Corrective Action Plan (CAP) in coordination with an education specialist at IDOE during FFY2019. The LEAs that were unable to verify correction of policies and procedures received intensified consultation from an assigned IDOE consultant and participated in state required corrective action. Additional monitoring and data submissions were required as a part of the CAP.

The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact

compliance on eligibility timelines. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address questions the team has. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

<b>Year Findings of Noncompliance Were Identified</b>	<b>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR</b>	<b>Findings of Noncompliance Verified as Corrected</b>	<b>Findings Not Yet Verified as Corrected</b>
FFY 2018	75	16	59
FFY 2014	2	1	1

**FFY 2018**

**Findings of Noncompliance Verified as Corrected**

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

LEAs identified as not meeting the required timeline for compliance were required to develop a Corrective Action Plan (CAP) in coordination with an education specialist at IDOE during FFY2018. The LEAs that were unable to verify correction of policies and procedures received intensified consultation from an assigned IDOE consultant and participated in state required corrective action. Additional monitoring and data submissions were required as a part of the CAP.

The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact compliance on eligibility timelines. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address questions the team has. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

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

For the 16 LEAs that are reported as corrected, the state reviewed updated data in the IEP system and verified that each of the 16 LEAs have achieved 100% compliance and are correctly implementing the regulatory requirement.

**FFY 2018**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

LEAs have shown progress and are receiving one-on-one Indicator 11 intensive support as part of Indiana's RDA monitoring. Because of this longstanding noncompliance, IDOE will continue to collect, review, and verify subsequent data obtained by a new randomized sample to ensure that the LEA is correctly implementing the regulatory requirements by achieving 100% compliance.

Some LEAs would have met all timelines had COVID not had an impact. IDOE is working with LEAs who only missed timelines due to COVID to ensure protocols and policies are in place to address the on-going pandemic and to ensure COVID is not a cause for missed timelines moving forward.

The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact compliance on eligibility timelines. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address questions the team has. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

**FFY 2014**

**Findings of Noncompliance Verified as Corrected**

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

The LEA has shown progress and is receiving one-on-one Indicator 11 intensive support as part of Indiana's RDA monitoring. Because of this longstanding noncompliance, IDOE will continue to collect, review, and verify subsequent data obtained by a new randomized sample to ensure that the LEA is correctly implementing the regulatory requirements by achieving 100% compliance. The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact compliance on eligibility timelines. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address questions the team has. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

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

For the LEA that is reported as corrected, the state reviewed updated data in the IEP system and verified the LEA has achieved 100% compliance and are correctly implementing the regulatory requirement.

**FFY 2014**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The LEA has shown progress and is receiving one-on-one Indicator 11 intensive support as part of Indiana's RDA monitoring. Because of this longstanding noncompliance, IDOE will continue to collect, review, and verify subsequent data obtained by a new randomized sample to ensure that the LEA is correctly implementing the regulatory requirements by achieving 100% compliance.

The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact compliance on eligibility timelines. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address questions the team has. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

## 11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining 75 uncorrected findings of noncompliance identified in FFY 2018 and the remaining two uncorrected findings of noncompliance identified in FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018 and FFY 2014: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

### Response to actions required in FFY 2019 SPP/APR

As noted in previous responses, IDOE is utilizing a standardized process for correction of noncompliance and continues to monitor this process for effectiveness as part of continuous quality improvement strategies. This includes data analysis related to the root causes for noncompliance, and this process has demonstrated that the impacts of COVID-19 continue to play a significant role in the LEAs ability to meet compliance. Restrictions related to COVID-19 have also deterred any on-site monitoring by the SEA with an increased reliance on State data systems that do not demonstrate many of the nuances being faced by the SEA and LEAs related to the pandemic.

## 11 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, but OSEP cannot accept that baseline revision because the State's FFY 2020 baseline data reported in the Historical Data table is not consistent with the State's FFY 2020 data reported in the FFY 2020 SPP/APR Data table.

The State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2019, FFY 2018 and FFY 2014 because it did not report that it verified correction of those findings, consistent with OSEP Memo 09-02. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2019, FFY 2018 and FFY 2014 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

## 11 - Required Actions

If, in the FFY 2021 SPP/APR, the State chooses to revise its baseline for this indicator, using data from FFY 2020, the State must ensure that the baseline data reported in the Historical Data table is consistent with the State's FFY 2020 data reported in the FFY 2020 SPP/APR Data table.

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 61 uncorrected findings of noncompliance identified in FFY 2019, 59 uncorrected findings of noncompliance identified in FFY 2018, and one uncorrected finding of noncompliance identified in FFY 2014 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019, FFY 2018, and FFY 2014: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Indicator 12: Early Childhood Transition

### Instructions and Measurement

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

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

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

#### Data Source

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

#### Measurement

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

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

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

#### Instructions

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

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

Targets must be 100%.

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 12 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2005	95.80%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	100.00%	99.43%	97.39%	99.68%	92.08%

#### Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

#### FFY 2020 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	3,635
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	542

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,359
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	529
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	0
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	2,359	2,564	92.08%	100%	92.00%	Did not meet target	No Slippage

**Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f**  
205

**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.**

The total number of students that were evaluated outside of the timelines for Indiana is 205. Timelines were missed for a variety of reasons identified as follows: staff shortages, volume of referrals, scheduling conflicts, timeline errors, inadequate timeline tracking, improper documentation, LEA staff errors, and COVID-19 related delays.

Indicated below are the ranges of days for evaluations that were beyond the state designated timeline.

1-5 days: 17

6-10 days: 14

11-15 days: 19

Over 15 days/not finished during reporting period: 174

**Attach PDF table (optional)**

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

State database that includes data for the entire reporting year

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

The data for this indicator was submitted to the IDOE via a secure site known as the Student Test Number (STN) Application Center. Each LEA must upload child count, performance data, and compliance data to the STN Application Center. This data is then stored in the IDOE data warehouse where it can be extracted and used for state and federal funding, performance indicators, and compliance indicators. Target data was gathered from the IDOE-Evaluation report and then verified with LEAs to ensure accuracy. Data used in the APR is derived from the final verification reports submitted by LEAs.

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

Related to Indicator 12, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include:

Provide early communication with parents about the transition from First Steps into early childhood special education programs.

Provide training to administrators, school staff, and First Steps providers to facilitate collaboration, alignment of processes, and importance of inclusive practices.

Increase inclusive preschool options across the continuum of environments from self-contained to full inclusion classrooms.

Include parent support organizations in this process and collect additional information from families about why they choose not to go forward with special education services in the school.

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
62	26	0	36

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

For the 26 LEAs that are reported as corrected, the state reviewed updated data in the IEP system and verified that each of the 26 LEAs have achieved 100% compliance and are correctly implementing the regulatory requirement.

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

The LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to correct each individual case of noncompliance identified in the file review unless the student was no longer under the jurisdiction of the LEA. (Prong 1 in OSEP Memo 09-02) Specifically, the LEAs worked with IDOE staff and identified those individual cases of noncompliance that were due to factors other than a student not receiving services within



the 50 day timeline. For example, the specific reason(s) of noncompliance included improper documentation, staff errors, inadequate tracking, scheduling conflicts, staff shortage, timeline errors and volume of referrals. IDOE staff then verified each of the Prong 1 files were corrected by a review of each student STN (the student unique identifier) associated with the noncompliance.

The LEAs worked with IDOE staff to address the specific reason(s) of noncompliance. The LEAs that were issued findings were assigned an IDOE specialist and required to develop a targeted action plan in order to identify the root cause(s) of noncompliance and to change and update policies, procedures, and practices in order to correctly implement all regulatory requirements of the indicator. The IDOE specialist collected the updated policies, procedures, and practices from LEAs and verified that the appropriate changes were made. Pursuant to OSEP Memorandum 09-02, IDOE verified that unless the child no longer remained under the jurisdiction of the initiating LEA, all outstanding noncompliant initial evaluations were completed, although late. IDOE verified completion of the outstanding noncompliant timelines by collecting and reviewing updated evaluation information from LEAs on each individual case through the State's data system and verified the LEA achieved the 100% percent compliance requirement. (Prong 2 in OSEP Memo 09-02)

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact compliance on timelines of eligibility. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address the team's questions. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	3	3	0

**FFY 2018**

**Findings of Noncompliance Verified as Corrected**

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

LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to review and revise their policies, procedures, and practices relating to the process of conducting the initial evaluation within timeline parameters. Each LEA created a targeted action plan through the submission of a RDA Planning Tool. The planning tool included LEA-specific data in regard to the file review and a tab to create a targeted action plan to be completed by the staff of the LEA. In addition, the LEAs identified with noncompliance were informed that they were required to work with IDOE staff and/or appropriate Indiana Resource Network technical assistance provider(s). Progress on this indicator was monitored through the contacts between the LEA and IDOE specialist or resource center staff to address the specific reason(s) of noncompliance.

To verify correction of LEAs out of compliance for more than one consecutive year, IDOE staff pulled a full year of data to review corrections for full compliance.

This data was accessed through the IDOE data collection systems via the DOE-EV report (evaluation report).

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

The LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to correct each individual case of noncompliance identified in the file review unless the student was no longer under the jurisdiction of the LEA. (Prong 1 in OSEP Memo 09-02) Specifically, the LEAs worked with IDOE staff and identified those individual cases of noncompliance that were due to factors other than a student not receiving services within the 50 day timeline. For example, the specific reason(s) of noncompliance included improper documentation, staff errors, inadequate tracking, scheduling conflicts, staff shortage, timeline errors and volume of referrals. IDOE staff then verified each of the Prong 1 files were corrected by a review of each student STN (the student unique identifier) associated with the noncompliance.

The LEAs worked with IDOE staff to address the specific reason(s) of noncompliance. The LEAs that were issued findings were assigned an IDOE specialist and required to develop a targeted action plan in order to identify the root cause(s) of noncompliance and to change and update policies, procedures, and practices in order to correctly implement all regulatory requirements of the indicator. The IDOE specialist collected the updated policies, procedures, and practices from LEAs and verified that the appropriate changes were made. Pursuant to OSEP Memorandum 09-02, IDOE verified that unless the child no longer remained under the jurisdiction of the initiating LEA, all outstanding noncompliant initial evaluations were completed, although late. IDOE verified completion of the outstanding noncompliant timelines by collecting and reviewing updated evaluation information from LEAs on each individual case through the State's data system and verified the LEA achieved the 100% percent compliance requirement. (Prong 2 in OSEP Memo 09-02)

**12 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining three uncorrected findings of noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

**Response to actions required in FFY 2019 SPP/APR**

As noted in previous responses, IDOE is utilizing a standardized process for correction of noncompliance and continue to monitor this process for effectiveness as part of continuous quality improvement strategies. This includes data analysis related to the root causes for noncompliance, and this process has demonstrated that the impacts of COVID-19 continue to play a significant role in the LEAs ability to meet compliance. Restrictions related to COVID-19 have also deterred any on-site monitoring by the SEA with an increased reliance on State data systems that do not demonstrate many of the nuances being faced by the SEA and LEAs related to the pandemic.

**12 - OSEP Response**

The State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2019 because it did not report that it verified correction of those findings, consistent with OSEP Memo 09-02. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2019 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

**12 - Required Actions**

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 36 uncorrected findings of noncompliance identified in FFY 2019 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Indicator 13: Secondary Transition

### Instructions and Measurement

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

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 13 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2009	80.22%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	86.36%	85.47%	86.14%	68.70%	75.60%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

### FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
490	636	75.60%	100%	77.04%	Did not meet target	No Slippage

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

State monitoring

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

Indiana's Article 7 requires transition plans begin at age 14, prior to the 9th grade, or earlier if determined appropriate by the case conference committee. Indiana Department of Education (IDOE) contracted with the Center on Community Living and Careers (CCLC) at Indiana University to conduct a compliance review of a randomly selected sample of students' transition IEPs. The review was conducted to ensure that IDOE meets the reporting requirements and is providing ongoing assistance for school corporations with compliance rates below 100%.

To determine and ensure compliance with Indicator 13, IDOE has developed the Indiana Transition Requirements Checklist based on a data collection tool created by the National Technical Assistance Center on Transition the Collaborative (NTACT:C) and approved by OSEP. The Indiana Secondary Transition Resource Center (INSTRC) at the CCLC has created an online version of Indiana's data collection tool that was used to analyze Indiana's student records to determine compliance with Indicator 13. The 10-item Indiana Transition Requirements Checklist was utilized to assess if there was evidence in a student's IEP that the student had been provided the appropriate transition services to prepare them to successfully transition from secondary school to a post-secondary education and/or training program and to employment at an accuracy rate of 100%.

IDOE provided CCLC with a population database of students who were receiving special education services and met the Indiana transition IEP age criteria for the monitored school year and whose local school districts are part of the monitoring cycle. The database included the student identification number and the Corporation Code Number. To generate the sample, CCLC used Microsoft Excel to run a random sampling program. If the corporation had fewer than 100 students with disabilities, four students were selected for the review. For corporations with more than 500 students, 10 students were selected. Therefore, a minimum of four and maximum of 10 Transition IEPs were reviewed based on the size of the district. In some cases, charter schools had sample sizes of fewer than three students because these schools were serving a limited number of students or did not have large populations of students with disabilities. A report of the review was then provided to IDOE.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	YES
If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age?	YES
If yes, at what age are youth included in the data for this indicator	14

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

Related to Indicator 13, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes included:

Provide training on developing compliant transition IEPs.

Clarify the expectations for compliant transition IEPs.

Provide additional support for new teachers.

Facilitate relationships between adult service providers and LEAs.

Develop information on how to increase parent engagement.

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
95	94	1	0

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

IDOE issued 95 Indicator 13 findings of noncompliance with regard to regulatory requirements. Subsequently, all 95 LEAs corrected all instances of noncompliance and demonstrated regulatory requirements in the additional pulls conducted. These new findings were identified through an assessment by CCLC using the Indiana Transition IEP Checklist. To verify correction, IDOE reviewed updated policies, procedures, and practices (prong 2), as well as reviewed data through additional IEPs for these components and overall compliance. All LEAs reviewed are implementing regulatory requirements at 100%.

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

IDOE verified correction of all individual cases of noncompliance by using the Indiana Transition Requirements Checklist to ensure that each individual case had been corrected based on the review of each IEP in the Indiana IEP system. IDOE also verified the enrollment status of a student with a non-compliant IEP if an LEA advised that the student was no longer enrolled due to graduation, transfer, withdrawal, etc. Correction was not required if the student was no longer enrolled.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

**13 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that

each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

#### **Response to actions required in FFY 2019 SPP/APR**

Indiana found 95 instances of noncompliance during FFY 2019, of those findings all but one were corrected within one year of determination. For the 95 who had a finding, each instance of noncompliance found in the initial pull was corrected, and subsequent pulls determined no additional findings of noncompliance. Additionally, the districts with findings engaged in technical assistance and professional development in order to improve transition IEPs moving forward. For the one finding that has yet to be corrected. The initial noncompliance has been corrected; however, subsequent pulls identified additional findings of noncompliance. The district has been engaged in reviewing and revising its policies and procedures around transition IEPs as well as being engaged in ongoing technical assistance and professional development to improve transition IEPs. The district will be released once all findings of noncompliance have been corrected and no additional findings are found in future pulls.

### **13 - OSEP Response**

#### **13 - Required Actions**

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

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

## Indicator 14: Post-School Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

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

#### Instructions

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

Collect data by September 2021 on students who left school during 2019-2020, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2019-2020 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

#### I. Definitions

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

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

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

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

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

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

#### II. Data Reporting

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

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

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

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

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

### III. Reporting on the Measures/Indicators

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

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

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

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

Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States should consider categories such as race/ethnicity, disability category, and geographic location in the State.

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

**Beginning with the FFY 2021 SPP/APR, due Feb. 1, 2023**, when reporting the extent to which the demographics of respondents are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, States must include race/ethnicity in its analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

## 14 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2020	Target >=	37.30%	37.80%	38.30%	38.80%	39.00%
A	22.06%	Data	30.00%	31.15%	36.22%	25.00%	24.17%
B	2020	Target >=	64.50%	65.00%	65.50%	66.00%	66.00%
B	69.94%	Data	65.71%	70.49%	63.78%	63.89%	64.33%
C	2020	Target >=	78.50%	79.00%	79.50%	86.20%	86.00%
C	82.30%	Data	87.14%	86.07%	88.19%	83.33%	75.83%

### FFY 2020 Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	25.00%	25.50%	26.00%	26.50%	27.00%	27.50%
Target B >=	69.94%	70.44%	70.94%	71.44%	71.94%	72.44%
Target C >=	82.30%	82.80%	83.30%	83.80%	84.30%	84.80%

### Targets: Description of Stakeholder Input

IDOE’s Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana’s parent training and information center, other state

technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations. Indicator 14 requires stakeholder input as to what representation categories data will be collected from survey respondents. The areas of disability, gender, and race will be collected when conducting the survey.

Stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes include:  
 Provide incentives for districts to collect the data.  
 Provide the survey in multiple formats.  
 Include a general question about COVID's impact on securing or maintaining employment or education.

**FFY 2020 SPP/APR Data**

Total number of targeted youth in the sample or census	977
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	825
Response Rate	84.44%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	182
2. Number of respondent youth who competitively employed within one year of leaving high school	395
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)	38
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).	64

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Enrolled in higher education (1)	182	825	24.17%	25.00%	22.06%	N/A	N/A
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	577	825	64.33%	69.94%	69.94%	N/A	N/A
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)	679	825	75.83%	82.30%	82.30%	N/A	N/A

**Please select the reporting option your State is using:**

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.



## Response Rate

FFY	2019	2020
Response Rate	82.42%	84.44%

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

For the 2021 leavers, training has been held to improve the quality of data able to be pulled from the state wide IEP system to ensure accurate data is available to make contact with more students. Training has also been held to inform teachers of having students getting ready to exit to sign up for a monthly newsletter to assist with the transition out of high school. The newsletter is also a means to collect accurate data which is used to contact those who have exited. Indiana will be partnering with our state parent resource center to also improve the response rate for the coming year.

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

Indiana had several school districts who had missing or incomplete data from which to pull from in order to conduct the survey for their school district. Training has been and will continue to be given to districts to ensure they are inputting their data properly, so their students can be contacted in future surveys.

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

Indiana's analysis of our response data shows there is underrepresentation in the race/ethnicity areas of Black/African American by 8% and Hispanic by 4%. There is underrepresentation in the disability areas of Emotional Disability by 5%, Intellectual Disability by 4%, and Other Health Impairment by 7%.

### The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)

NO

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

Indiana will once again offer the survey in Spanish. Additionally, data is reviewed to identify the home language of the student in order to make sure the first reach out is in their preferred language. Indiana will look to identify which school districts have a larger population of students in the underrepresented areas identified and will target these school districts differently when reaching out.

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

Indiana used a relative share of responses to the survey by each category compared to the overall population of students who have exited by category. This metric included a +/- 3% discrepancy.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

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

A minimum of 3 percent of leavers per LEA were surveyed. For LEAs for whom 3 percent of leavers would be fewer than 3 leavers, oversampling was employed to interview a minimum of 3 leavers.

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

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

The Indicator 14 stakeholder group was asked whether the baseline year and data was reflective of the current data trends. Consensus was that since the methodology and survey were changed in 2019 to include all LEAs in the sample and with the impact of COVID to use the FFY 2020 baseline data.

## 14 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether the FFY 2020 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

### Response to actions required in FFY 2019 SPP/APR

As noted in previous responses, IDOE is utilizing a standardized process for correction of noncompliance and continue to monitor this process for effectiveness as part of continuous quality improvement strategies.

## 14 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State did not analyze the response rate to identify potential non-response bias, as required by the Measurement Table.

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

#### **14 - Required Actions**

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

In the FFY 2021 SPP/APR, the State must analyze the response rate to identify potential non-response bias and identify steps taken to reduce any identified bias to promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school, as required by the Measurement Table.

## Indicator 15: Resolution Sessions

### Instructions and Measurement

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

**Results Indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

#### Data Source

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

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

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

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

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

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

### 15 - Indicator Data

Select yes to use target ranges

Target Range not used

#### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1 Number of resolution sessions	46
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1(a) Number resolution sessions resolved through settlement agreements	24

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

NO

#### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

Related to Indicator 15, stakeholder concerns and suggestions to support the development and implementation of activities to improve outcomes included:

Encourage both parties to engage in early resolution.

Provide opportunities for training from a neutral party for parents and schools to understand dispute resolution processes.

Inform and promote use of other alternative dispute resolution techniques (Facilitated IEP, mediation, etc.).

#### Historical Data

Baseline Year	Baseline Data
2017	20.00%

FFY	2015	2016	2017	2018	2019
Target >=	73.50%	74.00%	74.50%	75.00%	75.50%
Data	50.94%	35.09%	20.00%	36.51%	17.14%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target >=	20.00%	20.50%	21.00%	21.50%	22.00%	22.50%

**FFY 2020 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
24	46	17.14%	20.00%	52.17%	Met target	No Slippage

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

In reviewing historical Indicator 15 data, the targets set for 2008-2012 ranged from 30.8% to 31.6%. The corresponding data in that timeframe ranged from 66% to 83.33% with no clear trends being set. In 2013, the target was changed to 72.5% increasing by .5% annually. From 2013 to 2019, data demonstrated a range of 17.14% to 80.43%, but the last 3 years of data were 20%, 36.51% and 17.14%. Given the most current data demonstrating a significant decline, and the desire to set a realistic baseline and subsequent targets, with input from stakeholders, it was determined that the baseline would be set using the FFY 2017 data (20%) and targets would be decreased to align with the current data trends, with a goal of gradually increasing by .5% annually. The end target for FFY 2025 of 22.5% does reflect improvement over the State's proposed baseline data revision to FFY 2017 data of 20%.

**15 - Prior FFY Required Actions**

None

**15 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2017 and OSEP accepts that revision.

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

**15 - Required Actions**

## Indicator 16: Mediation

### Instructions and Measurement

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

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

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

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

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

## 16 - Indicator Data

### Select yes to use target ranges

Target Range not used

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	50
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	2
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	35

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

NO

### Targets: Description of Stakeholder Input

IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana's parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

In relation to Indicator 16, stakeholders shared concerns and suggestions to support the development and implementation of activities to improve outcomes including:

Provide potential training for mediators needed on special education topics and Article 7.

Continue to offer virtual mediations.

### Historical Data

Baseline Year	Baseline Data
2019	66.67%

FFY	2015	2016	2017	2018	2019
Target >=	75.50%	76.00%	76.50%	77.00%	77.50%

Data	88.33%	90.48%	85.71%	81.63%	66.67%
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**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target >=	67.00%	68.00%	69.00%	70.00%	71.00%	72.00%

**FFY 2020 SPP/APR Data**

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2	35	50	66.67%	67.00%	74.00%	Met target	No Slippage

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

In reviewing historical Indicator data from 2008 to 2012, targets ranged from 52.8% to 53.64% with a data range of 59.35% to 76.19% with no clear trends identified. In 2013, the target was changed to 74.5%, increasing .5% annually. Data from 2013 to 2019 was also a wide range (66.67% to 100%) but the last 3 years of data demonstrate a clear decline moving from 85.71% to 66.67%. With decreasing trend data being observed and a desire to establish a realistic baseline and subsequent targets, it was determined that the baseline would be set using the FFY 2019 data (66.67%) and increasing 1% from 2021 to 2025 for the targets. The end target for FFY 2025 of 72% does reflect improvement over the State's proposed baseline data revision to FFY 2019 data of 66.67%.

**16 - Prior FFY Required Actions**

None

**16 - OSEP Response**

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

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

**16 - Required Actions**

## Indicator 17: State Systemic Improvement Plan

### Instructions and Measurement

**Monitoring Priority:** General Supervision

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

#### Measurement

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

#### Instructions

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

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

**Updated Data:** In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2, 2022, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

#### Overview of the Three Phases of the SSIP

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

##### **Phase I: Analysis:**

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

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

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

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

##### **Phase III: Implementation and Evaluation**

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

###### A. Data Analysis

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

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

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., Feb 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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

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

### C. Stakeholder Engagement

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

#### Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 17 - Indicator Data

### Section A: Data Analysis

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

Indiana will increase reading proficiency achievement on the Indiana Reading Evaluation and Determination (IREAD-3) assessment by at least .5% each year for all third grade students, including those with disabilities attending elementary schools participating in the Indiana SSIP Initiatives.

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

NO

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

YES

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

A cohort model is used to measure progress toward the SiMR. The cohort is made up of 2 schools participating in the intensive technical assistance that is a primary focus of the the current SSIP (1 of the cohort schools has withdrawn and a new school is engaging in initial conversations for participation).

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

NO

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

The SSIP Teams continue to implement the previous Theory of Action (ToA) to guide the SSIP. The ToA is outlined below and can also be viewed at <https://www.in.gov/doe/files/2021-22-SSIP-Report.pdf>

If IDOE: Provides a supported guidance for systemic alignment

Then the LEA: Will promote and support systemic alignment across the district

Then the Building Leader: Will promote and support systemic alignment across the district

Then Teachers: Will utilize building and district systems to drive instruction based on data

If IDOE: Supports the implementation of an MTSS framework, which includes the use of UDL

Then the LEA: Will build LEA and school leader's capacity to support implementation of this framework

Then the Building Leader: Will build teacher and school staff capacity for implementation of this framework

Then Teachers: Will implement this framework to support the instructional needs of all learners

If IDOE: Provides support for evidence-based practices in early literacy

Then the LEA: Will promote and support systemic alignment across the district

Then the Building Leader: Will promote and support early literacy through the use of the evidence-based practices

Then Teachers: Will utilize building and district systems to drive instruction based on data

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

NO

#### If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.

The FFY 2019 SSIP reported three Improvement Strategies:

1) Systemic Alignment:

a) Review current SSIP-related stakeholder teams and condense into two teams (the State SSIP Team and the Literacy Team) that guide/oversee all efforts;

b) Continue quarterly SSIP stakeholder team meetings with all partners, focusing on coordination and integration of SSIP activities and;

c) Develop evaluation tools and metrics to monitor SSIP strategy implementation.

2) Multi-Tiered System of Supports (MTSS)/Universal Design for Learning (UDL):

a) Phase out SSIP/MTSS district partnerships as a targeted SSIP activity;

b) Develop/disseminate universal MTSS/UDL supports related to early literacy and;

c) Develop Early Literacy Implementation Toolkit , including:

Overview of Tier 1 Core Instruction, including resources for EBPs;

Guidance for universal screeners and assessments;

Tools for reviewing/analyzing data and progress monitoring;

Resources for matching needs with interventions and;

Protocols for assessing quality, fidelity, and outcomes of implementation.

3) Early Literacy Practices Preschool-Grade 3:

a) Work with Region 8 Comprehensive Center to build IDOE's statewide implementation of the Literacy Framework, including a statewide needs assessment; b) Disseminate the core set of literacy EBPs aligned with state/national standards;



- c) Identify model high-performing school districts implementing literacy EBPs and demonstrating successful, equitable outcomes;
- d) Provide online district data dashboards that collapse service and assessment data to aid local decision making;
- e) Provide train-the-trainer professional development to IRN staff;
- f) Incorporate training as an option in the RDA planning tool for districts with low iRead-3 results and;
- g) Engage stakeholders to create specific criteria and select 4-6 districts based on need (continual low performance on IREAD/ILEARN) to receive intensive TA.

Based on the successful completion of all of the Improvement Strategy steps for Improvement Strategy #2 - MTSS/UDL, the state proposes to phase out the inclusion of MTSS/UDL as a separate Improvement Strategy, while continuing to target MTSS/UDL principles in Improvement Strategy #3 - Early Literacy. Doing so will further shift the statewide focus to improved instructional processes in literacy, to include MTSS/UDL principles in the early literacy classroom, which will more specifically target the state SiMR. This change will also allow the State SSIP Team and the Literacy Team to concentrate all efforts on the successful implementation of the Early Literacy Improvement Strategy.

Statewide IREAD-3 data suggests a strong need to focus on early literacy outcomes for both general education and special education students. Consolidating improvement strategies will allow the SSIP State Team and the Literacy Team to concentrate efforts on early literacy outcomes on the IREAD-3, and also incorporate new early literacy strategies focused on preschool students' ISPROUT outcomes.

The state also proposes to expand the use of Implementation Science within the SSIP to support school change in early literacy. Implementation Science is a research-based approach to infrastructure improvement that provides districts and schools with a four-stage framework for locating needs in a system, introducing an evidence-based practice in response to the need, providing professional development and coaching in the evidence-based practice, and developing data analysis systems to monitor the progress of change. Implementation Science is currently the framework used to provide early literacy technical assistance to the SSIP schools requiring support for low iRead-3 performance under Improvement Strategy #3 - Early Literacy. The state proposes to expand universal resources to schools and districts who want to use Implementation Science to adopt evidence-based practices in early literacy, inclusion, MTSS, and/or UDL.

**Progress toward the SiMR**

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages).**

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

Baseline Year	Baseline Data
2018	58.00%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target>= =	58.50%	60.00%	60.50%	61.00%	61.50%	62.00%

**FFY 2020 SPP/APR Data**

IREAD Pass N	IREAD Test N	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
131	171	0.00%	58.50%	76.61%	Met target	No Slippage

**Provide the data source for the FFY 2020 data.**

The data demonstrates results of the IREAD-3, Indiana's statewide standardized assessment for measuring 3rd grade students' foundational reading skills, for SSIP Cohort participants.

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

School districts conduct the IREAD-3 during state-assigned testing windows in the spring of the testing year. The IREAD-3 is scored digitally, and the data is collected by IDOE. Statewide analyses of student outcomes collectively and by specific populations are represented by number of students who Pass/Fail and by percentages of Pass/Fail. These data are publicly disseminated on the IDOE website, including individual district and school data. The percentages of Pass/Fail for all students participating in the assessment for SSIP Cohort Schools are used to determine progress toward the state SiMR.

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

NO

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

NO

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

YES

**If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.**

As the primary data collected related to the SSIP is state assessment (IREAD-3), the ability to collect data was not impacted. There is impact related to the validity and reliability for the indicator as the State has seen moderate to significant academic impact following the pandemic. As noted in the SBOE presentation, that state analyzed available data related to the impact and outlined steps to mitigate including strategic accelerated learning with intentional and focused instruction (<https://media.doe.in.gov/assessment/7.14.21-sboe-presentation.pdf>).

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

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

The link that includes the State's current evaluation plan is: <https://www.in.gov/doe/students/special-education/>. The evaluation plan and the Theory of Action are included within the 2021-22 SSIP Report.

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

YES

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

Based on the current data and infrastructure analysis, the evaluation plan is being revised. The current plan was based on internal evaluation completed by IDOE staff around the following questions:

How did IDOE implement the SSIP?

What activities were conducted in 2020-2021 under the SSIP?

How have stakeholders responded to the initiative?

What is the impact of the initiative on teacher practices and student outcomes as aligned with the SiMR?

What are recommendations for SSIP implementation and evaluation for 2021-2022?

The plan did not include specific components of evaluation design or data collection and with that, there was little information collected to effectively evidence responses to the questions posed.

Moving forward, the plan will utilize a systematic evaluation system that aligns with the logic model. The structure of the evaluation will include the addition of the following components:

Identification of the Evaluation Team: Clear roles and responsibilities developed.

The evaluation aligns to all activities/expected outcomes of the SSIP.

The evaluation will include the following components: (Evaluation questions are determined; Evaluation design is determined; Data Collection strategies are defined; Data Analysis plans are defined; Data Sharing plans are defined; and Timeline is established.)

See below the evaluation plan components including Outcome: Evaluation Question: Performance Indicator: Evaluation Design: Data Collection Method: Data Collection Tool to be used as part of the updates to the evaluation plan.

Outcome 1: Expand Stakeholder Teams

Evaluation Question: Do the teams represent diverse stakeholders?

Performance Indicator: Target Stakeholders identified

Evaluation Design: Process

Data Collection Method: Document analysis

Data Collection Tool: Targeted Stakeholder checklist

Outcome 2: Professional Development for Stakeholder Team

Evaluation Question: Do the teams understand their role and responsibilities as a stakeholder?

Performance Indicator: Effective stakeholder participation

Evaluation Design: Impact

Data Collection Method: Survey

Data Collection Tool: Survey

Outcome 3: Stakeholders maintain regular communication

Evaluation Question: Is communication happening at a frequency to effectively inform the SSIP?

Performance Indicator: Stakeholder input: Frequency of Communication

Evaluation Design: Impact

Data Collection Method: Survey

Data Collection Tool: Survey

Outcome 4: Stakeholders are provided the information needed to inform the SSIP

Evaluation Question: Is the information being provided to the stakeholders allowing for informed decision making?

Performance Indicator: Stakeholder input: Information and Data sharing

Evaluation Design: Impact

Data Collection Method: Survey

Data Collection Tool: Survey

Outcome 5: Dissemination of universal resources

Evaluation Question: Are universal resources effective?

Performance Indicator: Strategy implementation is effective

Evaluation Design: Outcome

Data Collection Method: Document Analysis

Data Collection Tool: Usability Measures

Outcome 6: Expansion of Intensive TA for targeted LEAs

Evaluation Question: Are the number of students being reached increasing?

Performance Indicator: Increased impact of the SSIP

Evaluation Design: Outcome

Data Collection Method: Records  
Data Collection Tools: Report: Student Participation; LEA Observation/Interview

Outcome 7: Intensive Technical Assistance  
Evaluation Question: Is intensive TA effective?  
Performance Indicator: Strategy implementation is effective  
Evaluation Design: Outcome  
Data Collection Method: Document Analysis and Records/  
Data Collection Tools: Usability Measures and Student Performance Records

Outcome 8: Project Timeline is met  
Evaluation Question: Is the SSIP being implemented per the timeline?  
Performance Indicator: Project activities are being completed per the timeline  
Evaluation Design: Outcome  
Data Collection Method: Document Analysis  
Data Collection Tool: Gantt Chart

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

While the previous evaluation questions related to what activities were conducted, the prior evaluation plan did not provide comprehensive data related to the questions around stakeholder input, impact on teacher practices and student outcomes which limited the ability of the stakeholder team to effectively inform implementation of the SSIP. The changes to the evaluation plan will address the specific components of each evaluation question to ensure that data collected informs implementation.

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

Indiana continued to implement the following infrastructure improvement strategies in the reporting period: Systemic Alignment; MTSS/UDL, and; Early Literacy.

Systemic Alignment: The purpose of Systemic Alignment is to align state and local efforts around the evidence-based practices (EBPs) targeted in the SSIP.

1. The State SSIP Team met and reviewed all previous SSIP-related stakeholder teams and condensed into two teams with both IDOE and external partners - the State SSIP Team and the Literacy Team. These teams oversaw the implementation and evaluation of the SSIP for the remainder of the reporting period.
2. The State SSIP Team and the Literacy Team conducted quarterly meetings with all partners, focusing on coordination and integration of SSIP activities. The State SSIP Team and the Literacy Team created common infrastructure for monitoring progress on each Improvement Strategy, including a digital Gantt Chart housing product timelines, meeting notes, and technical assistance dashboards for SSIP schools. Refinement of the State SSIP Team and Literacy Team collaboration is in progress, including location of other stakeholders to improve state-district-school-community collaborations.
3. The State SSIP Team initiated development of evaluation tools and metrics to monitor SSIP strategy implementation, after deciding to conduct SSIP evaluation internally. The evaluation process currently includes correspondence with the state-assigned Technical Assistance Coordinator, who will evaluate the SSIP progress.

MTSS/UDL: The purpose of MTSS/UDL is to support schools in the implementation of MTSS and UDL in all areas of curriculum for both general and special education students:

1. After analysis of the FFY 2019 and 2020 evaluation of the MTSS/UDL technical assistance outcomes in previous SSIP cohort schools, it was determined that the MTSS/UDL technical assistance would be phased out. Principles of MTSS and UDL were used in the creation of a revised Early Literacy Technical Assistance Plan and an Early Literacy Toolkit for statewide dissemination, as well as other universal and targeted technical assistance products made available in the RDA Toolkit.
2. Within the MTSS/UDL framework, the Early Literacy Implementation Toolkit was developed, providing an overview of Tier 1 Core Instruction, which includes resources for the identified early literacy Evidence-Based Practices listed below:
  - a) Culturally Responsive Pedagogy
  - b) Universal Design for Learning (UDL)
  - c) Multi-Tiered Systems of Support (MTSS)
  - d) Support for English Language Learners (ELL)
  - e) Oral Language & Vocabulary Instruction
  - f) Shared Reading & Listening Comprehension Instruction
  - g) Decoding/Encoding Instruction (Phonological Awareness, Alphabets, Phonics, & Spelling)
  - h) Oral Reading Fluency & Reading Comprehension Instruction
  - i) Drawing & Writing Instruction
  - j) Guidance for universal screeners and assessment for each EBP

This Toolkit was developed alongside a cross-walked list of Evidence-Based Practices, focusing on alignment with high-quality early literacy research, Division of Early Childhood high leverage practices, the Indiana State English Language Arts Standards, and the IREAD-3, ILEARN, and ISPROUT indicators. These universal technical assistance products build on the Literacy Framework for Indiana State Standards.

Early Literacy: The purpose of Early Literacy is to provide statewide universal technical assistance in early literacy (preschool through 3rd grade) EBPs, as well as targeted and intensive technical assistance for specific districts and schools:

1. The Literacy Team developed and disseminated the core set of literacy evidence-based practices (EBPs) aligned with state/national standards, providing full information regarding the identified early literacy Evidence-Based Practices defined above.
2. The Literacy Team developed a clearly defined list of target EBPs and related professional development that guide SSIP-related efforts to improve literacy outcomes for all students. Products include:
  - a) The Early Literacy Toolkit
  - b) The EBPs List - Crosswalk with National and State Standards

- c) An Early Literacy Blog
  - d) An Academic Impact Webinar Series (debuting February-August 2022)
  - e) Early Literacy Website (debuting February-August 2022)
3. The Literacy Team, in conjunction with the Early Childhood Center (ECC) at Indiana University Bloomington, is in the process of identifying model high-performing school districts implementing the literacy EBPs and demonstrating successful, equitable outcomes.
  4. The Literacy Team and the ECC are in the process of developing online district data dashboards that collapse service and assessment data to aid local decision making.
  5. The Literacy Team and the ECC are in the process of developing an online directory serving as another important TA resource, which will allow other schools to observe high quality practices in action.
  6. The Literacy Team and the ECC developed multiple early literacy training options in the RDA planning tool for districts with low iRead-3 results:
    - a) An Academic Impact Webinar Series, releasing new webinars from February to August, 2022
    - b) Literacy Data Consultation and Triage
    - c) One-Time Workshops
    - d) Full-Scale Professional Development through Implementation Science
  7. The State SSIP Team and the Literacy Team collaborated to create specific, data-based criteria for selecting schools for intensive early literacy technical assistance. The teams identified schools that had overall iRead-3 scores slightly below the state average for FFY 2018, but also demonstrated inequitable outcomes between the general education students and the special education students. The teams offered assistance to multiple corporations: Bartholomew Community School Corporation, Lakeland Community School Corporation, MSD Decatur Township, and Northeast Dubois Consolidated School District. Bartholomew and MSD Decatur declined to participate. Lakeland Community School Corporation initially agreed to participate, developed a Literacy Team, and initiated Exploration, but then district leadership elected to discontinue participation. Northeast Dubois Primary and Intermediate schools have created a Literacy Team and are in the process of completing Exploration through a Literacy Needs Assessment and initial EBP training at the beginning of 2022.

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

Improvement Strategy 1: Systemic Alignment

Short-Term Outcome A: The State SSIP Team met and reviewed all previous SSIP-related stakeholder teams and condensed into two teams with both IDOE and external partners - the State SSIP Team and the Literacy Team.

Short-Term Outcome B: The State SSIP Team and the Literacy Team conducted quarterly meetings with all partners, focusing on coordination and integration of SSIP activities.

Short-Term Outcome C: The State SSIP Team initiated development of evaluation tools and metrics to monitor SSIP strategy implementation.

Area of Systems Framework: This outcome directly impacts accountability/monitoring and quality standards. The State SSIP Team and the Literacy Team are in the process of developing and refining accountability metrics for monitoring progress in SSIP school technical assistance efforts, including universal technical assistance products, targeted technical assistance for RDA-identified schools.

Support for Systems Change: This outcome directly impacts achievement of the SiMR and sustainability of the systems improvement efforts.

Assessment of the efficacy of technical assistance efforts for early literacy with MTSS and UDL principles is measured, in part, by increased student achievement as a function of participation. Increased student achievement on the iRead-3 is Indiana's SiMR. Increased achievement will be supportive of sustainability in SSIP schools.

Improvement Strategy 2: MTSS/UDL

Short-Term Outcome A: MTSS/UDL practices were subsumed under Early Literacy as a combined Improvement Strategy.

Short-Term Outcome B: An Early Literacy Implementation Toolkit and an Evidence-Based Practices Research Cross-Walk were developed, to include the infusion of MTSS/UDL with research-based early literacy instruction. Other key products included an ongoing Early Literacy Blog, multiple RDA Toolkit options for RDA schools regarding early literacy and foundational principles, and specific early literacy technical assistance process pieces. The latter of these include a school literacy needs assessment based on the Early Literacy and Language Classroom Observation (ELLCO) tool, professional development readiness assessments, implementation team meeting templates, powerpoints, and evaluations, teacher surveys of early literacy practices, and processes for cross-referencing multiple student literacy performance assessments for evaluating school practices and policies.

Area of Systems Framework: This outcome directly impacts quality standards and technical assistance. It is critically important to have common understandings of what constitutes evidence-based instruction grounded in recent, quality research. This work has helped to delineate IDOE's quality standards regarding early literacy instruction.

Support for Systems Change: This outcome directly impacts achievement of the SiMR. Providing teachers, administrators, and districts with universal knowledge about quality literacy instruction increases the likelihood that better practices will be implemented in schools. Improving the quality of literacy instructional practices increases students' capacity to achieve grade-level literacy goals.

Improvement Strategy 3: Early Literacy

Short-Term Outcome A: IDOE terminated partnership with Region 8 Comprehensive Center relative to early literacy and SSIP implementation, in order to further focus specifically on early literacy implementation in SSIP schools. After leadership and staffing changes internally at IDOE, the Literacy Team is re-constituting to include multiple internal and external stakeholders, and further unification between General Education, Special Education, and Early Childhood is planned for the next reporting period.

Short-Term Outcome B: A core set of evidence-based early literacy practices were identified in a comprehensive review of the literature, then cross-walked with Indiana's English Language Arts standards, as well as the DEC recommended practices and the CEC high-leverage practices. These EBPs constitute the professional development framework for early literacy technical assistance provided to SSIP schools.

Short-Term Outcome C: High performing schools with equitable outcomes between Special Education and General Education students were initially identified with pre-COVID IREAD-3 data from the FFY 2018 reporting cycle. When the IREAD-3 data from the most recent data cycle was made available, the team determined it was necessary to re-conduct data analysis for identifying schools that maintained high, equitable outcomes. This research will be conducted, including case studies of identified schools and dissemination of the research findings, during the next reporting period.

Short-Term Outcome D: Online data dashboards were initially provided with outcomes relative to the pre-COVID IREAD-3 data. These dashboards are being re-created with the most recent IREAD-3 data, and will then be made publicly available in the next reporting period.

Short-Term Outcome E: Throughout the year, the Literacy Team developed Implementation Science informed early literacy technical assistance processes, including Implementation Team meeting forms and processes, Readiness Assessment indicators, and a school literacy needs assessment, adapted from the Early Literacy and Language Classroom Observation (ELLCO) K-3 and Preschool tools. These materials will be used in the next reporting period to provide more internal stakeholders and IRNs with early literacy technical assistance processes.

Short-Term Outcome F: Multiple training options were developed relative to early literacy with MTSS/UDL principles, and were included in the RDA Toolkit for schools needing to address IREAD-3 outcomes. These options include webinars, workshops, on-demand consultations, and longer-term technical assistance, and are currently provided with the Early Childhood Center at IU Bloomington's Institute on Disability and Community. In the next reporting period, the goal is to incorporate internal IDOE stakeholders on the Literacy Team in order to begin creating a comprehensive system of early

literacy professional development based on the initial training options created for the RDA Toolkit, as well as the EBPs Cross-Walk and the Early Literacy Toolkit.

Short-Term Outcome G: After recruitment efforts with five schools, two small, rural school districts agreed to initiate early literacy technical assistance within the Implementation Science Framework - Northeast Dubois Consolidated Schools and Lakeland School Corporation. After participating in multiple Implementation Team meetings, Lakeland elected to discontinue participation in order to focus on adopting a new literacy curriculum. Northeast Dubois' participation is ongoing, and will continue during the next reporting year.

Area of Systems Framework: These outcomes directly impact the provision and sustainability of professional development and technical assistance, as well as accountability and monitoring of technical assistance efforts and the implementation of quality standards. Throughout the reporting period, the IDOE has developed stronger systemic understandings of expectations for early literacy instruction and assessment practices, which has created the foundation for aligning technical assistance efforts amongst IRNs and across SSIP and RDA schools.

Support for Systems Change: These outcomes directly impact achievement of the SiMR and sustainability of systems improvement efforts. Focusing on improving instructional quality is very important for impacting students' academic outcomes. IDOE has accomplished better clarity of what is best practice for early literacy instruction that will lead to improved iRead-3 outcomes. The State SSIP Team and the Literacy Team now have the capacity to invite increased stakeholder participation and focus on systemic expansion of the literacy practices.

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

NO

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

Improvement Strategy 1: Systemic Alignment; Area of Systems Framework: Governance, Data, Accountability/Monitoring; Support for Systems Change: Sustainability of Systems Improvement Efforts, Scale-Up

Next Step A: Continue systemic productivity drivers focused on data collection, stakeholder feedback, and outcome monitoring. These will include: Quarterly State SSIP Team Meetings, Monthly Literacy Team Meetings, continued digital data storage, and accountability measurement. Anticipated outcomes include increased internal participation in the SSIP process, leading to systems that can increase the SSIP focus to multiple Indiana regions simultaneously. Doing so will also lead to improved transparency regarding SSIP schools' activities and outcomes. Furthermore, widening the SSIP network will facilitate greater stakeholder reach, with improved systems for involving parents, teachers, and administrators in SSIP facilitation.

Next Step B: Recruit additional internal IDOE representatives to participate in State SSIP and Literacy Team implementation, including continuing quarterly meetings and accountability drivers. In recruiting new internal members, the teams will provide onboarding, retention support and professional development for team members. With multiple internal organizational changes, the State SSIP Team and the Literacy Team had very small membership in the previous reporting period. A critical anticipated outcome will be the recruitment of multiple internal stakeholders, as well as external stakeholders such as Indiana teachers or administrators, to begin to participate in SSIP implementation. This will also include collecting external feedback on early literacy products associated with the SSIP in order to better reflect Indiana educational stakeholders' needs.

Next Step C: Improve analysis of the Technical Assistance reach and impact to inform effectiveness and subsequent students outcomes through the development of systems-level evaluation tools and metrics for consistently monitoring SSIP implementation, including common technical assistance practices, data collection methods, and a digital data warehouse for SSIP schools. Several evaluation tools were developed in the previous reporting period specifically for schools receiving intensive early literacy TA. What is still needed is systemic methods for analyzing the reach of other universal and targeted technical assistance products, and their potential impacts on Indiana schools. These methods will be developed as the State SSIP Team and the Literacy Team this reporting cycle.

Improvement Strategy 2: Early Literacy - Product, not Process; Evaluation Metrics of Products; Area of Systems Framework: Data, Quality Standards, Professional Development & Technical Assistance; Support for Systems Change: Achievement of the SiMR

Next Step A: Universal Technical Assistance in Early Literacy: The Early Childhood Center will develop and/or maintain multiple universal technical assistance products for IDOE related to the evidence-based practices (EBPs) in early literacy instruction and foundational systemic principles: (see EBPs described below). These products will include the ongoing Early Literacy Blog, an Early Literacy Website, an Academic Impact Webinar Series, and a Preschool Literacy Toolkit (a companion to the Early Literacy Toolkit developed for the previous reporting cycle). These universal technical assistance products will increase Indiana educational professionals' awareness of the early literacy evidence-based practices and foundational systemic principles for promoting school equity. Next Step B: Targeted Technical Assistance in Early Literacy: The Early Childhood Center will provide requested targeted technical assistance to school districts through options delineated in the RDA Toolkit. This technical assistance will refer specifically to the early literacy evidence-based practices and/or the foundational systemic principles, as needed by the specific schools. These on-demand products will include one-time "data triage" sessions to help schools identify early literacy needs through analyzing student data and half/whole-day workshops about the early literacy evidence-based practices and/or the foundational systemic principles. These targeted technical assistance products will increase individual schools' awareness of the early literacy evidence-based practices and the foundational systemic principles, preparing them to successfully analyze their schools' student data and seek further training in evidence-based teaching.

Next Step C: Intensive Technical Assistance in Early Literacy: The State SSIP Team and the Literacy Team have decided to modify recruitment efforts for the intensive early literacy technical assistance. The team will now be recruiting district participation from schools identified as not meeting RDA compliance relative to the IREAD-3. These schools will have access to the RDA Toolkit's host of early literacy training options, and schools will also have the option of engaging in intensive technical assistance as an SSIP school. The Early Childhood Center will provide intensive technical assistance in the early literacy evidence-based practices with the foundational systemic principles, using Implementation Science to direct the technical assistance process and Practice-Based Coaching to support individual teachers. Northeast Dubois Schools will continue their intensive technical assistance, after initiating in the previous reporting cycle. The Early Childhood Center can support two other intensive SSIP districts, which will be identified during this reporting period. Intensive technical assistance will increase individual teachers' capacity to provide evidence-based early literacy instruction in a supportive, equitable environment, leading to increased student literacy achievement and improved IREAD-3 outcomes.

Next Step D: Research in High Performing, Highly Equitable School Districts: The Early Childhood Center will conduct case study research in school districts with IREAD-3 outcomes higher than the state average, with more equitable outcomes between general education and special education students, and with high rates of preschool inclusion. The Early Childhood Center will analyze the 2020-21 IREAD-3 data to cross-reference these data points and locate these schools. Interviews with teachers, administrators, and instructional coaches will be conducted to determine these schools' literacy practices and foundational principles, and cross-referencing these with the identified early literacy evidence-based practices and foundational systemic principles guiding the SSIP work. Research findings will be disseminated in a variety of formats, which could include refereed publications, blog posts, and webinars. Research findings will be disseminated in a variety of formats, which could include refereed publications, blog posts, and webinars. These findings can inform where Indiana is achieving educational success, building relationships between high-performing districts and SSIP districts seeking comparable performance.

Next Step E: Early Literacy Data Dashboards, RDA Summits, and Data Dissemination: The Early Childhood Center will create online data dashboards detailing the iRead-3 outcomes for each Indiana school district, making outcomes publicly available and helping school districts to build awareness of the their own systemic performance. This data will also be disseminated throughout the state and used to help inform district needs, such as during RDA Summits for schools requiring early literacy technical assistance. This data dissemination will build awareness of school district outcomes, including disaggregated outcomes by general versus special education, race/ethnicity, gender, and language status. Awareness of district-level performance can inform regional and statewide needs for professional development and technical assistance.

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

Evidence-Based Practice 1: Intensive technical assistance to identified cohort districts with discrepancies between general and special education students' literacy outcomes  
Evidence-Based Practice 2: Implementation Science with Practice-Based Coaching to implement identified district-level change for SSIP schools  
Evidence-Based Practice 3: Selection of specific early literacy practices for SSIP schools' change focus as determined within the school developed action plan:  
Oral Language & Vocabulary Instruction  
Shared Reading & Listening Comprehension Instruction  
Decoding/Encoding Instruction (Phonological Awareness, Alphabets, Phonics, & Spelling)  
Oral Reading Fluency & Reading Comprehension Instruction  
Drawing & Writing Instruction  
Evidence-Based Practice 4: Selection of specific systemic foundational principles for SSIP schools' change focus:  
Universal Design for Learning (UDL)  
Multi-Tiered Systems of Support (MTSS)  
Culturally Responsive Pedagogy  
English Language Learner Supports  
Family Engagement

**Provide a summary of each evidence-based practices.**

Evidence-Based Practice 1: Intensive technical assistance to identified cohort districts with discrepancies between general and special education students' literacy outcomes  
Summary: The Early Childhood Center provides intensive technical assistance using the Implementation Science framework to engage in four phases of systems change: Exploration, Planning, Initial Implementation, and Full Implementation. Practice-Based Coaching in site-selected evidence-based practices is conducted to support teacher and administrator change in the targeted practice.

Evidence-Based Practice 2: Implementation Science with Practice-Based Coaching to implement identified district-level change for SSIP schools  
Summary: Implementation Science is a research-informed framework from the National Implementation Research Network. This four-phase framework supports districts in adopting sustainable change by creating Implementation Teams, providing quality training in a selected evidence-based practice, and then supporting development through Practice-Based Coaching. Practice-Based Coaching is also a research-informed approach between coach and practitioner that focuses on goal-setting, observation of practice, and evaluation of practice.

Evidence-Based Practice 3: Selection of specific early literacy practices for SSIP schools' change focus:  
Oral Language & Vocabulary Instruction  
Summary: The body of literacy research demonstrates that both oral language skills and vocabulary volume in early childhood are critical for students' later reading and writing achievement. Oral language and vocabulary are teachable skills, and direct instruction - particularly through specific word instruction and discussion-based teaching - are important for students' literacy development.  
Shared Reading & Listening Comprehension Instruction  
Summary: The body of literacy research demonstrates that children develop language comprehension and listening skills through participation in teacher-led, interactive reading of complex narrative and informational texts - particularly through the use of Dialogic Reading in preschool and kindergarten, and through Interactive Reading in 1st through 3rd grade. Language comprehension is fundamental to students' later independent reading comprehension.  
Decoding/Encoding Instruction (Phonological Awareness, Alphabets, Phonics, & Spelling)  
Summary: The body of literacy research demonstrates that children learn to read and write text through direct, sequential, and manipulative instruction in phonological awareness (to develop awareness of the individual sounds, or phonemes, in words), alphabets (to develop sound-symbol correspondence), phonics (to decode words by sound-symbol patterns and syllabic rules), and spelling (to encode words by sound-symbol patterns and syllabic rules). Progressive decoding/encoding instruction is necessary for students' later oral reading fluency development.  
Oral Reading Fluency & Reading Comprehension Instruction  
Summary: The body of literacy research demonstrates that children require direct practice in reading text fluently and accurately, from decodable texts based on learning phonics principles to progressively more complex texts from grade-to-grade. As students read aloud and silently to practice their fluency in appropriately complex text, students must also be directly taught comprehension strategies (Using Background Knowledge, Asking and Answering Questions, Making Inferences, Predicting, Summarizing, Visualizing/Mental Modeling, and Self-Monitoring Understanding) in order to develop their independent reading comprehension.  
Drawing & Writing Instruction  
Summary: The body of literacy research demonstrates that children require direct instruction in both grammar and syntax rules governing sentence, paragraph, and text construction, as well as experience in the Writing Process (Planning, Drafting, Sharing & Evaluating, Revising & Editing, and Publishing). Reading and writing are reciprocal skills, and students require systematic, direct instruction in both.

Evidence-Based Practice 4: Selection of specific systemic foundational principles for SSIP schools' change focus:  
Universal Design for Learning (UDL)  
Summary: UDL is a research-informed framework for increasing the accessibility of instruction and assessment for all students, but especially students with disabilities, culturally diverse students, and English language learners. UDL emphasizes adaptations in Engagement, Representation, and Action & Expression, focusing on how students are able to Access, Build, and Internalize skills and knowledge.  
Multi-Tiered Systems of Support (MTSS)  
Summary: MTSS is a three-tiered, research-informed framework for creating school and classroom infrastructures that lead to increasing levels of instructional intensity based on students' demonstrated learning needs. Tier I universal instruction is provided to all children through a guaranteed, viable curriculum using accessible, evidence-based instructional practices. Tier II targeted instruction is provided to any children demonstrating through assessment that extra support is required in a given skill or knowledge target, ideally through small group instruction with frequent progress monitoring. Tier III intensive instruction is provided to any children demonstrating through assessment that intensive foundational skill-building is required, ideally through one-one tutoring with frequent progress monitoring.  
Culturally Responsive Pedagogy  
Summary: Culturally responsive pedagogy is a research-informed orientation toward instruction that emphasizes inclusive, culturally relative instructional practices and materials for all children. Culturally responsive classrooms emphasize universal representation for all students in the classroom, and also asks that teachers are reflective, critical practitioners who pay attention to ways that students may or may not be fully represented in the instructional process and through classroom materials.  
English Language Learner Supports  
Summary: Supportive school environments for English language learners demonstrate value for students' first languages and cultural/racial/ethnic identities. Students are provided necessary instruction and support for acquiring English language proficiency, including intensive vocabulary and oral language instruction, and adaptive instruction to support access to the English curriculum. Simultaneously, students and families are supported in

growing their first language proficiency and in having their first languages represented in the school community.

#### Family Engagement

Summary: Supportive school environments seek active family engagement through a variety of methods, including multimodal, adaptive communication practices, translated communications, and expansive opportunities to participate in school activities. Schools also communicate openly and approachably about learning standards, behavior, school policies and procedures, and student performance. Positive family relationships are emphasized, and schools continuously evaluate achievement of these relationships. Diverse family structures are embraced and invited to participate in school life.

#### **Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.**

Evidence-Based Practice 1: Intensive technical assistance to identified cohort districts with discrepancies between general and special education students' literacy outcomes

Impact on SiMR: Intensive technical assistance equips teachers and administrators to provide evidence-based early literacy instruction. When students are taught with evidence-based literacy practices, they are more likely to develop early literacy proficiency and therefore increase their literacy achievement across time.

Evidence-Based Practice 2: Implementation Science with Practice-Based Coaching to implement identified district-level change for SSIP schools

Impact on SiMR: Implementation Science with Practice-Based Coaching is focused on increasing student outcomes through instructional change and innovation. Student data is regularly used to ensure that instructional change is impacting student achievement, to include standardized assessments. With appropriate implementation, early literacy scores should be positively impacted by the process.

Evidence-Based Practice 3: Selection of specific early literacy practices for SSIP schools' change focus:

Oral Language & Vocabulary Instruction

Shared Reading & Listening Comprehension Instruction

Decoding/Encoding Instruction (Phonological Awareness, Alphabets, Phonics, & Spelling)

Oral Reading Fluency & Reading Comprehension Instruction

Drawing & Writing Instruction

Impact on SiMR: All of the above evidence-based practices are critically important for students' achievement of conventional reading and writing. When quality instruction is provided in the above areas, in conjunction with the systemic foundational principles below, schools should see increased student literacy achievement. Similarly, schools should also be able to more accurately and efficiently identify students who are not making expected learning gains, and provide differentiated instruction to bridge learning gaps.

Evidence-Based Practice 4: Selection of specific systemic foundational principles for SSIP schools' change focus:

Universal Design for Learning (UDL)

Multi-Tiered Systems of Support (MTSS)

Culturally Responsive Pedagogy

English Language Learner Supports

Family Engagement

Impact on SiMR: All of the above systemic foundational principles are necessary for ensuring that equity is achieved in school contexts. These principles focus especially on students that are often underrepresented and marginalized in school systems, and promote equitable practices for adapting and refining practices to meet a greater diversity of needs. When increasing equitable practices, schools should see gains in student literacy achievement, while also identifying areas in which students may be inequitably serviced and make necessary systemic changes.

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

The following qualitative data tools were developed to monitor SSIP schools' implementation of the Implementation Science change process:

##### Professional Development Readiness Assessment:

In order to demonstrate readiness for the technical assistance process, SSIP schools' Implementation Teams were interviewed by the Early Childhood Center during an Implementation Team Meeting. The following indicators were developed to determine readiness:

School/Team can develop a vision that supports the technical assistance focus

School/Team can commit to multiple-month technical assistance to plan, implement, and support district efforts to increase effective early literacy practices PK-3

School/Team can commit to equity-based, inclusive PK-3 literacy educational reform

School/Team can commit to planning infrastructure improvements, monitor progress, make data-based decisions, and develop a communication plan to keep district stakeholders informed

School/Team can meet regularly to Explore, Plan, Pilot and Expand the initiative

School/Team can commit to developing a data review plan (including child outcomes, classroom practices fidelity measure, stakeholder feedback on communication plan, family and practitioner satisfaction) for continued improvement process

School/Team can support the development of Building Team(s) and designate representatives to the district team to monitor and share building-level practice implementation and support building staff

School/Team can coordinate professional development resources (including time to participate in training and coaching, determine alignment of the initiative with other district initiatives, and prioritization of the literacy evidence-based practices)

School/Team will ensure that staff are adequately trained in the selected evidence-based early literacy practices and engage in coaching

School/Team will commit to a long-term timeline for accomplishing the technical assistance tasks

School/Team will commit to collecting teacher and student data to assess effectiveness of the training and coaching

The assessment is used to determine districts' readiness to participate in technical assistance, as well as to identify areas of infrastructure improvement as a part of the technical assistance process.

##### Implementation Team Evaluations:

In order to evaluate effectiveness of the technical assistance process, SSIP schools' Implementation Teams were given a qualitative survey asking:

How comfortable do you feel with the exploration process thus far?

What questions do you still have about the exploration process?

What could we do to improve the exploration experience for you?

How well do you understand the importance of using Implementation Science to guide this work?

What questions do you still have about the importance of Implementation Science?

What could we do to improve the use of Implementation Science with you?

How useful are the PowerPoints during our Literacy Team meetings?

We rely heavily on discussion/conversation during our meetings. What structures do you prefer to help facilitate conversations?

Is the meeting time and format working for you? If not, what could we do to improve the meeting time and/or format?

Responses indicated general understandings of the rationale for Implementation Science, but mixed responses about the length of time and commitment required for engaging the Implementation Science process. In particular, some questioned the “why” of exploration, leading the Early Childhood Center to clarify the importance of including teachers and administrators in a full data analysis process to determine micro-level needs in the school. Given that schools are already engaging heavily in literacy instruction, it can be difficult for team members to initially understand the rationale for diving more deeply into data about student achievement and teacher practices. This feedback, however, has provided the Early Childhood Center with necessary understandings about what schools need to feel “productive” and “encouraged” in the Implementation Science process, including earlier roll-out of universal resources and trainings that could help teachers feel like they are accomplishing things earlier - even as the focal evidence-based practice is still being identified by the Implementation Team during the needs assessment and data analysis processes.

#### Student Data Analysis:

Student data analysis is largely driven by site-level assessment practices, in combination with the IREAD-3 data from each school. The purpose of multi-point data analysis is to identify highly specific literacy needs. For example, aggregated IREAS-3 data for Northeast Dubois indicated 85.5% proficiency on the 2019 assessment- far above the state average. However, disaggregated data indicated that higher income students were 92% proficient while low income students were 71.4% proficient - indicating a potential equity gap in provision of accessible early literacy instruction. Further cross-referencing this with the 2019 ILEARN (Grade 3) indicated another startling outcome - only 17.3% of special education students were performing proficiently, versus 48.6% of general education students. Both of these outcomes are also significant for being much lower than the IREAD-3 outcomes. Considering the foci of these tests provided insights into Northeast Dubois’ potential technical assistance needs, to include writing instruction (which is only assessed on the ILEARN), and UDL-focused early literacy instruction that will better meet the needs of special education students.

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

No additional data was collected.

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

Evidence-Based Practice 1: Intensive technical assistance will continue to be provided to identified cohort districts with discrepancies between general and special education students’ literacy outcomes.

Evidence-Based Practice 2: Intensive technical assistance will continue to be framed through Implementation Science with Practice-Based Coaching to implement identified district-level change for SSIP schools.

Anticipated Outcomes: The Early Childhood Center aims to scale-up intensive technical assistance by engaging two new school districts in early literacy professional development and continuing technical assistance with Northeast Dubois Schools for their second year.

Impact on SiMR: Intensive technical assistance should result, long-term, in increased iRead-3 performance for students from SSIP schools. SSIP schools’ participating teachers should increase their instructional capacity in delivering evidence-based literacy instruction with quality practices and appropriate focus.

Evidence-Based Practice 3: New universal resources will be developed to increase dissemination of the early literacy evidence-based practices, which could include a Preschool Early Literacy Toolkit, webinars, and other teaching-focused materials. Dissemination of the Early Literacy Toolkit K-3 will also be emphasized.

Anticipated Outcomes: Increasing universal resources should result in increased access to the evidence-based practices by Indiana schools, potentially leading to schools seeking resources for implementing sustainable instructional change and improved implementation.

Impact on SiMR: Dissemination of universal resources regarding early literacy should indirectly impact the SiMR by increasing the amount of teachers and schools who are building their awareness of evidence-based early literacy instruction.

Evidence-Based Practice 4: The foundational systemic principles will be consistently embedded into universal resources regarding the early literacy evidence-based practices, which could include a Preschool Early Literacy Toolkit, webinars, and other teaching-focused materials.

Anticipated Outcomes: Increasing universal resources should result in increased access to the foundational systemic principles by Indiana schools, potentially leading to schools seeking resources for implementing sustainable infrastructure change.

Impact on SiMR: Dissemination of universal resources regarding early literacy informed by the foundational systemic principles should indirectly impact the SiMR by increasing the amount of teachers and schools who are building their awareness of the foundational systemic principles. In particular, more equity-focused literacy instruction could impact underrepresented students’ access to quality literacy instruction.

### **Section C: Stakeholder Engagement**

#### **Description of Stakeholder Input**

IDOE’s Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the new six-year cycle of the SPP/APR. These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. A sampling of outside groups included: ARC of Indiana, INSOURCE, Family Voices, Decoding Dyslexia, and Down Syndrome Indiana. IDOE leveraged these stakeholders, with their breadth and depth of knowledge, to help inform the adoption of new rigorous state targets.

Prior to initiating these meetings, IDOE advertised broadly using: state and local newsletters, Indiana’s parent training and information center, other state technical assistance resource centers, the State Advisory Council, state special education hearing officer and mediator listservs, Indiana CASE, and other

State agencies. These efforts resulted in the participation of a diverse group of parents, students, educators, related service providers, and other stakeholders who represent a range of racial, ethnic, linguistic, rural, urban, suburban, ability, and student age (pre-K through age 22) populations.

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

The specific strategies implemented to engage stakeholders include:

Availability of SSIP related documents through IDOE web based repositories,  
IDOE hosted virtual stakeholder feedback sessions,  
IDOE representation on related boards/committees,  
SSIP stakeholder teams (included in the SSIP), and  
Feedback collected from stakeholders participating in the SSIP.



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

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

The concerns expressed by stakeholders were included as part of the infrastructure analysis. Many concerns have been addressed as part of the revisions to the SSIP and to the evaluation plan.

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

All activities the State intends to implement have been described within the report.

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

N/A

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

Indiana has experienced significant barriers impacting the implementation of the SSIP. These barriers of highest impact are staff turn-over and school district participation.

At the time of the previous SSIP submission, the plan included expanding the SSIP Stakeholder Team to bring in expertise on literacy EBPs and to allow for internal evaluation of the plan. Throughout the year to present, all members of both the Stakeholder Team and the Literacy Team, with the exception of one contracted participant have left employment or moved into new positions. In addition to the significant loss of team members, the roles that were represented within the teams have been eliminated or have remained vacant. Another barrier related to staff is the timing of the departures. Several of the key team members left just prior to the release of resources related to the development of the current report package with few documents or artifacts available demonstrating implementation. The staff now responsible for development of the plan were not previously involved in the SSIP, and are working diligently to not only become familiar with the SSIP, but to ascertain the information needed to effectively report on the plan and develop the upcoming work.

To address the barrier of SSIP Team members, IDOE is undergoing organizational restructuring led by an external partner. The goal of this work is to effectively prioritize and plan for the projects to be implemented by the department. The SSIP will be a priority moving forward with attention given to the resources needed to address the barriers that have impacted the plan during this year. External evaluation partners will be engaged to support the development of processes and procedures to coordinate data collection and analysis and use of implementation data.

School district participation has also been a barrier impacting the progress of the SSIP. A strategy identified in the previous SSIP included the selection of 4-6 districts based on need to receive intensive technical assistance. There were 7 school districts identified and after numerous contacts with the districts taking several months, 2 districts agreed to participate. After 3 months, one of the districts withdrew from the project. Reasons for the withdrawal include limited staffing within the district impacting the ability to participate, difficulty aligning the EBPs included within the SSIP to the school improvement plan and difficulty completing the intensive technical assistance in a virtual format.

To address the barrier of district participation, IDOE intends to engage a broader grade span with a focus on preschool as data indicates there is a greater need for personnel development. While the SiMR would remain the same, additional data collection would be utilized to determine the effectiveness and long term impacts of the SSIP. There will also be increased communication with the participants to ensure the district understands to participation expectations and expected outcomes prior to beginning the project. Also included in the increased communication will be participant satisfaction measures to address any concerns from the district related to participation.

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

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

None

## **17 - OSEP Response**

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## **17 - Required Actions**

## **Certification**

### **Instructions**

Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

#### **Certify**

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

#### **Select the certifier's role:**

Designated by the Chief State School Officer to certify

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

#### **Name:**

Dr. Nancy Holsapple

#### **Title:**

Special Education Director

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#### **Submitted on:**

04/28/22 9:26:51 AM