

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2021**

Indiana



PART B DUE February 1, 2023

**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 Department of Education (IDOE) is the designated State Educational Agency (SEA) and includes seven (7) departments (Information Technology (IT), Child Nutrition Program, Finance & Operations, Academics, Student Pathways & Opportunities, External Affairs & Partnerships, and Legal). The Office of Special Education (OSE) is part of the Academics Department and oversees the implementation of the Individuals with Disabilities Education Act (IDEA). The OSE is comprised of Fiscal and Monitoring & Compliance sections and works in close partnership with the Office of Student Supports and Accessibility (OSSA) related to Technical Assistance and the Legal Department Dispute Resolution section. For the IDOE organizational chart, please see: <https://media.doe.in.gov/news/idoe-org-chart-external-overview.pdf>. The OSE structure has been developed to align with the Office of Special Education Programs (OSEP) Differentiated Monitoring and Support (DMS 2.0) Framework ensuring the eight (8) components of general supervision systems are implemented as intended.

The OSE continues to strengthen collaboration with all IDOE departments through projects such as Data Modernization (IT), Cross Department Monitoring (Student Pathways & Opportunities), Stakeholder Communication (External Affairs & Partnerships) and Teacher Recruitment/Retention (Education Licensing and Higher Education Prep Programs).

In addition to the internal IDOE staff assigned to programs serving students with disabilities, Indiana develops contracts with several entities comprising the Indiana Resource Network (IRN). These entities provide Technical Assistance (TA) and Professional Development (PD) under the direction of OSE and OSSA. IDOE also celebrates a long and productive relationship with our state Parent Training and Information Center (IN*SOURCE). As part of the collaboration between IDOE and IN*SOURCE, an IN*SOURCE staff member serves as the designated liaison to the OSE attending staff meetings and supporting specific projects to foster parent involvement in the general supervision system.

Additional information related to data collection and reporting

IDOE has implemented the LINK Initiative (<https://www.in.gov/idoe/it/link-initiative/>) which is a multi-year effort involving five component projects aimed at improving support for schools in order to leverage information technology to advance the vision and mission of the IDOE. As part of this initiative, Data Exchange was developed for the purpose of improving the process of data transfer and certification for student and educator level data submitted by schools and school corporations including data that specifically measures implementation of services for students with disabilities. An additional system, EdData, has recently been developed allowing for the secure release of data utilized as part of IDOE's Results Driven Accountability System (RDA) which is the Integrated Monitoring procedure for annual LEA determination. This has allowed for more accurate, timely and usable data for LEAs related to the provision of services for students with disabilities.

Number of Districts in your State/Territory during reporting year

411

General Supervision System:

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

OSEP's 8 key components for improving educational results and functional outcomes for all students with disabilities guides the structure and implementation of IDOE programming. Each of these components is reviewed individually.

1)Fiscal Management

Part B LEA allocations are calculated in accordance with 34CFR §300.705 and 34CFR §300.815 and 300.816. Once calculated, allocations are posted to IDOE's internal online 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 management system for initial review by a fiscal specialist. Once approved, a second fiscal specialist 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 an email granting approval of funds and ability to submit for reimbursement. If an LEA requests a modification to its approved grant budget, IDOE fiscal specialists use a two-party review to ensure accuracy and allowability. The reimbursement template requires LEAs to report the number of students receiving CCEIS and the number in that category who qualify for an IEP. To ensure that funds are used in the manner approved and required by IDEA, reimbursement requests are differentiated by scope (Special Education, CCEIS, and Proportionate Share). In order for fiscal specialists to verify Part B funds were spent in the manner authorized, LEAs must submit a final expenditure report along with the final reimbursement request at the end of a grant cycle. LEAs are contacted when funds are spent in an unapproved manner and required to return funds for repayment to US Department of Education. IDOE utilizes a portion of allocated Part B funds on administrative costs and discretionary activities, including contracts with entities to provide TA and PD to LEAs.

2)Integrated Monitoring

IDOE conducts monitoring focused on improving educational results and functional outcomes for all students with disabilities, and ensuring that LEAs meet the requirements of IDEA. IDOE monitors LEAs through multiple collection methods and sources to gather information used to evaluate the performance of LEAs. One example is the State data system which allows for the collection of data for analysis and identification of programs for monitoring.

IDOE has developed the Results Driven Accountability system to make annual LEA determinations. This system includes a compliance and results index. Each of the indexes are composed of required/prioritized measures (determined with stakeholder input) utilizing data related to IDEA, Elementary and Secondary Education Act (ESEA) and other State measures. The compliance indicators are assigned a status rating and both the compliance and results indexes are assigned points and weighted as part of a calculation by which the LEA determination and differentiated support are assigned.

Following notification of determination, LEAs identified as needs assistance or intervention are required to complete root cause analysis and corrective action specific to the Indicator finding of noncompliance. LEAs identified as needing targeted or intensive support related to results outcomes are offered TA/PD to address areas of improvement.

The OSE staff is completing a systematic review process facilitated by the National Center for Systemic Improvement (NCSI) that includes engagement of a stakeholder group representing invested organizations to improve the State general supervision system. This review targeted Monitoring, Compliance, and Improvement components of the system. Improvement strategies extend to all general supervision systems.

3)Sustaining Compliance & Improvement

This system incorporates a two prong approach to support LEAs identified as having noncompliance. An LEA found to have noncompliance must correct individual cases of noncompliance, as appropriate and complete subsequent root cause analysis and develop a corrective action plan to demonstrate implementation of regulatory requirements. The plan must be implemented, and noncompliance corrected as soon as possible but no later than one year of the finding. If the noncompliance is not corrected within 1 year, the LEA is identified as continued noncompliance and after a second year, identified as longstanding. LEAs with multiple years of noncompliance are engaged more intensively to ensure correction and ongoing compliance with regulatory requirements.

An important component of this plan is the individual and targeted nature of the support. OSE staff serve as the point of contact for LEAs identified to need intensive support so there is ongoing review and facilitation of necessary support. This is accomplished through collaboration within IDOE offices and Indiana Resource Network (IRN) TA/PD providers.

In addition to a focus on LEAs in need of support, OSE recognizes that collaboration with LEAs identified as high-performing is also imperative. This allows OSE to incentivize LEAs through recognition, understand the use of proven/effective strategies, and is a potential resource for LEAs in need of support.

4) Dispute Resolution

IDOE encourages communication between parents and LEAs when a dispute arises. When informal efforts prove unsuccessful, IDOE makes available all IDEA's dispute resolution mechanisms: mediation, state complaint, and due process hearing. In addition to the 3 processes identified in Article 7, IDOE also makes available Facilitated IEP services. IDOE works with LEAs and IN*SOURCE to ensure that parents receive and understand their rights and responsibilities.

5) State Performance Plan/Annual Performance Report (SPP/APR)

The SPP/APR is a multi-faceted plan that is used to evaluate the State's efforts to implement the requirements and purposes of the IDEA and describes how the state will improve implementation. The State ensures that required actions identified by OSEP are addressed in a manner that is sustainable.

The SPP/APR is communicated with stakeholders to demonstrate progress toward targets and facilitate discussion around areas in need of improvement. This is one of the mechanisms utilized to guide State policies and procedures including the collection and analysis of valid/reliable data.

6) Data

LEAs submit data regarding students, personnel, and other required information via an online data portal. Data, including 618 data, is used to inform projects in which IDOE-OSE is involved, with a focus on components of general supervision. IDOE offers training on specific data topics to support local users' understanding of data submission processes. On-demand documents have also been developed to offer an additional format. Required data is publicly posted on the IDOE special education website. Specific data requests from members of the general public, school personnel, State Board of Education, and legislators are provided following applicable confidentiality laws.

7) Implementation of Policies & Procedures

Indiana's special education rules are found in Indiana Code 511AC 7-32 to 49. Article 7 is aligned with IDEA and implemented by LEAs. IDOE encourages LEAs to proactively seek assistance to implement state policies. A phone line/email account is monitored by staff to assist LEAs in the implementation of policies and procedures. Based on the data from inquiries, guidance resources are developed and posted on the state special education website.

The review of implementation of policies and procedures at the LEA level is incorporated into all systems. Programs found to have issues related to the implementation of policies and procedures are provided assistance as part of corrective action.

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.

As noted previously, IDOE has developed the Office of Student Supports & Accessibility to specifically address the IDOE's system of technical assistance and professional development. This includes the use of data informed practices based on the State priorities and the Integrated Monitoring System procedures utilized to identify noncompliance and differentiated support needs of 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 specialists offer various levels of TA and/or PD. TA and PD 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 (<https://www.in.gov/doe/students/special-education/>; <https://www.indianaieprc.org/>; <https://www.patinsproject.org/>; <https://insource.org/>) 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 the 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 addressed. 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 identified as experiencing systemic issues 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.

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

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

The Indiana Resource Center for Families with Special Needs, or IN*SOURCE, 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 Promoting Achievement through Technology and Instruction for all Students (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 National Instructional Materials Accessibility Standard (NIMAS) regulations of the IDEA 2004.

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.

The State Professional Development System is defined as 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 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.

PD is considered within the context of the procedures outlined in the TA section on the Introduction. As individual LEA plans are developed, the decision to provide TA versus PD is outlined.

As noted previously, all IDOE sections involved in the implementation of special education consider the need for PD related to the respective areas of focus. For example, the Monitoring & Compliance section provides live sessions and on-demand resources related specifically to RDA and the Fiscal section provides live sessions and on-demand resources related to grant development and management.

IDOE staff are also committed to personal PD to support continuous improvement. Staff regularly attend events sponsored by OSEP funding TA centers to ensure competency.

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).

As part of the FFY 2020 SPP/APR submission IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the 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.

During FFY 2021, the baseline for Indicator 3B/High School was reviewed related to a change in the assessment used to meet this requirement.

Stakeholders were engaged through a survey process shared through multiple communication methods and by various agencies. The state is maintaining the targets for all other indicators established in FFY 2020 through the process described previously

In addition, IDOE's Office of Special Education (OSE) has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation.

Examples of planned project-specific events include the review of the General Supervision system and the State Systemic Improvement Plan (SSIP) implementation. As mentioned previously, the Monitoring & Compliance section of OSE engaged the NCSI to support the Leveraging General Supervision Systems to Improve Student Outcomes Process. This process includes the engagement of a stakeholder group to explore grounding assumptions related to general supervision and from that process, establish a shared vision for the system. Following a review of mapping, comparing and planning, the stakeholders convened to review and provide additional feedback. This included a survey

(<https://www.jotform.com/222015791178153>) sent through multiple communication outlets to reach a broad stakeholder group related to the specific Indicators and the level of priority. While this survey was primarily related to LEA annual determination, it allowed for input related to specific Indicator processes and priorities. The SSIP stakeholders have also been engaged as described within the implementation plan to effectively analyze and guide the implementation of the SSIP.

OSE has also focused on naturally occurring opportunities to engage stakeholders. For example, when notifying LEAs of correction of noncompliance, the LEA has been asked to provide feedback on the process specifically requesting feedback on what components were effective, not effective and any suggestions for improvement of the process. Given the real-time, factual nature of these discussions, this has proved to be an effective mechanism to engage stakeholders that results in meaningful, immediate implementation of improved practices.

As mentioned earlier, IDOE benefits from ongoing collaboration with the parent training center and this has resulted in frequent opportunities to engage parents as stakeholders. IDOE staff have partnered with IN*SOURCE on a regular basis to offer sessions related to specific topics (transition, early childhood transition, etc.) and during these sessions, parents are able to not only learn more about the topics but provide feedback and input.

IDOE also utilizes several recurring mechanisms to share information and request feedback from stakeholders. IDOE provides a weekly update that includes pertinent information from across the department and allows for stakeholders to reach out through email or complete specific forms created to generate feedback. This same format is also utilized through a monthly newsletter sent from the OSE.

Overall, the OSE is committed to approaching all communication as an opportunity to receive feedback and seek input from all stakeholders.

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

NO

Number of Parent Members:

24

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.

As mentioned earlier, IDOE benefits from ongoing collaboration with the parent training center and this has resulted in frequent opportunities to engage parents as stakeholders. IDOE staff have partnered with IN*SOURCE on a regular basis to offer sessions related to specific topics (transition, early childhood transition, etc.) and during these sessions, parents are able to not only learn more about the topics but provide feedback.

IDOE also utilizes several recurring mechanisms to share information and request feedback from stakeholders. IDOE provides a weekly update that includes pertinent information from across the department and allows parents to reach out through email or complete specific forms created to generate feedback. This same format is also utilized through a monthly newsletter sent from the OSE.

Overall, the OSE is committed to approaching all communication as an opportunity to receive feedback from all parents.

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.

In planning discussions with IN*SOURCE, (Indiana's Parent Training and Information Center) strategies to engage diverse stakeholders is considered. Communicating with a wide range of organizations to advertise planned events is the goal. With this, monitoring of attendance to attempt to determine the most effective means of advertising and communicating events is completed. Other methods attempted include offering varying times of the day and days of the week, advertising well in advance of the event, and requesting that other organizations communicating with families also advertise planned events. Again, this information is gathered along with feedback from participants to encourage parent involvement.

Activities conducted to increase the capacity of diverse group of parents includes collaboration with IN*SOURCE, the State has provided training sessions to parents related to specific Indicator topics. Session topics include early childhood transition, post-secondary transition and other relevant topics/events. These sessions are offered at two different times (morning and evening) to offer multiple opportunities to meet the needs of families. The session format allows for presentation of relevant information from the state and the opportunity for parents to engage in discussion and offer feedback. The goal if for parents to obtain pertinent information so that they can be an informed, active participant in the special education process in the state and the local community.

In addition to engaging with the state parent training center (IN*SOURCE), parent members of the State Advisory Council have been invited to participate in all stakeholder activities and subsequently informed of the outcomes of stakeholder input.

In reviewing the outcomes of the activities discussed, there is a need to continue addressing the engagement of diverse groups of parents as participation data indicates a lack or representation consistent with state demographics. IDOE plans to seek out additional community partners to assist in reaching more diverse representation.

Soliciting Public Input:

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

The mechanisms for soliciting public input are completed through advertisement via various communication outlets- IDOE weekly newsletter, OSE monthly newsletter, direct email communication and IRN partner media releases/outlets.

The timelines are based on the stakeholder plan that has been developed by IDOE and related to specific monitoring process timelines. For example, communications related to the SSIP are recurring based on the stakeholder engagement plan (email communication/reminder or upcoming event followed by a planned live (virtual) stakeholder meeting).

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.

OSE communicates information related to the SPP/APR via the website (<https://www.in.gov/dae/students/special-education/>). Announcements related to postings occur within established communication outlets (as described previously) and through IRN partner outlets.

Reporting to the Public

How and where the State reported to the public on the FFY 2020 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 2020 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 2020 APR in 2022, is available.

The State reported the FFY 2020 performance of each LEA located in the State through public posting. The posting was made available at <https://www.in.gov/dae/students/special-education/> under the heading Special Education Data.

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/dae/students/special-education/> under the heading State Performance Plan/Annual Performance Report.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), 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	2016	2017	2018	2019	2020
Target >=	72.00%	74.00%	76.00%	76.50%	83.88%
Data	72.03%	70.87%	72.64%	71.44%	83.33%

Targets

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

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana’s General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Graduation Rate. Feedback from the survey indicates the need for greater emphasis on Graduation Rate in the Results Matrix for RDA. Based on this feedback, OSE adjusted the weight assigned to Graduation Rate scoring as part of the 2022 RDA release and will continue to seek stakeholder input related to additional changes in the 2023 RDA release.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	5,305
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	677
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	9

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	659

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
5,305	6,650	83.33%	84.33%	79.77%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Indiana students graduated at a rate that was 3.56% lower than FFY 2020. Based on analysis of the graduation rate data and contributing factors, it is hypothesized that slippage is due to the number of students who, in FFY 2020, were not required to complete the statewide assessment by order of the governor and the removal of an assessment proficiency requirement as a graduation requirement for this cohort. This resulted in an unsustainable increase in the number of students meeting graduation requirements who previously would not have been eligible to graduate.

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 students who are nondisabled.

For more information regarding Indiana graduation requirements see: <https://www.in.gov/doi/files/Grad-Req-2019-2022.pdf>; <https://www.in.gov/doi/files/graduation-requirements.pdf>

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)

Graduation Rate data was impacted in FFY 2020 by the COVID-19 pandemic. Due to the waivers/flexibilities granted for the FFY 2020 graduation cohort, the graduation rate for the year was inflated. When considering graduation rate trend data removing the FFY 2020 data, there was an 8.33% increase from FFY 2019 to FFY 2021.

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

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

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

Instructions

Sampling is not allowed.

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), and compare the results to the target.

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

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

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.

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2018	7.50%

FFY	2016	2017	2018	2019	2020
Target <=	7.51%	7.01%	6.51%	6.01%	7.25%
Data	5.90%	7.04%	7.50%	9.86%	5.44%

Targets

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

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana’s General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Dropout Rate. Feedback from the survey indicates respondents believe the emphasis should continue to remain on other factors in the Results Matrix for RDA, but continue to closely monitor the data for any trends that need to be addressed related to drop out rates.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	5,305
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	677
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	9

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	659

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
659	6,650	5.44%	7.00%	9.91%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Indiana students dropped out of school at a rate that was 4.47% higher than FFY 2020. Based on analysis of the graduation rate data and contributing factors, it is hypothesized that slippage is due to the number of students who, in FFY 2020, were not required to complete the statewide assessment by order of the governor and the removal of an assessment proficiency requirement as a graduation requirement for this cohort. This resulted in an unsustainable increase in the number of students meeting graduation requirements who previously would have not been eligible to graduate and were reported as dropping out of school.

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)

Drop out data was impacted in FFY 2020 by the COVID-19 pandemic. Due to the waivers/flexibilities granted for the FFY 2020 graduation cohort, the drop out rate for the year was artificially deflated. When considering drop out rate trend data removing the FFY 2020 data, there was a .05% increase from FFY 2019 to FFY 2021.

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 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	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana’s General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including statewide assessment data. Based on feedback received, OSE adjusted the weight assigned to statewide assessment data scoring (increased weight for growth and slight decrease in weight for proficiency) as part of the 2022 RDA release and will continue to seek stakeholder input related to additional changes in the 2023 RDA release.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

04/05/2023

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	13,698	12,999	10,884
b. Children with IEPs in regular assessment with no accommodations	4,159	2,469	1,215
c. Children with IEPs in regular assessment with accommodations	8,723	9,257	7,987
d. Children with IEPs in alternate assessment against alternate standards	658	940	851

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

04/05/2023

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	13,693	12,992	10,884
b. Children with IEPs in regular assessment with no accommodations	3,068	1,216	1,215
c. Children with IEPs in regular assessment with accommodations	9,811	10,497	7,987
d. Children with IEPs in alternate assessment against alternate standards	655	936	848

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

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	13,540	13,698	96.69%	95.00%	98.85%	Met target	No Slippage
B	Grade 8	12,666	12,999	93.06%	95.00%	97.44%	Met target	No Slippage
C	Grade HS	10,053	10,884	78.18%	95.00%	92.36%	Did not meet target	No Slippage

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	13,534	13,693	96.60%	95.00%	98.84%	Met target	No Slippage
B	Grade 8	12,649	12,992	92.96%	95.00%	97.36%	Met target	No Slippage
C	Grade HS	10,050	10,884	79.33%	95.00%	92.34%	Did not meet target	No Slippage

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.

The required public reports of assessment results is located at <https://www.in.gov/doi/students/special-education/>.

On the linked page, open the "Special Education Data" tab.

In this section, locate the heading 616/618 Reporting and see the document "Compliance/Results Indicator Data for All Corporations to Targets SY 2020-2021".

Provide additional information about this indicator (optional)

A study completed on Indiana's academic performance and recovery from the COVID-19 pandemic (https://media.doe.in.gov/news/sboe-7-13-2022.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term=) demonstrates all students participation rates are strong, including student's with disabilities for all state and federally-required assessments. This is of note as high student assessment participation allows for schools to have actionable data to impact instruction and decision making necessary following the academic impacts noted related to additional assessment proficiency data for students with disabilities.

3A - Prior FFY Required Actions

None

3A - OSEP Response

The State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities participating in regular assessments, and the number of those children who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments, and the number of children with disabilities, if any, participating in alternate assessments based on alternate academic achievement standards, at the State level. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3A - Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

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	2021	15.13%
Math	A	Grade 4	2018	25.30%
Math	B	Grade 8	2018	8.62%
Math	C	Grade HS	2021	6.41%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	19.22%	20.22%	21.22%	22.22%	23.22%
Reading	B >=	Grade 8	14.93%	15.93%	16.93%	17.93%	18.93%
Reading	C >=	Grade HS	15.13%	16.13%	17.13%	18.13%	19.13%
Math	A >=	Grade 4	27.30%	28.30%	29.20%	30.30%	31.30%
Math	B >=	Grade 8	10.62%	11.62%	12.62%	13.62%	14.62%
Math	C >=	Grade HS	6.41%	7.41%	8.41%	9.41%	10.41%

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana's General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including statewide assessment data. Feedback from the survey indicates the need to change how statewide assessment data is weighted within the Results Matrix for RDA. Based on this feedback, OSE adjusted the weight assigned to statewide assessment data scoring as part of the 2022 RDA release (increase in weighting for growth and slight decrease in weighting for proficiency) and will continue to seek stakeholder input related to additional changes in the 2023 RDA release.

Additionally, IDOE sought stakeholder input related to the baseline and targets for Group C (Grade HS) Reading and Group C (Grade HS) Math based on a change in the assessment being administered. Stakeholder feedback was gathered from a survey which included present and historical data.

Results of the survey indicated that the baseline should be adjusted to align with the current assessment results and the previously established targets for FFY 2021 through FFY 2025 should remain the same.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

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	12,882	11,726	9,202
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,570	759	247
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	419	479	1,145

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

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	12,879	11,713	9,202
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,627	328	128
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,148	448	462

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	1,989	12,882	14.55%	19.22%	15.44%	Did not meet target	No Slippage
B	Grade 8	1,238	11,726	10.55%	14.93%	10.56%	Did not meet target	No Slippage
C	Grade HS	1,392	9,202	21.50%	15.13%	15.13%	N/A	N/A

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	2,775	12,879	19.03%	27.30%	21.55%	Did not meet target	No Slippage
B	Grade 8	776	11,713	5.75%	10.62%	6.63%	Did not meet target	No Slippage
C	Grade HS	590	9,202	7.13%	6.41%	6.41%	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

The required public reports of assessment results is located at <https://www.in.gov/doi/students/special-education/>.

On the linked page, open the "Special Education Data" tab.

In this section, locate the heading 616/618 Reporting and see the document "Compliance/Results Indicator Data for All Corporations to Targets SY 2020-2021".

Provide additional information about this indicator (optional)

During the 2021–2022 school year, Indiana changed the statewide assessment being administered to high school students. Based on review of the data and Stakeholder input, Indiana is resetting the baseline to align with the current assessment results and the previously established targets for FFY 2021 through FFY 2025 remain the same.

A study completed on Indiana's academic performance and recovery from the COVID-19 pandemic (https://media.doe.in.gov/news/sboe-7-13-2022.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term=) demonstrates students with disabilities' proficiency rates increased .5% overall in English Language Arts (ELA) and 1.6% in Mathematics. The study also finds that while some grade level content area recovery is stabilizing/recovering (4th grade ELA and 4th-8th grade Math), 5th-8th grade ELA recovery is stabilizing-declining. To address these findings, IDOE is leading innovative initiatives to support LEAs as noted in the document link provided previously.

3B - Prior FFY Required Actions

None

3B - OSEP Response

The State has revised the baseline for this indicator for both Reading and Math in High School, using data from FFY 2021, and OSEP accepts that revision.

The State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities, the performance results of children with disabilities on regular assessments, at the State level. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3B - Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

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

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana’s General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including statewide assessment data. Feedback from the survey did not indicate the need to change how statewide alternate assessment data is included within the Results Matrix for RDA (participation included as a scored measure).

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

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	658	940	851
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	259	431	378

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

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	655	936	848
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	268	437	264

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	259	658	41.00%	45.05%	39.36%	Did not meet target	Slippage
B	Grade 8	431	940	40.69%	49.31%	45.85%	Did not meet target	No Slippage
C	Grade HS	378	851	50.11%	79.85%	44.42%	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

Group A students participating in the alternate assessment were found to have a slight decrease of 1.64% in proficiency.

Analyzing the number of students participating in Group A, there was an increase of 36 students receiving a valid score and for whom a proficiency level was assigned for the alternate assessment from the previous year assessment (FFY 20=622; FFY 21=658). This represents a 5.79% increase in participation.

When considering proficiency results from FFY20 and FFY 21, there was an increase of 4 students scoring at of above proficient (FFY 20=255; FFY 21=259). This represents a 1.57% increase in proficiency.

With the increasing number of number of students with significant disabilities returning to school following removals for safety, the academic impact resulting from COVID-19 removals continues to slow the recovery of this student group resulting in the slippage identified in this indicator. To address these findings, IDOE is leading innovative initiatives to support LEAs as noted in the Indiana Academic Performance and Recovery Update document (https://media.doe.in.gov/news/sboe-7-13-2022.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term=).

Provide reasons for slippage for Group C, if applicable

Group C students participating in the alternate assessment were found to have a decrease of 5.69% in proficiency. Analyzing the number of students participating in Group C, there was an decrease of 77 students receiving a valid score and for whom a proficiency level was assigned for the alternate assessment from the previous year assessment (FFY 20=928; FFY 21=851). This represents an 8.30% decrease in participation. When considering proficiency results from FFY20 and FFY 21, there was an decrease of 77 students scoring at of above proficient (FFY 20=465; FFY 21=378). This represents an 18.71% decrease in proficiency. The impacts resulting from the COVID-19 pandemic appear to be most detrimental to Group C students. Data indicates less students participating and less student achieving proficiency which has resulted in the identified slippage for this indicator. This appears to be related to the health concerns resulting in fewer students attending school and those attending having slower response to recovery efforts. To address these findings, IDOE continues to analyze the data for this student group to identify appropriate mitigation strategies and is leading innovative initiatives to support LEAs as noted in the Indiana Academic Performance and Recovery Update document (https://media.doe.in.gov/news/sboe-7-13-2022.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term=).

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	268	655	44.46%	49.30%	40.92%	Did not meet target	Slippage
B	Grade 8	437	936	41.56%	42.33%	46.69%	Met target	No Slippage
C	Grade HS	264	848	35.50%	56.09%	31.13%	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

Group A students participating in the alternate assessment were found to have a decrease of 3.54% in proficiency. Analyzing the number of students participating in Group A, there was an increase of 32 students receiving a valid score and for whom a proficiency level was assigned for the alternate assessment from the previous year assessment (FFY 20=623; FFY 21=655). This represents a 5.14% increase in participation. When considering proficiency results from FFY20 and FFY 21, there was a decrease of 9 students scoring at of above proficient (FFY 20=277; FFY 21=268). This represents a 3.25% decrease in proficiency. With the increasing number of number of students with significant disabilities returning to school following removals for safety, the academic impact resulting from COVID-19 removals continues to slow the recovery of this student group resulting in the slippage identified in this indicator. To address these findings, IDOE is leading innovative initiatives to support LEAs as noted in the Indiana Academic Performance and Recovery Update document (https://media.doe.in.gov/news/sboe-7-13-2022.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term=).

Provide reasons for slippage for Group C, if applicable

Group C students participating in the alternate assessment were found to have a decrease of 4.37% in proficiency. Analyzing the number of students participating in Group C, there was an decrease of 73 students receiving a valid score and for whom a proficiency level was assigned for the alternate assessment from the previous year assessment (FFY 20=921; FFY 21=848). This represents an 7.93% decrease in participation. When considering proficiency results from FFY20 and FFY 21, there was an decrease of 63 students scoring at of above proficient (FFY 20=327; FFY 21=264). This represents an 19.27% decrease in proficiency. The impacts resulting from the COVID-19 pandemic appear to be most detrimental to Group C students. Data indicates less students participating and less students achieving proficiency which has resulted in the identified slippage for this indicator. This appears to be related to the health concerns resulting in fewer students attending school and those attending having slower response to recovery efforts. To address these findings, IDOE continues to analyze the data for this student group to identify appropriate mitigation strategies and is leading innovative initiatives to support LEAs as noted in the Indiana Academic Performance and Recovery Update document (https://media.doe.in.gov/news/sboe-7-13-2022.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term=).

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.

The required public reports of assessment results is located at <https://www.in.gov/doi/students/special-education/>.

On the linked page, open the "Special Education Data" tab.

In this section, locate the heading 616/618 Reporting and see the document "Compliance/Results Indicator Data for All Corporations to Targets SY 2020-2021".

Provide additional information about this indicator (optional)

While the study previously included in this report related to statewide assessment did not include students participating in the alternate assessment, the OSE has analyzed this data and finds that COVID-19 continues to impact student proficiency on statewide alternate assessment as noted within the reasons for slippage discussed previously.

3C - Prior FFY Required Actions

None

3C - OSEP Response

The State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities, the performance results of children with disabilities on alternate assessments based on alternate academic achievement standards, at the State level. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3C - Required Actions

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

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 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 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 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 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	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	26.67	26.17	25.67	25.17	24.67
Reading	B <=	Grade 8	35.52	35.02	34.52	34.02	33.52
Reading	C <=	Grade HS	41.25	40.75	40.25	39.75	39.25
Math	A <=	Grade 4	27.04	26.54	26.04	25.54	25.04
Math	B <=	Grade 8	27.50	27.00	26.50	26.00	25.50
Math	C <=	Grade HS	25.98	25.48	24.98	24.48	23.98

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana's General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including statewide assessment data. Feedback from the survey indicates the need to change how statewide assessment data is weighted within the Results Matrix for RDA. Based on this feedback, OSE adjusted the weight assigned to statewide assessment data scoring as part of the 2022 RDA release and will continue to seek stakeholder input related to additional changes in the 2023 RDA release.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

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	73,832	77,113	71,438
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	12,882	11,726	9,202
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	27,963	31,020	32,873
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,601	944	2,389
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,570	759	247
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	419	479	1,145

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

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	73,826	77,029	71,450
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	12,879	11,713	9,202
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	31,578	21,390	20,303
d. All students in regular assessment with accommodations scored at or above proficient against grade level	2,883	834	1,266
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,627	328	128
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,148	448	462

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	15.44%	40.04%	23.76	26.67	24.60	Met target	No Slippage

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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B	Grade 8	10.56%	41.45%	31.89	35.52	30.89	Met target	No Slippage
C	Grade HS	15.13%	49.36%	43.18	41.25	34.23	Met target	No Slippage

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	21.55%	46.68%	23.55	27.04	25.13	Met target	No Slippage
B	Grade 8	6.63%	28.85%	20.95	27.50	22.23	Met target	No Slippage
C	Grade HS	6.41%	30.19%	28.63	25.98	23.78	Met target	No Slippage

Provide additional information about this indicator (optional)

A study completed on Indiana's academic performance and recovery from the COVID-19 pandemic (https://media.doe.in.gov/news/sboe-7-13-2022.pdf?utm_content=&utm_medium=email&utm_name=&utm_source=govdelivery&utm_term=) demonstrates students with disabilities' proficiency rates increased .5% overall in English Language Arts (ELA) and 1.6% in Mathematics. The study also finds that while some grade level content area recovery is stabilizing/recovering (4th grade ELA and 4th-8th grade Math), 5th-8th grade ELA recovery is stabilizing-declining. To address these findings, IDOE is leading innovative initiatives to support LEAs as noted in the document link provided previously.

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State 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 2021 SPP/APR, use data from 2020-2021), 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 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 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 2021 SPP/APR, the data for FFY 2020), 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	2016	2017	2018	2019	2020
Target <=	0.43%	0.33%	0.23%	0.00%	1.70%
Data	0.00%	NVR	7.14%	1.75%	22.22%

Targets

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

Targets: Description of Stakeholder Input

While targets were not changed for this reporting year, IDOE Office of Special Education has continued to engage stakeholders related to Indicator 4 policies and procedures. IDOE completed interviews with LEAs who were identified as non compliant in the previous year(s) and had effectively corrected the noncompliance. The focus of this discussion was related to the specific corrective actions that were required by the State and LEA feedback on the impact of these actions related to changes in policies, practices and procedures and ultimate correction of non compliance. This evidence has assisted IDOE in the review of current processes related to improving outcomes for children with disabilities.

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1	22	22.22%	1.65%	4.55%	Did not meet target	No Slippage

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

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

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 rate ratio of all races/ethnicities of students with disabilities in the LEA to the rate ratio of all races/ethnicities of students with disabilities combined in the state. The rate ratio must be greater or equal to 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)

As the state's definition includes multiple years of data, the resulting outcomes of the COVID-19 pandemic continue to impact the data reported related to Indicator 4A. As students were accessing education in alternative settings (primarily remote), a significant decrease in disciplinary incidents resulting in removal was demonstrated. The state is continuing to closely monitor discipline data following the return to in-person learning to determine any impacts and actions that will be needed to mitigate the impact.

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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, the following process was completed:

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

Each LEA was required to participate in a policy and procedure review based on the State developed rubric to examine local policies. As part of this review, the LEA submitted all written policies and procedures related to disciplinary practices for students with disabilities. The SEA and an external vendor team separately reviewed the policies and procedures using the rubric. The SEA identified specific areas of noncompliance to report to the LEA.

Each LEA was required to participate in a file review (minimum of 5 files) based on the State developed rubric to examine local practices. As part of this review, the LEA submitted 5 student files to be reviewed (unless the state had previously reviewed files resulting in fewer than 5 files available). The LEA and an external vendor team separately reviewed the files using the rubric. The SEA identified specific areas of noncompliance to report to the LEA.

If policies, procedures and/or practices (including the use of positive behavioral interventions and supports and procedural safeguards) were determined to be inappropriate, findings of noncompliance were issued. The LEA was notified of the finding on noncompliance and required to participate in technical assistance. Technical assistance included a review of the individual cases of noncompliance identified as part of root cause analysis and development of corrective action plan. Subsequently, professional development and technical assistance were made available to the LEA based on the corrective action plan.

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.

To address the requirements in the OSEP Memo 09-02 the State verified correction of student level noncompliance which was completed as soon as possible but in no case greater than one year from the date of the issuance of the finding. As part of the verification process the LEAs were provided feedback on individual case file review results and required to complete file corrections and review/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. If a student was no longer within the jurisdiction of the LEA, individual correction was not made. To verify each LEA subsequently implemented regulatory requirements correctly, the State required the LEA to develop a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT). 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. Technical assistance and training were provided virtually and/or on-site by IDOE and TA center staff. 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 request additional technical assistance/professional development with the appropriate Indiana Resource Network provider(s). IDOE verified the correction of all noncompliance. This process included verification of correction of each individual case of noncompliance and a review of updated policies, procedures, practices and data that had been identified previously. IDOE collected and verified the data through a review of subsequent file reviews to ensure that individual and regulatory noncompliance had been resolved.

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

To verify that the source of noncompliance is correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that the 4 LEAs identified in FFY 2020 achieved 100% compliance with the specific regulatory requirements within one year of issuing findings of noncompliance, consistent with OSEP Memorandum 09-02.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a subsequent review of the file file found to be noncompliant within the state IEP system and verified that the 4 LEAs identified in FFY 2020 achieved 100% compliance with the requirements within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	1	1	0
FFY 2018	1	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

The State has verified that the LEA with noncompliance identified in FFY 2019 is correctly implementing the specific regulatory requirements (achieved 100% compliance) based on a review of updated data (file review) collected through the State data system consistent with OSEP Memo 09-02.

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

The State has verified through file review that the LEA with noncompliance identified in FFY 2019 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.

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 State has verified that the LEA with noncompliance identified in FFY 2018 is correctly implementing the specific regulatory requirements (achieved 100% compliance) based on a review of updated data (file review) collected through the State data system consistent with OSEP Memo 09-02.

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

The State has verified through file review that the LEA with noncompliance identified in FFY 2018 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.

4A - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

The State has verified that 4 LEAs found noncompliant in FFY 2020 are correctly implementing the specific regulatory requirements and has corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the district based on a review of updated data collected through the State data systems and the Indiana IEP student record reporting system.

The State has also verified that the 2 LEAs that had not corrected in FFY 2019 and FFY 2018 are correctly implementing the specific regulatory requirements and has corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the district based on a review of updated data collected through the State data systems and the Indiana IEP student record reporting system.

4A - OSEP Response

In the FFY 2021 SPP/APR the State included a very low percentage of the State's LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "As the state's definition includes multiple years of data, the resulting outcomes of the COVID-19 pandemic continue to impact the data reported related to Indicator 4A. As students were accessing education in alternative settings (primarily remote), a significant decrease in disciplinary incidents resulting in removal was demonstrated." OSEP reminds the State that if the examination for significant discrepancies in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State's chosen methodology is not reasonably designed to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

4A - Required Actions

The State must report, in the FFY 2022 SPP/APR, on the correction of noncompliance that the State identified in FFY 2021 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 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State's LEAs are being examined for significant discrepancy under the State's chosen methodology.

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 2021 SPP/APR, use data from 2020-2021), 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 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 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 2021 SPP/APR, the data for FFY 2020), 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	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	NVR	NVR	0.00%	33.33%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	20	33.33%	0%	0.00%	Met target	No Slippage

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 rate ratio for a given racial/ethnic group in the LEA compared with the rate ratio 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)

As the state's definition includes 3 years of data, the resulting outcomes from the COVID-19 pandemic continue to impact the data related to this Indicator. As most students were accessing education in alternate settings (primarily remote), there was a decrease in the number of disciplinary actions and subsequent removals. The state is continuing to closely monitor discipline data following the return to in-person learning to determine any impacts and actions that will be needed to mitigate the impact.

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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, the following process was completed:

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

Each LEA was required to participate in a policy and procedure review based on the State developed rubric to examine local policies. As part of this review, the LEA submitted all written policies and procedures related to disciplinary practices for students with disabilities. The SEA and an external vendor team separately reviewed the policies and procedures using the rubric. The SEA identified specific areas of noncompliance to report to the LEA.

Each LEA was required to participate in a file review (minimum of 5 files) based on the State developed rubric to examine local practices. As part of this review, the LEA submitted 5 student files to be reviewed (unless the state had previously reviewed files resulting in fewer than 5 files available). The LEA and an external vendor team separately reviewed the files using the rubric. The SEA identified specific areas of noncompliance to report to the LEA.

If policies, procedures and/or practices (including the use of positive behavioral interventions and supports and procedural safeguards) were determined to be inappropriate, findings of noncompliance were issued. The LEA was notified of the finding on noncompliance and required to participate in technical assistance. Technical assistance included a review of the individual cases of noncompliance identified as part of root cause analysis and development of corrective action plan. Subsequently, professional development and technical assistance were made available to the LEA based on the corrective action plan.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

To verify that the source of noncompliance is correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that the 2 LEAs identified in FFY 2020 achieved 100% compliance with the specific regulatory requirements within one year of issuing findings of noncompliance, consistent with OSEP Memorandum 09-02.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a review of the updated student file found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that the 2 LEAs identified in FFY 2020 achieved 100% compliance with the requirements within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

4B - Prior FFY Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 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.

Response to actions required in FFY 2020 SPP/APR

The State has verified that the 2 LEAs found noncompliant in FFY 2020 are correctly implementing the specific regulatory requirements and have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the district based on a review of updated data collected through the State data systems and the Indiana IEP student record reporting system.

While the specific data was not able to be submitted in the Section 4B Indicator Data section of the report (due to technical issues within the system not allowing data entry), the State has verified that the LEAs with noncompliance identified in FFY 2018, FFY 2017 and FFY 2014 are correctly implementing the specific regulatory requirements (achieved 100% compliance) based on a review of updated data (file review) collected through the State data system. The State has also verified through file review that the LEAs with noncompliance identified in FFY 2018, FFY 2017 and FFY 2014 have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA consistent with memo 09-02.

4B - OSEP Response

In the FFY 2021 SPP/APR the State included a very low percentage of the State's LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "As the state's definition includes 3 years of data, the resulting outcomes from the COVID-19 pandemic continue to impact the data related to this Indicator. As most students were accessing education in alternate settings (primarily remote), there was a decrease in the number of disciplinary actions and subsequent removals." OSEP reminds the State that if the examination for significant discrepancies, by race and ethnicity, in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State's chosen methodology is not reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

4B- Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State's LEAs are being examined for significant discrepancy under the State's chosen methodology.

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

Instructions

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

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

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

5 - Indicator Data

Historical Data

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

Targets

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

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana's General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Least Restrictive Environment (LRE). Feedback from the survey indicates the need for greater emphasis on LRE Parts B and C in the Results Matrix for RDA and continuing current inclusion of Part A. Based on this feedback, OSE adjusted the weight assigned to LRE Part A scoring as part of the 2022 RDA release and will continue to seek stakeholder input related to additional changes (such as including LRE Part B and/or C as a scored item) in the 2023 RDA release.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Child Count/Educational Environment	07/06/2022	Total number of children with IEPs aged 5 (kindergarten) through 21	169,801

Source	Date	Description	Data
Data Groups (EDFacts file spec FS002; Data group 74)			
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	132,228
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	13,379
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,418
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	432
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	1,036

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 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	132,228	169,801	77.45%	77.70%	77.87%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	13,379	169,801	7.97%	7.87%	7.88%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	2,886	169,801	1.65%	1.55%	1.70%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in 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	2016	2017	2018	2019	2020
A	Target >=	41.00%	41.50%	42.00%	42.00%	27.22%
A	Data	38.12%	39.98%	39.38%	38.50%	27.22%
B	Target <=	32.80%	32.70%	32.60%	32.60%	39.15%
B	Data	33.71%	32.56%	32.35%	31.54%	39.15%

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana's General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Preschool Environments. Feedback from the survey indicates the need for greater emphasis on Preschool Environments. Based on this feedback, OSE is identifying high performing LEAs for collaboration in the development of infrastructure resources. IDOE will continue to seek stakeholder input related to additional updates to support establishing targets related to Preschool Environments.

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

Inclusive Targets – 6C

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

Prepopulated Data

Data Source:

SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/06/2022

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	4,247	5,762	2,686	12,695
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	944	1,828	947	3,719
b1. Number of children attending separate special education class	1,891	2,019	784	4,694
b2. Number of children attending separate school	64	68	39	171
b3. Number of children attending residential facility	1	4	0	5
c1. Number of children receiving special education and related services in the home	21	23	11	55

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 2021 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	3,719	12,695	27.22%	27.72%	29.29%	Met target	No Slippage

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B. Separate special education class, separate school or residential facility	4,870	12,695	39.15%	38.90%	38.36%	Met target	No Slippage
C. Home	55	12,695	0.61%	0.60%	0.43%	Met target	No Slippage

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: 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	2016	2017	2018	2019	2020
A1	2018	Target >=	75.00%	76.00%	77.00%	77.00%	75.25%
A1	75.41%	Data	72.00%	74.14%	75.41%		58.93%

A2	2018	Target >=	25.00%	26.00%	27.00%	27.00%	21.00%
A2	19.36%	Data	17.29%	18.98%	19.36%		26.03%
B1	2018	Target >=	82.00%	82.50%	83.00%	83.00%	82.25%
B1	81.82%	Data	80.09%	82.05%	81.82%		60.24%
B2	2018	Target >=	16.50%	17.00%	17.50%	17.50%	11.75%
B2	10.15%	Data	8.29%	10.17%	10.15%		17.85%
C1	2018	Target >=	84.50%	85.00%	85.50%	85.50%	84.25%
C1	84.27%	Data	82.66%	84.31%	84.27%		57.30%
C2	2018	Target >=	18.00%	18.50%	19.00%	19.00%	13.00%
C2	11.80%	Data	9.85%	11.38%	11.80%		17.35%

Targets

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

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to the General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Preschool Outcomes. Based on feedback related to recent changes in the assessment system, IDOE moved this indicator to a non-scored component of the annual determination. IDOE does intend to address stakeholder concerns and include the indicator as a scored measure in subsequent year determinations.

FFY 2021 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

667

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	53	7.95%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	252	37.78%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	164	24.59%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	66	9.90%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	132	19.79%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who	230	535	58.93%	75.50%	42.99%	Did not meet target	Slippage

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>							
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	198	667	26.03%	22.00%	29.69%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	43	6.45%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	230	34.48%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	168	25.19%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	61	9.15%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	165	24.74%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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>	229	502	60.24%	82.50%	45.62%	Did not meet target	Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	226	667	17.85%	12.50%	33.88%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	64	9.60%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	179	26.84%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	61	9.15%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	41	6.15%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	322	48.28%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 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>	102	345	57.30%	84.50%	29.57%	Did not meet target	Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	363	667	17.35%	14.00%	54.42%	Met target	No Slippage

Part	Reasons for slippage, if applicable
A1	<p>In analyzing the data related to preschool outcomes, several issues have been identified that contributed to the slippage. The assessment utilized to report preschool outcomes has transitioned from ISTAR-KR to the ISPROUT assessment (see the following section related to instruments used to gather data for additional information) . This year represents the first year that entry and exit data are available based solely on ISPROUT. With this change, there has been a significant drop in the number of assessments reported to the State by local programs related to entrance/exit reporting errors resulting in the lack of complete assessments which excludes the assessment from inclusion in reporting.</p> <p>Another issue identified is related to reporting within the ISPROUT system. As discussed previously, the system is organized into assessment windows and when the window time period ends, the data entered is recorded as final. An issue has been identified in that when a student enters the program near the end of an assessment window and the necessary assessment items are not entered to meet the criteria of a complete assessment, this assessment is excluded as incomplete. The test administrator can complete the assessment for progress monitoring purposes but this is then not reported as part of the entrance assessment.</p> <p>The decrease in the number of assessments reported has resulted in changes to the numerator/denominator rates and contributed to slippage.</p> <p>IDOE is working with the vendor to fully analyze the current data and develop updates to the system to address all concerns being identified. Additional training related to reporting is also being provided to LEAs. IDOE has also implemented additional monitoring tools and tasks to support LEAs implementation when expected data results are not reported.</p> <p>Slippage can also be related to the slight increase in A2 outcomes which results in a decrease in A1.</p>
B1	<p>In analyzing the data related to preschool outcomes, several issues have been identified that contributed to the slippage. As noted previously, the assessment utilized to report preschool outcomes has transitioned from ISTAR-KR to the ISPROUT assessment (see the following section related to instruments used to gather data for additional information). This year represents the first year that entry and exit data are available based solely on ISPROUT. With this change, there has been a significant drop in the number of assessments reported to the State by local programs related to entrance/exit reporting errors resulting in the lack of complete assessments which excludes the assessment from inclusion in reporting.</p> <p>Another issue identified is related to reporting within the ISPROUT system. As discussed previously, the system is organized into assessment windows and when the window time period ends, the data entered is recorded as final. An issue has been identified in that when a student enters the program near the end of an assessment window and the necessary assessment items are not entered to meet the criteria of a complete assessment, this assessment is excluded as incomplete. The test administrator can complete the assessment for progress monitoring purposes but this is then not reported as part of the entrance assessment.</p> <p>The decrease in the number of assessments reported has resulted in changes to the numerator/denominator rates and contributed to slippage.</p> <p>IDOE is working with the vendor to fully analyze the current data and develop updates to the system to address all concerns being identified. Additional training related to reporting is also being provided to LEAs. IDOE has also implemented additional monitoring tools and tasks to support LEAs implementation when expected data results are not reported.</p> <p>Slippage can also be related to the slight increase in B2 outcomes which results in a decrease in B1.</p>
C1	<p>In analyzing the data related to preschool outcomes, several issues have been identified that contributed to the slippage. As noted previously, the assessment utilized to report preschool outcomes has transitioned from ISTAR-KR to the ISPROUT assessment (see the following section related to instruments used to gather data for additional information). This year represents the first year that entry and exit data are available based solely on ISPROUT. With this change, there has been a significant drop in the number of assessments reported to the State by local programs related to entrance/exit reporting errors resulting in the lack of complete assessments which excludes the assessment from inclusion in reporting.</p> <p>Another issue identified is related to reporting within the ISPROUT system. As discussed previously, the system is organized into assessment windows and when the window time period ends, the data entered is recorded as final. An issue has been identified in that when a student enters the program near the end of an assessment window and the necessary assessment items are not entered to meet the criteria of a complete assessment, this assessment is excluded as incomplete. The test administrator can complete the assessment for progress monitoring purposes but this is then not reported as part of the entrance assessment.</p> <p>The decrease in the number of assessments reported has resulted in changes to the numerator/denominator rates and contributed to slippage.</p>

Part	Reasons for slippage, if applicable
	<p>IDOE is working with the vendor to fully analyze the current data and develop updates to the system to address all concerns being identified. Additional training related to reporting is also being provided to LEAs. IDOE has also implemented additional monitoring tools and tasks to support LEAs implementation when expected data results are not reported.</p> <p>The decrease in the number of assessments reported has resulted in changes to the numerator/denominator rates and contributed to slippage.</p> <p>IDOE is working with the vendor to fully analyze the current data and develop updates to the system to address all concerns being identified. Additional training related to reporting is also being provided to LEAs. IDOE has also implemented additional monitoring tools and tasks to support LEAs implementation when expected data results are not reported.</p> <p>Slippage can also be related to the slight increase in C2 outcomes which results in a decrease in C1.</p>

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 utilizes the Indiana Student Performance Readiness and Observation of Understanding Tool (ISPROUT) assessment tool. This tool is a 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 assessment at the entrance and exit of the program. The initial entrance and final exit scores are used to assess growth. 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.

As noted previously, ISPROUT is the assessment used by educators to: a) identify student skills, knowledge, and behaviors; and b) monitor growth through daily observations and activities.

ISPROUT is required for all preschool-aged students eligible for special education. 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 exiting special education services or exiting to kindergarten. To assist in monitoring of the assessment data, the system organizes information being submitted into 4 assessment windows.

(<https://www.in.gov/doi/files/ISPROUT-Overview.docx.pdf>).

IDOE previously utilized the Indiana Standards Tool for Alternate Reporting- Kindergarten Readiness (ISTAR-KR). With this, for the last several years, a student's entrance assessment was based on scores from ISTAR-KR and the exit assessment was based on ISPROUT. This reporting year is the first year that ISPROUT has been the entrance and the exit assessment.

Provide additional information about this indicator (optional)

As part of the analysis of Indicator 7 data, it has been noted that there continues to be impacts related to the COVID-19 pandemic. Indiana schools experienced numerous closures both during the initial pandemic closure and during the following years when quarantines were required based on positive cases of COVID-19 and resulting close contacts. While schools were closed, teachers were unable to complete entrance and exit assessments as the ISPROUT assessment cannot be administered virtually. The teacher may have completed the assessment during a later assessment window when the student was in person, but the assessment was excluded as it did not meet the requirement of being completed within the first 6 weeks of entry to programming or exit programming. This has impacted the number of assessments reported by the state.

To mitigate this issue, Early Intervention Programs were encouraged to completed the data and continue to utilize the ISPROUT assessment system as progress monitoring and to locally analyze student outcomes.

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 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 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana's General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Parent Involvement. Feedback from stakeholders indicates the need for greater emphasis on Parent Involvement in the Results Matrix for RDA. Based on this feedback, OSE will continue to seek stakeholder input related to the inclusion of Parent Involvement outcomes within the general supervision system and as a scored measure within RDA.

Historical Data

Baseline Year	Baseline Data
2019	93.67%

FFY	2016	2017	2018	2019	2020
Target >=	72.00%	73.00%	74.00%	75.00%	94.67%
Data	97.11%	79.92%	94.44%	93.67%	93.00%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
4,101	4,399	93.00%	95.67%	93.23%	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 included in the Indiana Parent Survey are designed to be applicable 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.

182,609

Percentage of respondent parents

2.41%

Response Rate

FFY	2020	2021
Response Rate	1.14%	2.41%

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

Strategies being utilized to increase response rate include:

- 1) Including reminders for special education staff in the Office of Special Education monthly newsletter and Indiana Department of Education (IDOE) weekly update to complete the parent survey as part of the Annual Case Review.
- 2) Encouraging local special education administrators to review response rate data available on the IDOE website and to contact IDOE with any questions related to the data results.
- 3) In fall 2022, IDOE, in partnership with the state Parent Training Center (INSOURCE), hosted a webinar for parents and families of students with disabilities to discuss the purpose and importance of the parent survey;
- 4) The survey has been translated into additional languages. Languages were selected based on data from the statewide IEP system which indicated what the top three home languages were (English, Spanish, and Burmese).

Based on stakeholder feedback, IDOE redesigned the survey to make it more user friendly, with the goal of increasing participation and making the data collected more meaningful for local education agencies and other stakeholders. The survey redesign included use of less jargon in the questions being asked, allowing respondents more opportunities to provide comments, and reducing the total number of questions. The updated survey deployed in July 2022. IDOE continues to seek stakeholder input related to including parent survey outcomes as part of LEA annual determinations.

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.

The response rate for the Indicator 8 survey has more than doubled from 1.14% to 2.41%.

Analysis for nonresponse bias indicates nonresponse bias in three areas: Black/African American, Hispanic Latino, and Other Health Impairment. When examining the number of parents reporting that they were involved by the LEA in the IEP process, there was no significant difference across all population subgroups (race/ethnicity, grade level, disability status) in the percentage answering in the affirmative.

IDOE is taking the following steps to reduce identified bias and promote responses from a broad cross section of parents of children with disabilities:

- 1) Track survey responses geographically and target support/professional development for areas not represented.
- 2) Provide the survey in a variety of formats (for example, online or paper) to encourage participation.
- 3) Provide the survey in the three most prevalent languages used in Indiana (English, Spanish, and Burmese).

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

IDOE identified the following racial and ethnic groups to be underrepresented:

- 1) Black/African American students were underrepresented by five raw percentage points from their percentage within the targeted population.
- 2) Hispanic/Latino were underrepresented by four raw percentage points from their percentage within the targeted population.
- 3) Students with a primary disability category of Other Health Impairment (5%) were underrepresented by five raw percentage points from their percentage within the targeted population.

Grade level 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

Strategies that will be utilized to increase response rate include:

- 1) Including reminders for special education staff in the Office of Special Education monthly newsletter and Indiana Department of Education (IDOE) weekly update to complete the parent survey as part of the Annual Case Review;
- 2) Encouraging local special education administrators to contact IDOE requesting response rate data for the LEA;
- 3) In fall 2022, IDOE, in partnership with the state Parent Training Center (INSOURCE), hosted a webinar for parents and families of students with disabilities to discuss the purpose and importance of the parent survey; additional webinars and collaboration with INSOURCE will occur in 2023;
- 4) The survey has been translated into additional languages (previously offered in English and Spanish and now translated into Burmese).

Based on stakeholder feedback, IDOE redesigned the survey to make it more user friendly (removing jargon, providing more space for comments, and reduction of the number of questions), with the goal of increasing participation and making the data collected more meaningful for local education agencies and other stakeholders. The updated survey deployed in July 2022. IDOE continues to seek stakeholder input related to including parent survey outcomes as part of LEA annual determinations.

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

Values are considered not representative if they are not within +/- 3 percentage points of the population distribution and not within +/- ten percentage points of the expected value based on population parameters.

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)

In the original APR submission, the survey question related to a new or revised survey was indicated as "Yes". A new survey has been developed, but was not deployed in FFY 2021, and will be included in the FFY 2022 APR.

8 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

The State has reported on the response group representativeness and analysis within the Indicator 8 Data description including the actions to be taken to address underrepresented groups.

8 - OSEP Response

8 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 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 2021 reporting period (i.e., after June 30, 2022).

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 2021 SPP/APR, the data for FFY 2020), 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	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.29%	0.00%	0.28%	0.00%	0.79%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
3	2	382	0.79%	0%	0.52%	Did not meet target	No Slippage

Were all races and ethnicities included in the review?

YES

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

IDOE defines disproportionate representation as the ratio of 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 students of all other race/ethnicities with disabilities.

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 identified as disproportionate based on the state definition were notified by IDOE. This notification included a request to submit policies and procedures and to participate in a file review process. A minimum of five files were identified for review based on state developed rubric designed to demonstrate LEA practices. Files from the 2021-2022 school year, including evaluations, Response to Intervention (RTI) progress data, conference summaries, and eligibility determinations were monitored. Following the review, if policies, procedures, and/or practices were determined to be inappropriate the LEA was notified of a finding of noncompliance being issued.

Provide additional information about this indicator (optional)

Please note that there were 411 LEAs in Indiana during FFY2021 (see updated description in Introduction) .

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 2020 Findings of Noncompliance Verified as Corrected

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

To verify that the source of noncompliance is correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that the 3 LEAs identified in FFY 2020 achieved 100% compliance with the specific regulatory requirements within one year of issuing findings of noncompliance, consistent with OSEP Memorandum 09-02.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a review of the updated student files found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that the 3 LEAs identified in FFY 2020 achieved 100% compliance with the requirements within one year of issuing findings of noncompliance , unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

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

9 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

IDOE identified three instances of noncompliance in FFY2020 and has verified that each of them has been corrected and are correctly implementing all regulatory requirements and have achieved 100% compliance. These corrections were verified using a combination file reviews and updated data subsequently collected through the school information system and statewide Indiana Individual Education Plan (IIEP) system.

9 - OSEP Response

9 - Required Actions

Because the State reported greater than 0% actual target data for this indicator for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the two districts identified in FFY 2021 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 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 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect 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 2021.

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 the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, 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 2021 reporting period (i.e., after June 30, 2022).

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 2021 SPP/APR, the data for FFY 2020), 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
2020	3.30%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	2.78%	3.11%	NVR	1.11%	3.30%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
12	4	345	3.30%	0%	1.16%	Did not meet target	No Slippage

Were all races and ethnicities included in the review?

YES

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

IDOE defines disproportionate representation risk ratio 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) by calculating a ratio of 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 cell size of 15 students with a particular disability in each racial/ethnic category, as well as a minimum of 15 students 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 identified as disproportionate based on the state definition were notified by IDOE. This notification included a request to submit policies and procedures and to participate in a file review process. A minimum of five files were identified for review based on state developed rubric designed to demonstrate LEA practices. Files from the 2021-2022 school year, including evaluations, Response to Intervention (RTI) progress data, conference summaries, and eligibility determinations were monitored. Following the review, if policies, procedures, and/or practices were determined to be inappropriate the LEA was notified of a finding of noncompliance being issued.

Provide additional information about this indicator (optional)

Please note there were 411 LEAs in Indiana during FFY2021.

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
11	10	0	1

FFY 2020 Findings of Noncompliance Verified as Corrected

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

To verify that the source of noncompliance is correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that 10 of the 11 LEAs identified in FFY 2020 achieved 100% compliance with the specific regulatory requirements within one year of issuing findings of noncompliance, consistent with OSEP Memorandum 09-02.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a review of updated student files found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that 10 LEAs identified in FFY 2020 achieved 100% compliance with the requirements within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The LEA identified as noncompliant and not yet verified as corrected based on review of updated data (student file) is required to complete root cause analysis and develop a Corrective Action Plan (CAP) related to the identified disproportionality during FFY2020. Additional monitoring and data submissions are required as a part of the CAP.

IDOE and technical assistance center staff continue working with the LEA to facilitate root cause analysis and address the issues identified that are continuing to impact the identified disproportionality. This includes on-site/virtual monitoring visits to assist in the development of practices and procedures designed to impact the identified disproportionality. Pursuant to OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	4	3	1
FFY 2018	1	1	0
FFY 2017	1	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

To verify that the source of noncompliance is correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and has verified that 3 LEAs with noncompliance identified in FFY 2019 have achieved 100% compliance with the regulatory requirements, consistent with OSEP Memorandum 09-02.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a review of the updated student file found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and has verified that 3 LEAs with noncompliance identified in FFY 2019 have corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

FFY 2019

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The LEA identified as noncompliant and not yet verified as corrected based on review of updated data (student file) is required to complete root cause analysis and revise the previously developed Corrective Action Plan (CAP) related to the identified disproportionality during FFY2019. Additional monitoring and data submissions are required as a part of the CAP.

IDOE and technical assistance center staff continue working with the LEA to facilitate root cause analysis and address the issues identified that are continuing to impact the identified disproportionality. This includes on-site/virtual monitoring visits to assist in the development of practices and procedures designed to impact the identified disproportionality. Pursuant to OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements.

FFY 2018

Findings of Noncompliance Verified as Corrected

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

To verify that the source of noncompliance is correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that the LEA identified in FFY 2018 achieved 100% compliance with the regulatory requirements, consistent with OSEP Memorandum 09-02.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a review of the updated student file found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that the 4 LEAs identified in FFY 2018 achieved 100% compliance with the requirements within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

FFY 2017

Findings of Noncompliance Verified as Corrected

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

To verify that each individual case of noncompliance was corrected, IDOE completed a review of the updated student file found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that the LEA identified in FFY 2017 achieved 100% compliance with the requirements within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a review of the updated student file found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that the LEA identified in FFY 2017 achieved 100% compliance with the requirements within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

10 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

The State revised the baseline to reflect FFY 2020 data.

Of the 11 LEAs identified in FFY2020, 10 of the 11 have been verified as corrected and are correctly implementing specific regulatory requirements and have achieved 100% compliance. To verify implementation of regulatory requirements, a district's revised policies, practices, and procedures are evaluated and correction of individual files are verified using a combination of file reviews and updated data subsequently collected through the school information system and statewide Indiana Individual Education Plan (IIEP) system.

The remaining district that is noncompliant from FFY2019, FFY2018, and FFY2017 is the same district that remains noncompliant in both FFY2021 and FFY2020. The district identified as noncompliant was required to complete root cause analysis and develop a Corrective Action Plan (CAP) related to the identified disproportionality during FFY2020. Additional monitoring and data submissions were required as a part of the CAP.

IDOE and technical assistance center staff continued working with the LEA to facilitate root cause analysis and address the issues identified that are continuing to impact the identified disproportionality. This includes on-site/virtual monitoring visits to assist in the development of practices and procedures designed to impact the identified disproportionality. Pursuant to OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements.

The district identified in FFY 2013 has been verified as implementing the specific regulatory requirements and have achieved 100% compliance based on a review of updated data collected through the school information system and statewide Indiana Individual Education Plan (IIEP) system.

10 - OSEP Response

10 - Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the four districts identified in FFY 2021 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 2021, although its FFY 2021 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 2021. Further, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining one district identified in FFY 2020, and one district 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. In demonstrating the correction of the noncompliance identified in FFY 2021, FFY 2020 and FFY 2019, the State must report, in the FFY 2022 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2021 and each district with remaining noncompliance identified in FFY 2020 and 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 district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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 2021 SPP/APR, the data for FFY 2020), 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	95.96%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	98.46%	98.72%	98.34%	96.14%	95.96%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
24,780	24,107	95.96%	100%	97.28%	Did not meet target	No Slippage

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

673

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.

For children included in (a) but not included in (b), the range of days beyond the timeline when the evaluation was completed is listed below:

1-5 days: 127

6-10 days: 103

11-15 days: 64

Over 15 or did not complete that school year: 379

Total 673

The most common reasons reported by LEAs related to missed timelines includes staff illness due to COVID as well as staff shortages. Other reasons include clerical errors and scheduling conflicts.

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 Administrative Code (IAC) 7-40-5(d) defines the timeline for initial educational evaluation as 50 instructional days of the date the written parental consent is received.

The time frame does not apply in the following situations:

- 1) When a student has participated in a process that assesses the student's response to scientific, research based interventions, in which case the time frame is 20 instructional days.;
- 2) When the parent of a student repeatedly fails or refuses to produce the student for the evaluation.;
- 3) When a student enrolls in a school of another public agency after the relevant time frame in subsection (a) has begun, and prior to completion of the evaluation, if the subsequent public agency is making sufficient progress to ensure a prompt completion of the evaluation and parent and subsequent public agency agree to a specific time when the evaluation will be completed.;
- 4) When a child is transitioning from early intervention (Part C) to early childhood special education (Part B), in which case the evaluation must be completed and the Case Conference Committee (CCC) convened to ensure that the child receives special education services by his or her third birthday.

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 is submitted to IDOE using Ed-Fi from the Local Education Agency (LEA) Student Information System (SIS) to the Data Exchange platform. Each LEA must upload child count, performance data, and compliance data to the Data Exchange platform. These data are then stored in the IDOE data warehouse where it can be extracted and used for state and federal funding, performance indicators, and compliance indicators. Initial evaluation data is gathered from the IDOE-Evaluation collection and verified by LEAs to ensure accuracy. This data includes the date of receipt of parental consent, the date of the case conference determining eligibility and that outcome, as well as any reason the timeline could not be completed in a timely fashion. This data is then compared to the school calendar submissions to determine compliance.

Data is reviewed for any data quality issues through a verification process between IDOE and LEAs. Any data issues are then corrected before the finding of noncompliance is recorded.

Provide additional information about this indicator (optional)

As discussed in the introduction, IDOE completed a review process related to the General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Child Find- Initial Educational Evaluation. Based on this feedback, OSE adjusted the percentage weight assigned to Indicator 11- Initial Educational Evaluation scoring as part of the 2022 RDA release to be comparable to all compliance indicators and increased the percentage weight assigned to continued or longstanding noncompliance. IDOE will continue to seek stakeholder input related to potential changes in the 2023 RDA release.

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
69	52	1	16

FFY 2020 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 that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each LEA found to have noncompliance was correctly implementing regulatory requirements. IIEP provides an Educational Evaluation (EV) Report consisting of student identifying information, date of parental consent, date of the required Initial Evaluation case conference meeting and eligibility determination. IDOE monitors this report of subsequent timeline compliance to ensure that each LEA is implementing the regulations at 100% compliance. IDOE verified that 53 of the LEAs with noncompliance were subsequently implementing regulatory requirements with 100% compliance.

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

IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each individual case of noncompliance was corrected. IIEP stores student event history which includes date of parent consent, date of case conference committee meeting and date of eligibility determination. With the Advanced Reporting feature included within IIEP, each individual case of noncompliance was reviewed to ensure that the LEA has completed the evaluation unless the child is no longer within the jurisdiction of the LEA.

For the 52 LEAs that are reported as corrected within one year of their finding, IDOE reviewed data in the IIEP system and verified that each of the 52 LEAs corrected (completed) each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA.

For the 1 LEA reported as subsequently corrected, IDOE reviewed data in the IIEP system and verified that the LEA corrected (completed) each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA.

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

LEAs identified as noncompliant and not yet verified as corrected were required to develop a Corrective Action Plan (CAP) in coordination with an IDOE Education Specialist during FFY2020. Additional monitoring and data submissions were required as a part of the CAP.

The IDOE Education Specialist and/or technical assistance center staff continue to support the LEA to facilitate root cause analysis and address the issues identified that are continuing to impact compliance of eligibility timelines. This may include on-site/virtual monitoring visits to provide training regarding policies related to initial evaluation and development of practices and procedures addressing identified barriers related to timely completion. Pursuant to OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements by achieving 100% compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	61	42	19
FFY 2018	59	36	23
FFY 2014	1	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

Subsequent to verifying that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each LEA found to have noncompliance was correctly implementing regulatory requirements. IIEP provides an Educational Evaluation (EV) Report consisting of student identifying information, date of parental consent, date of the required Initial Evaluation case conference meeting, and eligibility determination. IDOE monitors this report of subsequent timeline compliance to ensure that each LEA is implementing the regulations at 100% compliance.

IDOE verified that 42 of the LEAs with noncompliance were subsequently implementing regulatory requirements with 100% compliance. This includes LEAs who had not previously met the requirements prior to FFY 2020.

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

IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each individual case of noncompliance was corrected. IIEP stores student event history which includes date of parent consent, date of case conference committee meeting and date of eligibility determination. With the Advanced Reporting feature included within IIEP, each individual case of noncompliance was reviewed to ensure that the LEA has completed the evaluation unless the child is no longer within the jurisdiction of the LEA.

For the LEAs that are reported as corrected, IDOE reviewed data in the IIEP system and verified that each of the 42 LEAs with noncompliance corrected (completed) each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA.

FFY 2019

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

LEAs identified as noncompliant and not yet verified as corrected were required to develop a Corrective Action Plan (CAP) in coordination with an IDOE Education Specialist during FFY2019. The IDOE Education Specialist provides additional monitoring and data submissions as a part of the CAP.

The IDOE Education Specialist and/or technical assistance center staff will continue monitoring the LEA to facilitate root cause analysis and address the issues identified that are continuing to impact compliance of eligibility timelines. This may include on-site/virtual monitoring visits to provide training regarding policies related to initial evaluation and development of practices and procedures addressing identified barriers related to timely completion. Pursuant to OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements by achieving 100% compliance.

FFY 2018

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 that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each LEA found to have noncompliance was correctly implementing regulatory requirements. IIEP provides an Educational Evaluation (EV) Report consisting of student identifying information, date of parental consent, date of the required Initial Evaluation case conference meeting and eligibility determination. IDOE monitors this report of subsequent timeline compliance to ensure that each LEA is implementing the regulations at 100% compliance.

IDOE verified that 36 of the LEAs with noncompliance were subsequently implementing regulatory requirements with 100% compliance. This includes LEAs who had not previously met the requirements prior to FFY 2020.

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

IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each individual case of noncompliance was corrected. IIEP stores student event history which includes date of parent consent, date of case conference committee meeting and date of eligibility determination. With the Advanced Reporting feature included within IIEP, each individual case of noncompliance was reviewed to ensure that the LEA has completed the evaluation unless the child is no longer within the jurisdiction of the LEA.

For the LEAs that are reported as corrected, IDOE reviewed data in the IIEP system and verified that each of the 36 LEAs with noncompliance corrected (completed) each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA.

FFY 2018

Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

LEAs identified as noncompliant and not yet verified as corrected were required to develop a Corrective Action Plan (CAP) in coordination with an IDOE Education Specialist during FFY2018. Additional monitoring and data submissions were required as a part of the CAP.

The IDOE Education Specialist and/or technical assistance center staff will continue monitoring the LEA to facilitate root cause analysis and address the issues identified that are continuing to impact compliance of eligibility timelines. This may include on-site/virtual monitoring visits to provide training regarding policies related to initial evaluation and development of practices and procedures addressing identified barriers related to timely completion. 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

Subsequent to verifying that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that the LEA found to have noncompliance was correctly implementing regulatory requirements. IIEP provides an Educational Evaluation (EV) Report consisting of student identifying information, date of parental consent, date of the required Initial Evaluation case conference meeting and eligibility determination. IDOE monitors this report of subsequent timeline compliance to ensure that each LEA is implementing the regulations at 100% compliance. IDOE has verified that the LEA with noncompliance in FFY 2014 is subsequently implementing regulatory requirements with 100% compliance.

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

IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each individual case of noncompliance was corrected. IIEP stores student event history which includes date of parent consent, date of case conference committee meeting and date of eligibility determination. With the Advanced Reporting feature included within IIEP, each individual case of noncompliance was reviewed to ensure that the LEA has completed the evaluation unless the child is no longer within the jurisdiction of the LEA.

For the LEA identified as noncompliant in FFY 2014, IDOE reviewed data in the IIEP system and verified that the LEA corrected (completed) each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA.

11 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

Indiana is not revising its baseline for Indicator 11. A clerical error was identified in the FFY 2020 SPP/APR and has been corrected to ensure the data reported in the Historical Data table is consistent with the State's FFY 2020 data.

Of the 69 LEAs found to have noncompliance for FFY 2020, the State has verified that 52 LEAs are correctly implementing regulatory requirements and have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA. Of the remaining 17 LEAs, the State has verified that 1 LEA is correctly implementing regulatory requirements and has corrected each individual case of noncompliance based on

subsequent data review and 16 LEAs continue to be monitored to verify compliance.

Of the 61 LEAs found to have uncorrected findings of noncompliance identified in FFY 2019, 36 LEAs are correctly implementing regulatory requirements and have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA based on subsequent review of data included in the State IEP system. The State has verified that the remaining 25 LEAs have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA. The State continues to monitor 25 LEAs to ensure correct implementation of the specific regulatory requirements for Indicator 11.

Of the 59 LEAs found to have uncorrected findings of noncompliance identified in FFY 2018, 33 LEAs are correctly implementing regulatory requirements and have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA based on subsequent review of data included in the State IEP system. The State has verified that the remaining 26 LEAs have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA. The State continues to monitor 25 LEAs to ensure correct implementation of the specific regulatory requirements for Indicator 11.

The uncorrected finding of noncompliance identified in 2014 has been corrected. The state has verified that the LEA is correctly implementing regulatory requirements and has corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA.

11 - OSEP Response

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

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 16 uncorrected findings of noncompliance identified in FFY 2020, the remaining 19 uncorrected findings of noncompliance identified in FFY 2019, and the remaining 23 uncorrected findings of noncompliance in FFY 2018 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021, FFY 2020, FFY 2019, and FFY 2018 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 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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 2021 SPP/APR, the data for FFY 2020), 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	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.43%	97.39%	99.68%	92.08%	92.00%

Targets

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

FFY 2021 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	3,570
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	333

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,882
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.	241
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 2020 Data	FFY 2021 Target	FFY 2021 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.	2,882	2,996	92.00%	100%	96.19%	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

114

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.

For the 114 children served in Part C and referred to Part B found to have a late eligibility determination, the ranges and reasons for the delay are as follows:

- 1 to 5 days: 36
- 6 to 10 days: 18
- 11 to 15 days: 12
- 15 to end of year: 48

Timelines were missed for a variety of reasons identified as follows: staff shortages, volume of referrals, scheduling conflicts, timeline errors, improper documentation, and LEA staff errors.

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 is submitted to IDOE using Ed-Fi from the Local Education Agency (LEA) Student Information System (SIS) to the Data Exchange platform. Each LEA must upload child count, performance data, and compliance data to the Data Exchange platform. These data are then stored in the IDOE data warehouse where it can be extracted and used for state and federal funding, performance indicators, and compliance indicators. Initial evaluation data is gathered from the IDOE-Evaluation collection and verified by LEAs to ensure accuracy. This data includes the date of receipt of parental consent, the date of the case conference determining eligibility and that outcome, as well as any reason the timeline could not be completed in a timely fashion. This data is then compared to the school calendar submissions to determine compliance.

Data is reviewed for any data quality issues through a verification process between IDOE and LEAs. Any data issues are then corrected before the finding of noncompliance is recorded.

Provide additional information about this indicator (optional)

As discussed in the introduction, IDOE completed a review process related to the General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Early Childhood Transition. Based on this feedback, OSE adjusted the percentage weight assigned to Indicator 12- Early Childhood Transition scoring as part of the 2022 RDA release to be comparable to all compliance indicators and increased the percentage weight assigned to continued or longstanding noncompliance. IDOE will continue to seek stakeholder input related to potential changes in the 2023 RDA release.

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
74	73	0	1

FFY 2020 Findings of Noncompliance Verified as Corrected

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

IDOE issued 74 Indicator 12 findings of noncompliance related to regulatory requirements. Subsequently, 73 LEAs corrected all instances of noncompliance and demonstrated the correct implementation of regulatory requirements based on review of subsequent data verifying compliance. The review completed is based on data available within the State system for developing and storing individual education programs, Indiana IEP (IIEP). To verify that each LEA found to have noncompliance was correctly implementing regulatory requirements the Educational Evaluation (EV) Report available within IIEP (consisting of student identifying information, date of parental consent, date of the required Initial Evaluation case conference meeting, date services begin and eligibility determination) is reviewed to ensure compliance. IDOE verified that 73 LEAs were subsequently implementing regulatory requirements with 100% compliance.

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

IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each individual case of noncompliance was corrected. IIEP stores student event history which includes date of parent consent, date of case conference committee meeting and date of eligibility determination. With the Advanced Reporting feature included within IIEP, each individual case of noncompliance was reviewed to ensure that the LEA has completed the evaluation unless the child is no longer within the jurisdiction of the LEA. IDOE reviewed data in the IIEP system and verified that each of the 73 LEAs with noncompliance corrected (completed) each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA, and the IEP was developed and implemented, if applicable.

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The LEA identified as noncompliant and not yet verified as corrected completed a Root Cause Analysis (RCA) with support from IDOE Education Specialists. A Corrective Action Plan (CAP) was developed based on the RCA including additional monitoring. This may include on-site/virtual monitoring visits to provide training regarding policies related to initial evaluation and development of practices and procedures addressing identified barriers related to timely completion. Pursuant to OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements by achieving 100% compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2019	36	36	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

For LEAs identified as having a finding in FFY 2019, 36 were not verified as corrected as of FFY2020. IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each LEA found to have noncompliance was correctly implementing regulatory requirements. IIEP provides an Educational Evaluation (EV) Report consisting of student identifying information, date of parental consent, date of the required Initial Evaluation case conference meeting, date services begin and eligibility determination. IDOE monitors this report of subsequent timeline compliance to ensure that each LEA is implementing the regulations at 100% compliance. IDOE verified that 36 LEAs are subsequently implementing regulatory requirements with 100% compliance.

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

IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify that each individual case of noncompliance was corrected. IIEP stores student event history which includes date of parent consent, date of case conference committee meeting and date of eligibility determination. With the Advanced Reporting feature included within IIEP, each individual case of noncompliance was reviewed to ensure that the LEA has completed the evaluation unless the child is no longer within the jurisdiction of the LEA. For the LEAs that are reported as corrected within one year of their finding, IDOE reviewed data in the IIEP system and verified that each of the 36 LEAs corrected (completed) each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA.

12 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

Of the 74 LEAs found to have noncompliance for FFY 2020, the State has verified that 73 LEAs are correctly implementing regulatory requirements and have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA. The State has verified the remaining 1 LEA has corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA. The State continues to monitor the LEA to ensure correct implementation of the specific regulatory requirements for Indicator 12.

Of the 36 LEAs found to have uncorrected findings of noncompliance identified in FFY 2019, the State has verified that all 36 LEAs are correctly implementing regulatory requirements and have corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the LEA based on subsequent review of data included in the State IEP system.

12 - OSEP Response

12 - Required Actions

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

When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 and 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 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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 2021 SPP/APR, the data for FFY 2020), 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	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	85.47%	86.14%	68.70%	75.60%	77.04%

Targets

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

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
541	1,021	77.04%	100%	52.99%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

In addressing the comments and required actions from OSEP in prior SPP/APR determinations, IDOE reviewed data protocols and made necessary adjustments. Additionally, IDOE revised the Indicator 13 monitoring cycle, moving from a three year to a two year cycle. With this change, half of the LEAs are included in the 2021 data collection while 2020 data includes one third of the LEAs. It was expected that this would result in a decrease in the percentage. The slippage documented this year is indicative of those changes toward an accurate and reliable data protocol.

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 IDOE meets the reporting requirements and is providing ongoing technical assistance for local education agencies 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)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
128	117	0	11

FFY 2020 Findings of Noncompliance Verified as Corrected

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

IDOE issued 128 Indicator 13 findings of noncompliance with regard to regulatory requirements. Subsequently, 117 LEAs corrected all instances of noncompliance and demonstrated regulatory requirements in the additional file reviews 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. This review found that 117 LEAs are implementing regulatory requirements at 100%. The 11 LEAs not verified as compliant continue to engage in technical assistance and professional development. Subsequent reviews of Transition IEPs will be completed until IDOE has verified compliance with 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.

FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

For the 11 findings that have yet to be corrected, the initial noncompliance has been corrected; however, subsequent pulls identified additional findings of noncompliance. The districts have been engaged in reviewing and revising their policies and procedures related to transition IEPs as well as being engaged in ongoing technical assistance and professional development to improve transition IEPs. The districts will be released once all findings of noncompliance have been corrected and no additional findings are found in subsequent file reviews.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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 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.

Response to actions required in FFY 2020 SPP/APR

Of the 128 LEAs found to have noncompliance in FFY 2020, 117 LEAs have LEAs corrected all instances of noncompliance and demonstrated regulatory requirements in the additional file reviews conducted. The 11 LEAs not verified as compliant continue to engage in technical assistance and professional development. Subsequent reviews of Transition IEPs will be completed until IDOE has verified compliance with regulatory requirements at 100%.

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 11 uncorrected findings of noncompliance identified in FFY 2020 were corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 and 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 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 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 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include the State’s analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2020	Target >=	37.80%	38.30%	38.80%	39.00%	25.00%
A	22.06%	Data	31.15%	36.22%	25.00%	24.17%	22.06%
B	2020	Target >=	65.00%	65.50%	66.00%	66.00%	69.94%
B	69.94%	Data	70.49%	63.78%	63.89%	64.33%	69.94%
C	2020	Target >=	79.00%	79.50%	86.20%	86.00%	82.30%
C	82.30%	Data	86.07%	88.19%	83.33%	75.83%	82.30%

FFY 2020 Targets

FFY	2021	2022	2023	2024	2025
Target A >=	25.50%	26.00%	26.50%	27.00%	27.50%
Target B >=	70.44%	70.94%	71.44%	71.94%	72.44%
Target C >=	82.80%	83.30%	83.80%	84.30%	84.80%

Targets: Description of Stakeholder Input

As discussed in the introduction, IDOE completed a review process related to Indiana’s General Supervision system including the annual determination process, Results Driven Accountability (RDA). As part of this process, a survey was released and stakeholders (families, school administrators, special education teachers, special education administrators, and others) were asked to provide feedback about the indicators and measures comprising RDA including Post-School Outcomes. Feedback from the survey indicates that in the future, LEAs would like additional emphasis on Post-School Outcomes in the Results Matrix for RDA.

FFY 2021 SPP/APR Data

Total number of targeted youth in the sample or census	946
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	794
Response Rate	83.93%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	192
2. Number of respondent youth who competitively employed within one year of leaving high school	379
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	12
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	72

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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Enrolled in higher education (1)	192	794	22.06%	25.50%	24.18%	Did not meet target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	571	794	69.94%	70.44%	71.91%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	655	794	82.30%	82.80%	82.49%	Did not meet target	No Slippage

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	2020	2021
Response Rate	84.44%	83.93%

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 2022 leavers, training has been held (to ensure the student and family contact data is updated and correct within the statewide IEP system to allow for increased contacts with students. Emphasis has been placed on the importance of entering data in the IEP system that reflects the primary language spoken by the student and in the family home. Training has also included information for teachers on the availability of and process for accessing a monthly newsletter to assist with the transition from high school. The newsletter is also a means to collect accurate contact data to increase the ability to connect with those who have exited. Indiana Department of Education (IDOE) will be partnering with the state parent training center (IN*SOURCE) to improve the response rate for the coming year. Sessions will be held monthly with IN*SOURCE to disseminate information to parents. At least two of these sessions will be centered around Transition to help parents understand Transition IEPs and the importance of collecting post-exit

data.

For the purpose of targeting underrepresented groups, the IDOE plans to begin using an electronic survey to reach out to all students who have exited and their parents as a first source of information gathering in the future. This method will ensure that all individuals with an email address will be contacted and offered the survey. Following the first round of communication and data collection, those who do not respond will be contacted by phone and email directly by a staff member to obtain survey results. IDOE is also developing a pilot program that would allow local education agencies to be the party that reaches out directly to students who have left school and their parents in the second round of communication. The intent is that students will likely find it more convenient and less invasive to speak with an individual/entity that they recognize as a familiar or known contact.

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.

In analysis of the response rate it was determined that there was no identified nonresponse bias, but there was underrepresentation. The sampling plan that is being utilized targets all schools equally and all students have the opportunity to participate in the survey.

Before a student exits, they are encouraged to sign up for the What's Next Newsletter which offers information to students and their families. Included in this is information related to the survey while offering them the opportunity to take it. In addition to this, IDOE reaches out to students and families using multiple contact methods, including phone, email, and mailers. Utilizing these methods, we hope to increase the amount of youth who are participating in the survey one year post exit.

As IDOE analyzed Indicator 14 it was identified that several school districts 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 provided to districts to ensure data is reported properly, so the students can be contacted in future surveys. In the next data cycle, IDOE will be utilizing data exchange, a move from separate data systems to a single data system, to increase data quality and data access from LEA to SEA level.

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

IDOE's analysis of response data indicates underrepresentation in the race/ethnicity areas of Black/African American by 7% and Hispanic by 4%. There is underrepresentation in the disability area of Emotional Disability by 3%.

These percentages are the raw percentage difference between the response population and the identified population. Values are considered not representative if they are not within +/- 3 percentage points of the population distribution and not within +/- ten percentage points of the expected value based on population parameters.

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.

IDOE will once again offer the survey in Spanish. Additionally, data is reviewed to identify the home language of the student to ensure the first contact is in the preferred language. The vendor employs interpreters that will reach out as the first contact when they are able to meet the language need. IDOE will identify local education agencies (LEAs) that have a larger population of students in the underrepresented areas identified and will look to work with those schools to identify opportunities to work together to increase responsiveness. IDOE plans to involve each district that is willing to participate in utilizing staff that are familiar with their own students to increase the number of student responses in all demographic categories.

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)

14 - Prior FFY 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.

Response to actions required in FFY 2020 SPP/APR

In analysis of the response rate it was determined that there was no identified nonresponse bias, but there was underrepresentation. The sampling plan that is being utilized targets all schools equally and all students have the opportunity to participate in the survey. Response data indicates underrepresentation in the race/ethnicity areas of Black/African American by 7% and Hispanic by 4%. There is underrepresentation in the disability area of Emotional Disability by 3%. These percentages are the raw percentage difference between the response population and the identified population. Values are considered not representative if they are not within +/- 3 percentage points of the population distribution and not within +/- ten percentage points of the expected value based on population parameters. To ensure that the state continues to sample a broad cross section of youth, Indiana will continue to work with LEAs to gather accurate data in a single data system, Data Exchange, rather than multiple information systems. Using this information IDOE has worked to identify primary language and primary language spoken in the home to assist surveyors in effectively gaining a response.

14 - OSEP Response

The State has submitted a revised sampling plan for this indicator and OSEP will respond under separate cover.

14 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 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.

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 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	50
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	34

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

As IDOE recently updated the targets for Indicator 15, stakeholder input was not requested.

Historical Data

Baseline Year	Baseline Data
2017	20.00%

FFY	2016	2017	2018	2019	2020
Target >=	74.00%	74.50%	75.00%	75.50%	20.00%
Data	35.09%	20.00%	36.51%	17.14%	52.17%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	20.50%	21.00%	21.50%	22.00%	22.50%

FFY 2021 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
34	50	52.17%	20.50%	68.00%	Met target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

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 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	73
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	15
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	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

As IDOE recently updated the targets for Indicator 16, stakeholder input was not requested.

Historical Data

Baseline Year	Baseline Data
2019	66.67%

FFY	2016	2017	2018	2019	2020
Target >=	76.00%	76.50%	77.00%	77.50%	67.00%
Data	90.48%	85.71%	81.63%	66.67%	74.00%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	68.00%	69.00%	70.00%	71.00%	72.00%

FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
15	35	73	74.00%	68.00%	68.49%	Met target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

Targets: In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, 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 2021 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 2021 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 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023; for the FFY 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2022-June 30, 2023).

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 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023 for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023)) 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)?

The State-Identified Measurable Result (SiMR) is currently:

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 has been used to measure progress toward the SiMR. Currently, due to the lack of LEA participation, there is 1 school participating in the intensive technical assistance that is a primary focus of the the current SSIP.

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

NO

Please provide a link to the current theory of action.

The State continues 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> (page 11).

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

As noted previously, the State is in the process of developing a revised Theory of Action based on data analysis indicating a lack of expected outcome related to the current SiMR and plan.

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	2021	2022	2023	2024	2025

Target> =	60.00%	60.50%	61.00%	61.50%	62.00%
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FFY 2021 SPP/APR Data

Numerator- Cohort Students Passing State Assessment	Denominator- Cohort Students Tested	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
61	68	76.61%	60.00%	89.71%	Met target	No Slippage

Provide the data source for the FFY 2021 data.

The data source for the FFY 2021 data is state reading assessment (IREAD-3) results for the participating school.

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

School districts in Indiana conduct the IREAD-3 assessment 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 (<https://www.in.gov/doi/it/data-center-and-reports/>). 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.

As part of the data analysis completed within the SSIP, the State has identified concerns related to the current SSIP. These barriers were included in the FFY 2020 SPP/APR description of newly identified barriers and steps to address. A primary barrier identified was a lack of stakeholder and LEA engagement. Throughout this implementation year, the state has developed a consistent stakeholder engagement process. This group has completed an extensive data analysis and has proposed that the State revise the SiMR.

The proposed SiMR is as follows:

Indiana will increase the percentage of preschool children aged 3-5 with IEPs who enter the preschool program below age expectations and demonstrate substantial growth in the area of positive social-emotional skills by the time they turn 6 or exit the program.

The State continues to engage in the Analysis phase of the SSIP and plans to continue engaging stakeholders to select coherent improvement strategies and develop the Theory of Action. As part of this process, the State Part B and Part C programs have developed a partnership to analyze the potential alignment of the State SSIP plans for Part B and Part C to expand the impact for the State.

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

YES

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

Additional data collected to assess progress toward the SiMR includes:

iReady Data for students participating in services from coaches/teachers completing training related to the SSIP demonstrates:

Beginning of Year:

39% of students scored Early, On, Mid or Above grade level in phonological awareness;

27% of students scored Early, On, Mid or Above grade level in phonics;

Middle of Year:

60% of students scored Early, On, Mid or Above grade level in phonological awareness;

56% of students scored Early, On, Mid or Above grade level in phonics;

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)

NO

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/doi/files/2021-22-SSIP-Report.pdf> (page 14).

The State is currently engaging with Stakeholders completing the 3 phases of the SSIP. Currently the Analysis phase is in process and the implementation plan includes moving to Phase II: Plan during the next reporting period. This will include include the development of an evaluation plan.

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

NO

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

Indiana continued to implement the following infrastructure improvement strategies in the reporting period: Systemic Alignment; MTSS/UDL, and; Early Literacy (Science of Reading).

1) Systemic Alignment: The purpose of Systemic Alignment is to align state and local efforts around the evidence-based practices (EBPs) targeted in the

- SSIP.
- 2) MTSS/UDL: The purpose of MTSS/UDL is to support schools in the implementation of an effective intervention model that identifies student need and provides access to evidence based interventions.
 - 3) Early Literacy: The purpose of Early Literacy is to provide statewide universal technical assistance in early literacy (Science of Reading), including targeted and intensive technical assistance for specific districts and schools.

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.

Systemic Alignment

Outcome Achieved Related to Governance: Diverse stakeholder engagement based on review of stakeholder participation reports (attendance/response rates) throughout the reporting year related to role (from the targeted stakeholder checklist). This strategy led to improved stakeholder representation and input related to systems improvement efforts of the current SSIP and planning for the revision of the SSIP.

Outcome Achieved Related to Governance and Professional Development: Following professional development related to the role/responsibility of the stakeholder, participants reported an increase understanding of the role (survey results). This strategy led to improved stakeholder representation and input related to the sustainability and consistent input related to current implementation and revision of the SSIP.

Outcome Achieved Related to Governance: Stakeholders report communication occurred at a frequency to effectively inform participation in SSIP guidance (survey results). This strategy led to improved stakeholder representation and input related to systems improvement efforts of the current SSIP and planning for the revision of the SSIP.

Outcome Achieved Related to Governance and Quality Standards: Stakeholders report information provided allowed for informed decision making related to SSIP guidance (survey results). This strategy led to improved stakeholder representation and input related to systems improvement efforts of the current SSIP and planning for the revision of the SSIP.

Outcome Achieved Related to Governance and Accountability: Project timelines were met (based on timelines defined in Gantt Chart).

MTSS/UDL and Early Literacy

Outcome Achieved Related to Technical Assistance: LEA staff report that the number of staff and students participating in training and services provided by trained teachers has increased.

Outcome Achieved Related to Technical Assistance: As noted in data presented previously, student performance is improving with ongoing technical assistance being provided.

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.

Systemic Alignment Next Steps:

- 1) Continue to implement practices to effectively inform and engage stakeholders to ensure informed input and consistent participation.
- 2) Continue to seek input from participating administrators, coaches, teachers and parents related to the outcomes achieved and any barriers identified to guide implementation of the current SSIP and complete Phase I of the SSIP revision and initiate Phase II.

MTSS/UDL and Early Literacy Next Steps:

- 1) Continue to support State sponsored intensive technical assistance to ensure necessary supports are provided as needed to effectively implement practices.
- 2) Continue to monitor school level fidelity of implementation to ensure improved student outcomes are achieved/improved.
- 3) Continue to monitor student level outcomes to ensure student outcomes are achieved/improved.

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

The evidence-based practices implemented in the reporting period include:

- 1) Intensive technical assistance has been provided to participating school as part of the Indiana Priorities for Early Literacy Implementation Plan (<https://media.doe.in.gov/news/indianas-priorities-for-early-literacy-final.pdf>).
- 2) Instructional Coaching to implement identified district-level change for SSIP schools (as noted in the Early Literacy Implementation plan linked above).
- 3) Science of Reading as defined within the Indiana Priorities for Early Literacy Implementation Plan (<https://media.doe.in.gov/news/indianas-priorities-for-early-literacy-final.pdf>).

Provide a summary of each evidence-based practices.

IDOE is supporting a coaching model as part of the Early Literacy Implementation Plan that includes intensive, on-going technical assistance and in-district instructional coaching. The purpose of coaching is to provide consistent, job-embedded support to teachers based on research-based practices. IDOE will provide transformational coaching to help teachers make appropriate instructional changes that will improve student outcomes through the implementation of the Science of Reading. Research supports the effectiveness of coaching, and shows that at its foundation, it has resulted in an "increase [of] the instructional capacity of schools and teachers, a known prerequisite for increasing learning" (Neufeld & Roper, 2003). The increase in instructional capacity leading to increased learning is the ultimate goal of all schools. Coaching, because of its emphasis on the involvement of educators as well as administrators and ongoing professional development, encourages program sustainability.

Research supports that the greatest benefit to coaching, as a form of professional development, is that the support is job-embedded and continuous (Darling-Hammond et al., 2017). When educators receive consistent and relevant support that can be used specific to the needs of their students and

themselves, they have a greater likelihood of implementing new instructional practices or carrying out new initiatives with fidelity. Because Indiana's Priorities for Early Literacy is rooted in the importance of early literacy instruction's focus on the Science of Reading, it requires that teachers are well-trained, regularly-supported, and continuously-developed in this approach to reading instruction. This accessibility to support is the missing piece for the majority of educator professional development. Providing a coach in schools will give teachers a common source of guidance and information that is necessary for them to seek improvement and change. It will also support and encourage a community of professionals continuing to learn from each other.

In addition to yielding results in student achievement, coaching provides high-quality professional development. In a study of student achievement before and after the implementation of a coaching model, "There was a significantly greater percentage of students scoring at proficiency and a significantly smaller percentage of students scoring at-risk in schools where coaches spent more time working with teachers" (Bean, 2010). These outcomes have been reflected in multiple states like Mississippi and Louisiana, which have also used coaching as the main strategy to improve student literacy achievement. Specifically, Neufeld and Roper (2003) outline the positive improvements resulting from implementing a coaching model:

- 1) Translation of teacher development into classroom practice;
- 2) A willingness among teachers to share their practice with one another and seek learning opportunities from peers and coaches as well as a willingness to assume collective responsibility for their students' learning;
- 3) High-quality principal leadership of instructional improvement;
- 4) Successful school cultures based on instruction being the focus of teacher and principal interaction; and
- 5) Instructional advancement informed by achievement data.

The Science of Reading is a term used to describe the body of research about "reading, reading development, and best practices for reading instruction" (Petscher et al., 2020). There are several important facts about this body of research (Defining Movement, 2021; Petscher et al., 2020):

1. It is interdisciplinary. These studies have been conducted by numerous independent researchers from separate, but connected, fields such as education, psychology (e.g., cognitive, developmental, school), linguistics, neuroscience, implementation science, etc.
2. It is substantial and well-established. It encompasses thousands of studies that have been conducted over the past 50 years.
3. It is high-quality and scientifically-based. These studies use methods and procedures that are "rigorous, systemic, and objective" (ESSA, S.1177 - 114th Congress 2015).

For additional information related to the evidence base for as part of the State Early Literacy Implementation Plan see <https://media.doe.in.gov/news/indianas-priorities-for-early-literacy-final.pdf>.

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.

Coaching: As noted previously, the greatest benefit to coaching, as a form of professional development, is that the support is job-embedded and continuous (Darling-Hammond et al., 2017). When educators receive consistent and relevant support that can be used specific to the needs of their students and themselves, they have a greater likelihood of implementing new instructional practices or carrying out new initiatives with fidelity resulting in improved student outcomes.

Intensive TA: Although many factors contribute to low literacy levels, it is important for schools and education professionals to focus on malleable factors. One of these factors is providing educators with high-quality professional development and training about the Science of Reading, which includes information about reading and the structure of language, reading development, and effective practices for instruction (Moats, 2020a; Seidenberg & Borkenhagen, 2020). The focus of the SSIP is to help educators better understand the Science of Reading to identify and implement effective instructional practices that can prevent reading difficulties and support literacy outcomes for students with disabilities.

Early Literacy: In addition to research about reading and reading development, the Science of Reading includes numerous scientific studies about effective reading instruction and intervention, including what to teach (content) and how to teach it (methods and practices). The results from these studies have been synthesized in numerous systematic reviews and meta-analyses and have important implications for teaching literacy to students in grades K-12. This will result in improved teacher practices and improved student outcomes.

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

The data collected to monitor fidelity of implementation and to assess practice change includes coach observation of teacher instruction with feedback and student outcome data.

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.

The current SSIP and the evidence-based practices identified will continue through the next reporting period. Anticipated outcomes include improved teacher practices and fidelity of implementation of the instructional practices being learned and continued improvement in student outcomes.

The district instructional coach will continue to participate in State supported intensive technical assistance related to the implementation of the Science of Reading. The instructional coach will implement the practices gained from technical assistance through a train-the-trainer model impacting teacher practices and ultimately student outcomes.

As part of the process to revise the SSIP and completion of the three phases, the State, with input from the Stakeholder group, will be identifying evidence based practices related to the proposed, revised SiMR as Phase1: Analysis continues.

Does the State intend to continue implementing the SSIP without modifications? (yes/no)

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

The state will continue the current SSIP. The evaluation data analyzed to support the decision to implement the current SSIP without modifications includes:

The SiMR performance data indicates a continue increase the student performance on the State reading assessment (IREAD-3).

Reports from staff participating in intensive TA indicates

Reports from Administrators of participating schools indicates

Following the next reporting period, the current plan will be sustained through support from IDOE unrelated to the SSIP.

The State intends to provide information related to SSIP modifications in the next annual performance report. This will be based on the continued Phase I analysis and the upcoming Phase II plan development.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The SSIP team engaged a broad base of stakeholders in 21-22. Stakeholders were intentionally invited to engage in key improvement efforts through a campaign of emails to stakeholders from the SSIP team, inviting them to participate.

Stakeholders included:

(a) the State Technical Assistant representatives;

(b) participants from SSIP LEAs;

(c) parent representatives;

(d) Indiana Family and Social Services Administration (FSSA) representatives; and

(e) IDOE SSIP stakeholders (SSIP Coordinator, Early Childhood Specialist, Special Education Administrator, Student Supports Administrator, Early Literacy Specialist, Preschool Assessment Specialist, Fiscal Administrator, and Information Technology Administrator).

The SSIP team convened stakeholders quarterly over the course of the year in March, June, September, and December 2022.

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

Throughout the year, the SSIP team used specific strategies to engage stakeholders. In addition to receiving emails with dates and reminders of meetings, stakeholders were also sent pre-reading and pre-work for each meeting, ensuring stakeholders had the opportunity to come to the meeting more prepared. Stakeholders also had opportunities to provide feedback through meeting discussions and post-meeting surveys, discussed later in this section.

Meeting topics included:

(a) an overview of SSIP, including the history, definition, current SSIP plan, and Theory of Action;

(b) explanations of meaningful stakeholder engagement and stakeholders' role in the process;

(c) the FFY 2020 evaluation plan;

(d) infrastructure development and its accomplishments and needed improvements;

(e) evidence-based practices;

(f) SiMR and progress towards goals;

(g) other data, including preschool outcomes, graduation rates, ISPROUT, and ILEARN; and

(h) preschool and national discipline data.

During quarterly meetings, time for discussion, questions, and feedback was built into the agenda throughout the meetings and at the conclusion.

Stakeholders were surveyed throughout the year. Ahead of the Quarter 1 stakeholder meeting, stakeholders were surveyed to share their prior knowledge of SSIP, the areas the SSIP team should prioritize in the meeting, their perceived degree of helpfulness of the SSIP, and an open response for additional information the SSIP team could provide. In the Quarter 1 survey, half of respondents were unsure about their knowledge of SSIP, while 50% felt they had a good understanding of it. Respondents shared that they would like to prioritize stakeholder education, technical assistance activities, and the evaluation plan during the Quarter 1 meeting. The survey results were used to build the agenda for the sequence and content of the quarterly meetings.

Following the last quarterly meeting, another survey was administered. All participants shared that they understood their role as a stakeholder after attending the stakeholder meetings. One hundred percent of respondents indicated that the information provided to them from IDOE was timely and allowed stakeholders to effectively make informed decisions, and all survey respondents indicated that they would like to continue participating as an SSIP stakeholder. Based on the Quarter 4 survey, areas for improvement emerged. SSIP stakeholders shared that a more strategic effort is needed to ensure that the data collected and findings could be implemented to impact student achievement. Stakeholders expressed that more action is needed after results are analyzed so that the results can be useful in informing improvements.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

The State is addressing concerns expressed by stakeholders through the process of analysis as defined within the three phases of the SSIP. Based on the analysis completed thus far, the State, with stakeholder input, identified that preschool outcomes are the area in most need of support. This identification led to the proposed, revised SiMR discussed previously.

An analysis of the State infrastructure to support improvement and build capacity is underway with the stakeholder group, which will lead to the selection of coherent improvement strategies and the potential revision of the Theory of Action.

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.

As noted previously, the State intends to revise the SSIP and continue implementing the three phases of the SSIP. Currently, the State, with a stakeholder group, have completed a portion of the Analysis Phase and intend to continue in this phase, moving then to the Phase II: Plan.

Activities to be completed in the next fiscal year include:

- 1) Confirm final version of the SiMR
- 2) Continue Analysis of the State Infrastructure to Support Improvement and Build Capacity;
- 3) Select Coherent Improvement Strategies
- 4) Develop the State Theory of Action
- 5) Determine Infrastructure Development Plan including the plan to support LEAs in the Implementation of the identified evidence based practices
- 6) Develop the Evaluation Plan

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

Related to the revision plan:

- 1) Complete Phase I by May 2023
- 2) Complete Phase II by December 2023
- 3) Submit SSIP (with modifications) as part of the SPP/APR by February 2024

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

No newly identified barriers have been identified related to the current SSIP.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

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:

Angela Vaughn

Title:

Assistant Director of Monitoring & Compliance

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317-234-5941

Submitted on:

04/26/23 9:14:02 AM

Determination Enclosures

RDA Matrix

2023 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination¹

Percentage (%)	Determination
91.67%	Meets Requirements

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	24	24	100.00%
Compliance	18	15	83.33%

2023 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	94%	2
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	90%	2
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	30%	2
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	98%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	31%	2
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	98%	1

Math Assessment Elements

Math Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	94%	2
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	90%	2
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	56%	2
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	97%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	26%	2
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	97%	1

¹ For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B."

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	10	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	80	2

*Due to privacy concerns the Department has chosen to suppress this calculation.

**When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. § 300.102(a)(3)(iv), in effect June 30, 2017, "the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential."

2023 Part B Compliance Matrix

Part B Compliance Indicator ²	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	0.00%	YES	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.52%	YES	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	1.16%	NO	2
Indicator 11: Timely initial evaluation	97.28%	NO	2
Indicator 12: IEP developed and implemented by third birthday	96.19%	NO	2
Indicator 13: Secondary transition	52.99%	NO	0
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			1
Specific Conditions	None		
Uncorrected identified noncompliance	Yes, 2 to 4 years		

² The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR_Measurement_Table.pdf

Data Rubric

FFY 2021 APR³

Part B Timely and Accurate Data -- SPP/APR Data		
APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1
	Subtotal	21
APR Score Calculation	Timely Submission Points - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right.	5
	Grand Total - (Sum of Subtotal and Timely Submission Points) =	26

³ In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

	618 Data ⁴			
Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 4/6/22	1	1	1	3
Personnel Due Date: 11/2/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Discipline Due Date: 11/2/22	1	1	1	3
State Assessment Due Date: 12/21/2022	1	1	1	3
Dispute Resolution Due Date: 11/2/22	1	1	1	3
MOE/CEIS Due Date: 5/4/22	1	1	1	3
			Subtotal	21
618 Score Calculation			Grand Total (Subtotal X 1.23809524) =	26.00

⁴ In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation	
A. APR Grand Total	26
B. 618 Grand Total	26.00
C. APR Grand Total (A) + 618 Grand Total (B) =	52.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator*) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

***Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.**

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2023 Submission

SPP/APR Data

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

Part B 618 Data

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

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	C002 & C089	1 st Wednesday in April
Part B Personnel	C070, C099, C112	1 st Wednesday in November
Part B Exiting	C009	1 st Wednesday in November
Part B Discipline	C005, C006, C007, C088, C143, C144	1 st Wednesday in November
Part B Assessment	C175, C178, C185, C188	Wednesday in the 3 rd week of December (aligned with CSPR data due date)
Part B Dispute Resolution	Part B Dispute Resolution Survey in EMAPS	1 st Wednesday in November
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in EMAPS	1 st Wednesday in May

2) Complete Data – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to EDFacts aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in EMAPS. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

<https://sites.ed.gov/idea/how-the-department-made-determinations/>