

**State Performance Plan / Annual Performance Report:  
Part B**

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

**For reporting on  
FFY18**



**PART B DUE February 3, 2020**

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

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

The Indiana State Education Agency (SEA) is the Indiana Department of Education (IDOE). The Office of Special Education (OSE) is part of the IDOE Academics Division. The SEA offers support to the OSE through ancillary divisions such as Finance, Communications, General Counsel, Government Affairs, Assessment, Accountability, Data Management, and Academics. Please visit the Indiana website at <https://www.doe.in.gov/> for an organizational chart.

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

Indiana appreciates the direction outlined in the U.S. Department of Education's Framework for Special Education on Rehabilitative Services Priorities - Raising expectations and improving outcomes for individuals with disabilities. The OSE, based on the Every Student Succeed Act and the Office of Special Education Programs (OSEP) Dear Colleague Letter on the Provision of a Free Appropriate Public Education (FAPE), has established the foundation for our state's Every Student Succeeds initiative. This initiative is represented via an infographic that contains the following key provisions:

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

In November 2019, Indiana made Local Educational Agency (LEA) determinations based upon a Results Driven Accountability (RDA) system which includes differentiated support. Results indicators and other results data, compliance indicators and data timeliness are components and the cornerstone of RDA. Each of these components are then made up of specific elements which are assigned points dependent upon whether a target is met. These points are part of a calculation by which the LEA determination is assigned and differentiated support is decided. This has been a multi-year project developed and implemented on the input and advice of stakeholders from throughout Indiana.

The OSE has twenty-one dedicated staff members that provide general supervision to the state. These staff are members of three teams (Fiscal, Dispute Resolution, and, Technical Assistance/Monitoring). Indiana also has the Indiana Resource Network (IRN), made up of technical assistance (TA) entities that provide training and TA, working directly with LEA staff across the state.

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

401

#### General Supervision System

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

See uploaded Attachment A: General Supervision System (Introduction)

#### Technical Assistance System

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

For purposes of this section, technical assistance (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. With the implementation of RDA, the support will be matched to the LEA determination and/or results indicator level, and subsequent assistance will be differentiated.

In Indiana, the provision of LEA TA and professional development go hand in hand. Dependent upon the subject matter and the intensity of the need, the OSE offers various levels of TA and/or professional development.

The OSE provides TA and professional development based upon three levels of need: universal, targeted, and intensive.

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

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

The intensive level of assistance focuses on LEAs with issue(s) identified as systemic and/or requiring rigorous LEA work and focused assistance by the OSE and/or the IRN. Assistance will be individualized dependent upon the identified issue(s) and could include one-to-one consultation (telephone, email, on site) and/or topic specific training provided to LEA staff by the OSE and/or IRN contracted vendors.

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

With the implementation of RDA, there will be a direct correlation between the LEA determination level and the level of assistance provided (differentiated).

## Professional Development System

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

See uploaded Attachment B: Professional Development System (Introduction)

### Stakeholder Involvement

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

The development and ongoing implementation of RDA involved stakeholders from the beginning. A core group of stakeholders developed the framework and detailed in the executive summary above from the reauthorized Every Student Succeeds Act/Dear Colleague guidance on FAPE. Once the framework was completed other stakeholders provided input and suggestions for changes. Stakeholders included the SAC, the entities of the IRN (including a parent resource center), the Indiana Council of Administrators of Special Education, and a large group of school personnel (principals, general education and special education teachers, psychologists, speech and language pathologists, etc.). This group identified the areas that should be part of the RDA calculation, and 'weighted' the various elements for importance. The group also assisted with the plan to roll out information on RDA across Indiana. The information and input received from stakeholders at the OSE data retreats in 2019 were incorporated into our current RDA system.

In the course of the development of the State Performance Plan (SPP) input was obtained from parent groups, LEAs, other state agencies, and institutions of higher education. As targets for specific indicators were revised through FFY 2012 (SY 12-13) the OSE obtained stakeholder input from SAC. Additionally, there is a specific stakeholder group that has been developed to address and include stakeholder input and engagement with regard to Indicator 17, the State Systemic Improvement Plan. The members of this stakeholder group are a diverse group of members from various internal and external departments and organizations that are able to provide support to the development and implementation of the SSIP.

In preparation for the FFY 2013 through FFY 2018 SPP, the OSE prepared trend data information for each of the indicators and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information and as the result of that discussion identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities as well as teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities.

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

NO

### Reporting to the Public

**How and where the State reported to the public on the FFY17 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 2017 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2017 APR in 2019, is available.**

The FFY 2016 performance of each LEA located in the State on the targets in the SPP/APR are posted at <https://www.doe.in.gov/specialed/data>. The OSE sent a hard copy letter to each Local Education Agency (LEA) superintendent as well as an electronic copy to the local director of special education. These letters include an attachment that reflects the performance of the LEA. The letters are found at <https://www.doe.in.gov/specialed/results-driven-accountability>.

In addition, see Compass/INview at <https://inview.doe.in.gov/>. This has detailed data for the state, as well as local education agencies. See also Annual School Performance Reports at <https://www.doe.in.gov/accountability/annual-school-performance-reports>.

## Intro - Prior FFY Required Actions

While the State has publicly reported on the FFY 2015 (July 1, 2015-June 30, 2016) performance of each LEA located in the State on the targets in the State's performance plan as required by section 616(b)(2)(C)(ii)(I) of IDEA, those reports did not contain, as specified in the OSEP Response, all of the required information. With its FFY 2018 SPP/APR, the State must provide a Web link demonstrating that the State has fully reported to the public on the performance of each LEA located in the State on the targets in the SPP/APR for FFY 2015. In addition, the State must report with its FFY 2018 SPP/APR, how and where the State reported to the public on the FFY 2017 performance of each LEA located in the State on the targets in the SPP/APR. In the FFY 2018 SPP/APR, the State must report FFY 2018 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year 4; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2019); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short- and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities are impacting the State's capacity to improve its SiMR data.

### Response to actions required in FFY 2017 SPP/APR

The Web link demonstrating that the State has fully reported to the public on the performance of each LEA located in the State on the targets in the SPP/APR for FFY2015 and FFY2017 (along with other years) is: <https://www.doe.in.gov/specialed/data>

FFY2018 data for the State-identified Measurable Result (SiMR), as well as the report on activities implemented, measures and outcomes, and a summary of the improvement strategies associated with the State Systemic Improvement Plan (SSIP) will be addressed in the April 1, 2020 SSIP submission.

## Intro - OSEP Response

States were instructed to submit Phase III Year Four of the State Systemic Improvement Plan (SSIP), indicator B-17, by April 1, 2020. The State provided the required information. The State provided a FFY 2019 target for the SSIP, however, OSEP cannot accept the target because the State's end target for FFY 2019 does not reflect improvement over the baseline data. The State must revise its FFY 2019 target to reflect improvement.

## **Intro - Required Actions**

In the FFY 2019 SPP/APR, the State must provide a FFY 2019 target that reflects improvement over baseline and report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short- and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities are impacting the State's capacity to improve its SiMR data.

OSEP notes that one or more of the attachments included in the State's FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

## Indicator 1: Graduation

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

#### Data Source

Same data as used for reporting to the Department of Education (Department) under Title I of the Elementary and Secondary Education Act (ESEA).

#### Measurement

States may report data for children with disabilities using either the four-year adjusted cohort graduation rate required under the ESEA or an extended-year adjusted cohort graduation rate under the ESEA, if the State has established one.

#### Instructions

Sampling is not allowed.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2018 SPP/APR, use data from 2017-2018), and compare the results to the target. Provide the actual numbers used in the calculation.

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

Targets should be the same as the annual graduation rate targets for children with disabilities under Title I of the ESEA.

States must continue to report the four-year adjusted cohort graduation rate for all students and disaggregated by student subgroups including the children with disabilities subgroup, as required under section 1111(h)(1)(C)(iii)(II) of the ESEA, on State report cards under Title I of the ESEA even if they only report an extended-year adjusted cohort graduation rate for the purpose of SPP/APR reporting.

## 1 - Indicator Data

### Historical Data

Baseline	2012	71.72%			
FFY	2013	2014	2015	2016	2017
Target >=	64.00%	67.00%	70.00%	72.00%	74.00%
Data	69.29%	73.41%	70.87%	72.03%	70.87%

### Targets

FFY	2018	2019
Target >=	76.00%	76.50%

### Targets: Description of Stakeholder Input

### Prepopulated Data

Source	Date	Description	Data
SY 2017-18 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696)	10/02/2019	Number of youth with IEPs graduating with a regular diploma	6,891
SY 2017-18 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696)	10/02/2019	Number of youth with IEPs eligible to graduate	9,487
SY 2017-18 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec FS150; Data group 695)	10/02/2019	Regulatory four-year adjusted-cohort graduation rate table	72.64%

### FFY 2018 SPP/APR Data

Number of youth with IEPs in the current year's adjusted cohort graduating with a regular diploma	Number of youth with IEPs in the current year's adjusted cohort eligible to graduate	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
6,891	9,487	70.87%	76.00%	72.64%	Did Not Meet Target	No Slippage

**Graduation Conditions**

**Choose the length of Adjusted Cohort Graduation Rate your state is using:**

4-year ACGR

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

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 with disabilities are the same as those without.

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

NO

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

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

**1 - Required Actions**

## Indicator 2: Drop Out

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with IEPs dropping out of high school. (20 U.S.C. 1416 (a)(3)(A))

#### Data Source

OPTION 1:

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification C009.

OPTION 2:

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

#### Measurement

OPTION 1:

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

OPTION 2:

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

#### Instructions

Sampling is not allowed.

OPTION 1:

Use 618 exiting data for the year before the reporting year (e.g., for the FFY 2018 SPP/APR, use data from 2017-2018). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) received a certificate; (c) reached maximum age; (d) dropped out; or (e) died.

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

OPTION 2:

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

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

Options 1 and 2:

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 2018 SPP/APR, use data from 2017-2018), and compare the results to the target.

Provide a narrative that describes what counts as dropping out for all youth and, if different, what counts as dropping out for youth with IEPs. If there is a difference, explain.

## 2 - Indicator Data

### Historical Data

Baseline	2011	10.76%			
FFY	2013	2014	2015	2016	2017
Target <=	9.01%	8.51%	8.01%	7.51%	7.01%
Data	8.51%	6.94%	7.60%	5.90%	7.04%

### Targets

FFY	2018	2019
Target <=	6.51%	6.01%

### Targets: Description of Stakeholder Input

The Indiana Department of Education, Office of Special Education (OSE) has analyzed the data from past Annual Performance Reports to determine appropriate, achievable, yet rigorous targets for 2013-2019.

The Indiana Department of Education, Office of Special Education included stakeholder input from the State Advisory Council on the Education of Children with Disabilities (SAC), as well as other constituents, to set the targets submitted for 2013-2019.

In addition, OSE met with the Executive Board of the Indiana Council of Administrators of Special Education (ICASE) to determine the FFY 2019 targets.

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

Option 1

### Prepopulated Data

Source	Date	Description	Data
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SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	5,690
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b)	852
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c)	36
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d)	535
SY 2017-18 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/30/2019	Number of youth with IEPs (ages 14-21) who exited special education as a result of death (e)	16

**FFY 2018 SPP/APR Data**

Number of youth with IEPs who exited special education due to dropping out	Total number of High School Students with IEPs by Cohort	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
535	7,129	7.04%	6.51%	7.50%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

Indiana saw a commensurate increase in dropouts among the population of students in the general education program only. Slippage is likely due to an increased scrutiny on local LEAs in proper reporting of student dropouts. Graduation rates saw increases in both students with and without disabilities. No major change in graduation requirements was put in place for FFY2018.

**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 is 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 22. 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

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

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

**2 - Required Actions**

## Indicator 3B: Participation for Students with IEPs

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

B. 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. 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 3B: Provide separate reading/language arts and mathematics participation rates, inclusive of all ESEA grades assessed (3-8 and high school), for children with IEPs. Account for ALL children with IEPs, in all grades assessed, 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.

## 3B - Indicator Data

### Reporting Group Selection

Based on previously reported data, these are the grade groups defined for this indicator.

Group	Group Name	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	HS
A	Overall	X	X	X	X	X	X	X	X	X	X	X

### Historical Data: Reading

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2005	Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
A	Overall	96.87%	Actual	96.58%	96.73%	88.66%	95.39%	97.06%

### Historical Data: Math

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2005	Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
A	Overall	96.87%	Actual	96.94%	97.68%	88.95%	96.03%	97.52%

### Targets

	Group	Group Name	2018	2019
Reading	A >=	Overall	95.00%	95.00%
Math	A >=	Overall	95.00%	95.00%

### Targets: Description of Stakeholder Input

OSE met with the Executive Board of the Indiana Council of Administrators of Special Education (ICASE) to determine the FFY 2019 targets.

### FFY 2018 Data Disaggregation from EDFacts

Include the disaggregated data in your final SPP/APR. (yes/no)

YES

#### Data Source:

SY 2018-19 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

#### Date:

04/08/2020

### Reading Assessment Participation Data by Grade

Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	13,214	13,302	13,526	12,922	12,494	12,262		10,883			
b. IEPs in regular assessment with no accommodations	4,482	3,721	3,086	2,450	2,181	2,116		932			
c. IEPs in regular assessment with accommodations	7,982	8,751	9,588	9,473	9,266	8,979		8,489			
f. IEPs in alternate assessment against alternate standards	682	748	787	927	950	1,078		1,052			

**Data Source:**

SY 2018-19 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

04/08/2020

**Math Assessment Participation Data by Grade**

Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs	13,218	13,305	13,534	12,926	12,497	12,264		10,887			
b. IEPs in regular assessment with no accommodations	4,409	3,611	2,919	2,187	1,886	1,742		847			
c. IEPs in regular assessment with accommodations	8,064	8,863	9,752	9,718	9,557	9,346		8,599			
f. IEPs in alternate assessment against alternate standards	682	742	780	921	952	1,076		1,052			

**FFY 2018 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	88,603	87,720	97.06%	95.00%	99.00%	Met Target	No Slippage

**FFY 2018 SPP/APR Data: Math Assessment**

Group	Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	88,631	87,705	97.52%	95.00%	98.96%	Met 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.

Navigate to <https://www.doe.in.gov/specialed/data>, scroll to the section "618 Reporting," open the file "Compliance/Results Indicator Data For All Corporations Compared to Targets SY2018-2019," then select the tab "3 - Assessment," or select from the Table of Contents tab.

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

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

None

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

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

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 at the State, district and school levels. Additionally, the State has not reported the number of children with disabilities, if any, participating alternate academic achievement standards, at the State, district, and school levels. 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 2020 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2018, 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 2019 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2019.

## Indicator 3C: Proficiency for Students with IEPs

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### 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 grade level and 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)]. Calculate separately for reading and math. 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 reading/language arts and mathematics assessments (combining regular and alternate) for children with IEPs, in all grades assessed (3-8 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

### Reporting Group Selection

Based on previously reported data, these are the grade groups defined for this indicator.

Group	Group Name	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12	HS
A	Overall	X	X	X	X	X	X	X	X	X	X	X

### Historical Data: Reading

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2018	Target >=	48.00%	54.00%	60.00%	62.00%	64.00%
A	Overall	17.90%	Actual	55.12%	32.33%	25.72%	27.58%	26.96%

### Historical Data: Math

Group	Group Name	Baseline	FFY	2013	2014	2015	2016	2017
A	Overall	2018	Target >=	57.00%	61.00%	65.00%	67.00%	69.00%
A	Overall	18.91%	Actual	63.37%	35.41%	25.69%	25.36%	27.84%

### Targets

	Group	Group Name	2018	2019
Reading	A >=	Overall	17.90%	18.15%
Math	A >=	Overall	18.91%	19.26%

### Targets: Description of Stakeholder Input

OSE met with the Executive Board of the Indiana Council of Administrators of Special Education (ICASE) to determine the FFY 2019 targets.

### FFY 2018 Data Disaggregation from EDFacts

Include the disaggregated data in your final SPP/APR. (yes/no)

YES

#### Data Source:

SY 2018-19 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

#### Date:

04/08/2020

### Reading Proficiency Data by Grade

Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs who received a valid score and a proficiency was assigned	13,146	13,220	13,461	12,850	12,397	12,173		10,473			
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,005	1,664	1,313	1,031	944	835		370			
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	493	484	519	553	542	600		1,472			
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	300	322	377	398	461	510		506			

**Data Source:**

SY 2018-19 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

04/08/2020

**Math Proficiency Data by Grade**

Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs who received a valid score and a proficiency was assigned	13,155	13,216	13,451	12,826	12,395	12,164		10,498			
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,711	2,093	1,443	990	773	570		178			
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,185	1,063	799	635	477	386		546			
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	396	351	361	419	437	434		334			

**FFY 2018 SPP/APR Data: Reading Assessment**

Group	Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	87,720	15,699	26.96%	17.90%	17.90%	Met Target	No Slippage

**FFY 2018 SPP/APR Data: Math Assessment**

Group	Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A	Overall	87,705	16,581	27.84%	18.91%	18.91%	Met 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.

Navigate to <https://www.doe.in.gov/specialed/data>, scroll to the section "618 Reporting," open the file "Compliance/Results Indicator Data For All Corporations Compared to Targets SY2018-2019," then select the tab "3 - Assessment," and "3 - Accommodations" or select from the Table of Contents tab.

Provide additional information about this indicator (optional)

Baseline has been reset to reflect a new statewide testing protocol for FFY2018.

### 3C - Prior FFY Required Actions

None

### 3C - OSEP Response

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

The State provided FFY 2019 targets for this indicator, and OSEP accepts those targets.

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 and alternate assessments based on alternate academic achievement standards, at the State, district, and school levels. 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 2020 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2018, 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 2019 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2019.

## Indicator 4A: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

A. Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs

(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 districts that meet the State-established n size (if applicable) that have a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year of children with IEPs) divided by the (# of districts in the State that meet the State-established n size (if applicable))] times 100.

Include State's definition of "significant discrepancy."

#### Instructions

If the State has established a minimum n size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts 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 2018 SPP/APR, use data from 2017-2018), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions 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.

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n 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 district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy 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 the Office of Special Education Programs (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 2018 SPP/APR, the data for 2017-2018), 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	2016	0.00%			
FFY	2013	2014	2015	2016	2017
Target <=	1.40%	1.30%	1.20%	0.43%	0.33%
Data	1.94%	1.62%	0.53%	0.00%	NVR

### Targets

FFY	2018	2019
Target <=	0.23%	0.00%

### Targets: Description of Stakeholder Input

OSE met with the Executive Board of the Indiana Council of Administrators of Special Education (ICASE) to determine the FFY 2019 targets.

### FFY 2018 SPP/APR Data

**Has the state established a minimum n-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 size. Report the number of districts excluded from the calculation as a result of the requirement.**

Number of districts that have a significant discrepancy	Number of districts that met the State's minimum n size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1	14	NVR	0.23%	7.14%	Did Not Meet Target	N/A

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

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

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

Indiana Department of Education defines Indicator 4A "significant discrepancy of students with disabilities in the rates of suspensions and expulsions greater than 10 days" as an incidence rate that is two times higher than the State rate for three consecutive years. Indiana has a required minimum "n" size of 15 students with a disability suspended or expelled for more than 10 days in a school year as well as a minimum of 15 students in the comparison group. The relative risk ratio will be computed as a ratio of the risk index of all races/ethnicities of students with disabilities in the LEA to the risk index of all races/ethnicities of students with disabilities combined in the state for out of school suspension/expulsion totaling more than 10 days. (LEA rate compared to STATE rate for students with disabilities.)

Indiana notified the LEAs that the annual data analysis reflected possible noncompliance (over the Indiana defined risk ratio threshold) with this indicator and required each LEA to participate in a policy, procedure and practice file review. This review was consistent with the requirements under 34 CFR §300.170(b) relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. If the LEA exceeded the threshold, then the LEA policies and procedures are reviewed and a minimum of 5 files (to determine practice) reviewed on students who were evaluated and identified as students with disabilities. If policies, procedures, and/or practices were determined to be inappropriate, findings of noncompliance would be issued.

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

**Review of Policies, Procedures, and Practices (completed in FFY 2018 using 2017- 2018 data)**

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

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

LEAs were notified that the annual data analysis reflected possible noncompliance (over the Indiana defined risk ratio threshold of 2.0) for this indicator.

Each LEA was required to participate in a policy and procedure review which included the following information:

- Requiring that the case conference committee consider positive behavioral interventions and supports to address any of the student's behaviors that impede the student's learning or the learning of others
- Requiring teachers of record to ensure that a student's IEP, including any behavioral intervention plan, is being implemented as written
- Explaining that the school will count a short-term removal from the student's placement for any part of the student's day as a day of suspension when the removal is not pursuant to the student's IEP
- Requiring compliance with I.C. 20-33-8-7 when a student is removed from the student's placement for any part of the day when the removal is not pursuant to the student's IEP
- Describing who is responsible for determining if a change of placement has occurred when a student has been removed/suspended for more than 10 cumulative days in a school year
- Describing the factors to be taken into account when making that decision
- Describing when the case conference committee must meet to determine if the student's misconduct is a manifestation of the student's disability
- Describing what the case conference committee must consider in determining if the misconduct is a manifestation of the student's disability
- Describing when a functional behavioral assessment is required to be conducted
- Describing what information is to be included in a functional behavioral assessment, and how it is to be conducted
- Requiring that a functional behavioral assessment be conducted prior to developing a behavioral intervention plan
- Describing what must be included in a behavioral intervention plan

Each LEA was required to participate in a file review (practices) (minimum of 5 files). Topics/areas reviewed:

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

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

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

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

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification included a review of updated policies, procedures and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). The IDOE also collected, reviewed and verified subsequent data by obtaining a new randomized sample to ensure that the LEAs were correctly implementing the regulatory requirements by achieving 100% compliance.

**Correction of Findings of Noncompliance Identified in FFY 2017**

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 2017 Findings of Noncompliance Verified as Corrected**

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

Three LEAs had a finding of noncompliance and were verified as corrected.

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review, and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification included a review of updated policies, procedures and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). The IDOE also collected, reviewed and verified subsequent data by obtaining a new randomized sample to ensure that the LEAs were correctly implementing the regulatory requirements by achieving 100% compliance.

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review, and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific

reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2013	1	0	1

**FFY 2013**

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

**Actions taken if noncompliance not corrected**

Please see introduction for more information on the LEA that is currently on Special Conditions for the Part B funds.

**4A - Prior FFY Required Actions**

The State did not provide valid and reliable data for FFY 2017. The State must provide valid and reliable data for FFY 2018 in the FFY 2018 SPP/APR.

**Response to actions required in FFY 2017 SPP/APR**

Upon further investigation, there was an error in the 2/1/19 FFY17 APR submission in regard to the number of LEAs and how each are categorized for calculation purposes. The error was discovered in the category 'LEAs that did not have 3 years of data'. The number should be 37 instead of 18. This then changes the total LEAs to 394, which matches the 394 mentioned in the introduction.

2/1/2019 (contained a mistake)

Compliant LEAs 8

Noncompliant LEAs 3

LEAs did not meet N-size 345

LEAs that did not have 3 years of data 18\*

LEAs with special conditions 1

TOTAL 375

2/1/2020 (Correction)

Compliant LEAs 8

Noncompliant LEAs 3

LEAs did not meet N-size 345

LEAs that did not have 3 years of data 37\*

LEAs with special conditions (longstanding noncompliance) 1

TOTAL 394

Due to this mistake\* the number of districts excluded from the calculation as a result of the requirement should have said 382 and not 363.

**4A - OSEP Response**

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

The State must report, in the FFY 2019 SPP/APR, on the correction of noncompliance that the State identified in FFY 2018 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 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

**4A - Required Actions**

## Indicator 4B: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### 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 districts that meet the State-established n size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of districts in the State that meet the State-established n 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 size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts 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 2018 SPP/APR, use data from 2017-2018), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions 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.

Indicator 4B: Provide the following: (a) the number of districts that met the State-established n size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) the number of those districts 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 district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy 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 the Office of Special Education Programs (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 2018 SPP/APR, the data for 2017-2018), 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	2016	0.00%			
FFY	2013	2014	2015	2016	2017
Target	0%	0%	0%	0%	0%
Data	2.50%	0.27%	0.53%	0.00%	NVR

### Targets

FFY	2018	2019

Target	0%	0%
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**FFY 2018 SPP/APR Data**

**Has the state established a minimum n-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 size. Report the number of districts excluded from the calculation as a result of the requirement.**

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Number of districts that have a significant discrepancy, by race or ethnicity	Number of those districts that have policies procedure, or practices that contribute to the significant discrepancy and do not comply with requirements	Number of districts that met the State's minimum n size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1	1	3	NVR	0%	33.33%	Did Not Meet Target	N/A

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

YES

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

Indiana'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 a risk ratio for a given racial/ethnic group that is greater than 2.0 for three consecutive years. Indiana has a required minimum "n" size of 15 students with a disability in any of the racial/ethnic groups suspended or expelled for more than 10 days in a school year as well as a minimum of 15 students with a disability in the comparison group. The relative risk ratio will be computed as a ratio of the risk index of a race-ethnicity of students with disabilities in the LEA to the risk index of all races-ethnicities of students with disabilities combined in the state for out of school suspension/expulsion totaling more than 10 days. (LEA rate compared to State rate for students with disabilities by race.)

Indiana notified the LEAs that the annual data analysis (of the suspension/expulsion of students with disabilities for greater than 10 days) reflected possible noncompliance (over the Indiana defined risk ratio threshold) with this indicator and required each LEA to participate in a policy, procedure, and practice file review. This review was consistent with the requirements under 34 CFR §300.170(b) relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. If the LEA exceeded the threshold, then the LEA policies and procedures are reviewed and a minimum of 5 files (to determine practice) were reviewed on students who were evaluated and identified as students with disabilities. If policies, procedures, and/or practices were determined to be inappropriate, findings of noncompliance were issued.

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

**Review of Policies, Procedures, and Practices (completed in FFY 2018 using 2017-2018 data)**

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

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

LEAs were notified that the annual data analysis reflected possible noncompliance (over the Indiana defined risk ratio threshold of 2.0) for this indicator.

Each LEA was required to participate in a policy and procedure review which included the following information:

- Requiring that the case conference committee consider positive behavioral interventions and supports to address any of the student's behaviors that impede the student's learning or the learning of others
- Requiring teachers of record to ensure that a student's IEP, including any behavioral intervention plan, is being implemented as written
- Explaining that the school will count a short-term removal from the student's placement for any part of the student's day as a day of suspension when the removal is not pursuant to the student's IEP
- Requiring compliance with I.C. 20-33-8-7 when a student is removed from the student's placement for any part of the day when the removal is not pursuant to the student's IEP
- Describing who is responsible for determining if a change of placement has occurred when a student has been removed/suspended for more than 10 cumulative days in a school year
- Describing the factors to be taken into account when making that decision
- Describing when the case conference committee must meet to determine if the student's misconduct is a manifestation of the student's disability
- Describing what the case conference committee must consider in determining if the misconduct is a manifestation of the student's disability
- Describing when a functional behavioral assessment is required to be conducted
- Describing what information is to be included in a functional behavioral assessment and how it is to be conducted
- Requiring that a functional behavioral assessment be conducted prior to developing a behavioral intervention plan

Describing what must be included in a behavioral intervention plan

Each LEA was required to participate in a file review (practices) (minimum of 5 files). Topics/areas reviewed:

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

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

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

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

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

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

**Correction of Findings of Noncompliance Identified in FFY 2017**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	0	2	3

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work

with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). The IDOE also collected, reviewed and verified subsequent data by obtaining a new randomized sample to ensure that the LEAs were correctly implementing the regulatory requirements by achieving 100% compliance.

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected.

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Three LEAs did not correct within a year. The IDOE specialist and/or the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting specialist provided virtual and/or on-site technical assistance as mentioned previously but at greater frequency. Additionally, system wide improvement strategies were shared and encouraged with LEAs.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

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

**FFY 2014**

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

**Actions taken if noncompliance not corrected**

Please see introduction for more information on the LEA that is currently on Special Conditions for the Part B funds.

**4B - Prior FFY Required Actions**

The State did not provide valid and reliable data for FFY 2017. The State must provide valid and reliable data for FFY 2018 in the FFY 2018 SPP/APR.

**Response to actions required in FFY 2017 SPP/APR**

Upon further investigation, there was an error in the 2/1/19 FFY17 APR submission in regard to the number of LEAs and how each are categorized for calculation purposes. The error was discovered in the category 'LEAs did not meet n-size' and 'LEAs that did not have 3 years of data'. The number of 'LEAs did not meet n-size' should be 359\* instead of 348. The number of 'LEAs that did not have 3 years of data' should have been 26\* instead of 18. This then changes the total LEAs to 394, which matches the 394 mentioned in the introduction.

2/1/2019 (contained a mistake)  
 Compliant LEAs3  
 Noncompliant LEAs5  
 LEAs did not meet N-size348\*  
 LEAs that did not have 3 years of data18\*  
 LEAs with special conditions1  
 TOTAL 375

2/1/2020 Correction  
 Compliant LEAs3  
 Noncompliant LEAs5  
 LEAs did not meet N-size359\*  
 LEAs that did not have 3 years of data26\*  
 LEAs with special conditions (longstanding noncompliance) 1  
 TOTAL 394

Due to this mistake\* the number of districts excluded from the calculation as a result of the requirement should have said 385 and not 366.

**4B - OSEP Response**

OSEP cannot determine whether the data are valid and reliable. The State reported that three districts met the minimum n size requirement, and 387 districts did not meet the minimum n size requirement and were excluded from the calculation. The number of districts excluded from the calculation because they do not meet the minimum "n" size, plus the number of districts that met the State-established minimum "n" size, do not equal the total number of districts the State reported in either the FFY 2017 or FFY 2018 Introduction. Therefore, OSEP could not determine whether the State met its target.

The State reported that noncompliance identified in FFY 2017 and FFY 2014 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was partially corrected. When reporting on the correction of noncompliance, the State must demonstrate, in the FFY 2019 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2017 and FFY 2014: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. The State must demonstrate, in the FFY 2019 SPP/APR, that the districts identified with noncompliance in FFY 2018 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 2019 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 2018, although its FFY 2018 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 2018.

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

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR.

## Indicator 5: Education Environments (children 6-21)

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Education environments (children 6-21): Percent of children with IEPs aged 6 through 21 served:

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

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

#### 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

Percent = [(# of children with IEPs aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.

Percent = [(# of children with IEPs aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.

Percent = [(# of children with IEPs aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.

#### Instructions

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

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

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

	Baseline	FFY	2013	2014	2015	2016	2017
A	2008	Target >=	67.00%	68.00%	69.00%	70.00%	71.00%
A	63.77%	Data	70.01%	70.55%	71.40%	72.62%	73.98%
B	2008	Target <=	12.00%	11.50%	11.00%	10.50%	10.00%
B	12.94%	Data	10.65%	10.55%	10.42%	9.84%	9.34%
C	2008	Target <=	2.16%	2.15%	2.14%	2.13%	2.12%
C	2.42%	Data	2.08%	2.06%	2.02%	1.86%	1.82%

### Targets

FFY	2018	2019
Target A >=	72.00%	73.00%
Target B <=	9.50%	9.00%
Target C <=	2.11%	2.10%

#### Targets: Description of Stakeholder Input

OSE met with the Executive Board of the Indiana Council of Administrators of Special Education (ICASE) to determine the FFY 2019 targets.

### Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	Total number of children with IEPs aged 6 through 21	159,597
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	120,220
SY 2018-19 Child Count/Educational Environment	07/11/2019	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	13,846

Data Groups (EDFacts file spec FS002; Data group 74)			
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	c1. Number of children with IEPs aged 6 through 21 in separate schools	1,400
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	c2. Number of children with IEPs aged 6 through 21 in residential facilities	548
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/11/2019	c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements	1,037

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 2018 SPP/APR Data**

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	120,220	159,597	73.98%	72.00%	75.33%	Met Target	No Slippage
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	13,846	159,597	9.34%	9.50%	8.68%	Met Target	No Slippage
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	2,985	159,597	1.82%	2.11%	1.87%	Met Target	No Slippage

Use a different calculation methodology (yes/no)

NO

Provide additional information about this indicator (optional)

**5 - Prior FFY Required Actions**

None

**5 - OSEP Response**

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

**5 - Required Actions**

## Indicator 6: Preschool Environments

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Preschool environments: Percent of children aged 3 through 5 with IEPs attending a:

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

B. Separate special education class, separate school or residential facility.

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

#### 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

Percent = [(# of children aged 3 through 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children aged 3 through 5 with IEPs)] times 100.

Percent = [(# of children aged 3 through 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children aged 3 through 5 with IEPs)] times 100.

#### Instructions

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

#### Historical Data

	Baseline	FF Y	2013	2014	2015	2016	2017
A	2011	Target >=	39.50%	40.00%	40.50%	41.00%	41.50%
A	38.70%	Data	40.69%	40.12%	39.08%	38.12%	39.98%
B	2011	Target <=	33.10%	33.00%	32.90%	32.80%	32.70%
B	35.20%	Data	33.13%	33.81%	34.09%	33.71%	32.56%

#### Targets

FFY	2018	2019
Target A >=	42.00%	42.00%
Target B <=	32.60%	32.60%

#### Targets: Description of Stakeholder Input

Indiana is working diligently on support for schools that are interested in expanding their preschool services and becoming more inclusive in practice. The Indiana Department of Education has a preschool expansion specialist who has created a guidebook for such expansion efforts. Indiana has created a preschool inclusion directory, which is interactive and allows curious LEAs to filter and seek out a collaboration for current Indiana LEAs who have been vetted and found to have high inclusion and high outcomes for their students. The directory takes funding, service delivery models, and best practices into consideration when coding the participating LEAs. With these efforts, Indiana is including preschool LRE in the Results-Based Accountability matrices for LEAs. Currently, preschool LRE is not a scored data point, but as we are able to continue to support LEAs in their expansion efforts, Indiana hopes to redefine the LRE targets. In addition, OSE met with the Executive Board of the Indiana Council of Administrators of Special Education (ICASE) to determine the FFY 2019 targets.

#### Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment	07/11/2019	Total number of children with IEPs aged 3 through 5	18,914

Data Groups (EDFacts file spec FS089; Data group 613)			
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	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	7,449
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	b1. Number of children attending separate special education class	5,784
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	b2. Number of children attending separate school	322
SY 2018-19 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/11/2019	b3. Number of children attending residential facility	13

**FFY 2018 SPP/APR Data**

	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	7,449	18,914	39.98%	42.00%	39.38%	Did Not Meet Target	No Slippage
B. Separate special education class, separate school or residential facility	6,119	18,914	32.56%	32.60%	32.35%	Met Target	No Slippage

**Use a different calculation methodology (yes/no)**

NO

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

**6 - Prior FFY Required Actions**

None

**6 - OSEP Response**

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

**6 - Required Actions**

## Indicator 7: Preschool Outcomes

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

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

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

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

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

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

#### Instructions

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

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

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

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

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

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

## 7 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

	Baseline	FF Y	2013	2014	2015	2016	2017
A 1	2010	Target =>	72.00%	73.00%	74.00%	75.00%	76.00%

A 1	64.20%	Data	72.27%	69.83%	73.00%	72.00%	74.14%
A 2	2010	Target >=	22.00%	23.00%	24.00%	25.00%	26.00%
A 2	20.40%	Data	19.83%	18.21%	20.09%	17.29%	18.98%
B 1	2010	Target >=	80.50%	81.00%	81.50%	82.00%	82.50%
B 1	72.60%	Data	78.10%	77.55%	79.77%	80.09%	82.05%
B 2	2010	Target >=	15.00%	15.50%	16.00%	16.50%	17.00%
B 2	15.40%	Data	10.27%	9.83%	10.69%	8.29%	10.17%
C 1	2010	Target >=	83.00%	83.50%	84.00%	84.50%	85.00%
C 1	74.50%	Data	81.22%	80.28%	82.59%	82.66%	84.31%
C 2	2010	Target >=	16.50%	17.00%	17.50%	18.00%	18.50%
C 2	16.90%	Data	11.45%	11.26%	12.18%	9.85%	11.38%

#### Targets

FFY	2018	2019
Target A1 >=	77.00%	77.00%
Target A2 >=	27.00%	27.00%
Target B1 >=	83.00%	83.00%
Target B2 >=	17.50%	17.50%
Target C1 >=	85.50%	85.50%
Target C2 >=	19.00%	19.00%

#### Targets: Description of Stakeholder Input

The assessment parameters for FFY2018 were not changed. The only assessment used to collect the data reported in the FFY 2018 APR was the ISTAR-KR (old assessment). Targets will be revised for FFY 2019 APR as that data will be collected using the new assessment, ISPROUT.

#### FFY 2018 SPP/APR Data

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

3,280

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

	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	88	2.68%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	684	20.85%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,873	57.10%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	494	15.06%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	141	4.30%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
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A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	2,367	3,139	74.14%	77.00%	75.41%	Did Not Meet Target	No Slippage
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>	635	3,280	18.98%	27.00%	19.36%	Did Not Meet Target	No Slippage

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

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	22	0.67%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	567	17.29%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,358	71.89%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	292	8.90%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	41	1.25%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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>	2,650	3,239	82.05%	83.00%	81.82%	Did Not Meet Target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	333	3,280	10.17%	17.50%	10.15%	Did Not Meet Target	No Slippage

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

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	30	0.91%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	478	14.57%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,385	72.71%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	337	10.27%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	50	1.52%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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.	2,722	3,230	84.31%	85.50%	84.27%	Did Not Meet Target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.	387	3,280	11.38%	19.00%	11.80%	Did Not Meet Target	No Slippage

**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

	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."**

The Indiana Department of Education utilizes the ISTAR-KR assessment tool which is a derivative of the Foundations to the Indiana Academic Standards and is 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/SLP's complete the online questionnaire at the entrance, annually, and exit of the program. The initial entrance and final exit scores are used to assess growth. Student outcome and KR Cut scores were developed per age range. 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.**

The Indiana Department of Education utilizes the ISTAR-KR assessment tool which is a derivative of the Foundations to the Indiana Academic Standards and is 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/SLP's complete the online ISTAR-KR questionnaire at the Student's entrance, annually, and upon exit of the program. The initial entrance and final exit scores are used to assess growth.

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

This year Indiana is rolling out a new state-wide preschool assessment to replace the ISTAR-KR. It was created aligned to the Indiana Foundations and has been reviewed by a handful of stakeholder engagement groups. The new assessment is not a direct assessment and before administering, educators must pass an assessment and receive a certificate indicating a passing score.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

## 7 - Required Actions

The State provided targets for FFY 2019 for this indicator. However, OSEP cannot accept that target because the State did not indicate that stakeholders were provided an opportunity to provide input on the targets for this indicator.

## 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.

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

If the analysis shows that the demographics of the 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

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

### Targets: Description of Stakeholder Input

The Indiana Department of Education, Office of Special Education has analyzed the data from past Annual Performance Reports to determine appropriate, achievable, yet rigorous targets for 2013-2018.

The Indiana Department of Education, Office of Special Education included stakeholder input from the State Advisory Council on the Education of Children with Disabilities (SAC), as well as other constituents, to set the targets submitted for 2013-2018.

### Historical Data

Baseline	2009	42.20%			
FFY	2013	2014	2015	2016	2017
Target >=	69.00%	70.00%	71.00%	72.00%	73.00%
Data	92.69%	88.59%	96.05%	97.11%	79.92%

### Targets

FFY	2018	2019
Target >=	74.00%	75.00%

### FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage

7,357	7,790	79.92%	74.00%	94.44%	Met Target	No Slippage
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**The number of parents to whom the surveys were distributed.**

178,613

**Percentage of respondent parents**

4.36%

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

The questions designed on the Indiana Parent Survey are intended to be answerable across the range of school-aged and pre-school 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 multi-variate measure that incorporates multiple aspects on the child's educational program, regardless of setting.

Please also 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.

	<b>Yes / No</b>
Was sampling used?	NO

	<b>Yes / No</b>
Was a survey used?	YES
If yes, is it a new or revised survey?	NO
The demographics of the parents responding are representative of the demographics of children receiving special education services.	YES

**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.**

Indiana has conducted analyses for representativeness in disability categories, grade level, and ethnicity, using questions posed on the survey and the data collected for the child count on Dec. 1, 2018.

As regards the distribution of primary disabilities, parents were asked to identify their child's primary disability on the survey. Tests of representativeness are strongly indicative that the response rate was representative of the overall population of students with disabilities. Deviations from expected values of survey response distribution by disability categories were well within tolerable differences for representativeness. Tests of significance suggest interdependence between the survey respondents and the population.

**SURVEY POPULATION**

No.	Pct.	No.	Pct.	Diff.
Autism Spectrum Disorder	887 12.03%	16,673	33.33%	2.69%
Blind/Low Vision	68 0.92%	986	0.55%	0.37%
Cognitive Disability	513 6.96%	13,621	7.63%	-0.67%
Deaf/Hard of Hearing	110 1.49%	2,459	1.38%	0.11%
Deaf-Blind	2 0.03%	34	0.02%	0.01%
Developmental Delay	578 7.84%	7,160	4.01%	3.83%
Emotional Disability	402 5.45%	12,870	7.21%	-1.75%
Multiple Disabilities	172 2.33%	2,115	1.18%	1.15%
Orthopedic Impairment	44 0.60%	1,528	0.86%	-0.26%
Other Health Impairment	929 12.60%	26,063	14.59%	-2.00%
Specific Learning Disability	1,947 26.40%	54,468	30.49%	-4.09%
Speech or Language Impairment	1,690 22.92%	40,166	22.49%	0.43%
Traumatic Brain Injury	33 0.45%	470	0.26%	0.18%

Regarding ethnicity/race, parents respond to racial or ethnic categories on the parent survey. Statistical tests of representativeness suggest that the response rate for ethnicity was representative of the overall population of students with disabilities. Deviations from expected values of survey response distribution by disability categories were within tolerable differences for representativeness. Tests of significance suggest interdependence between the survey respondents and the population.

The frequency distributions for respondents' ethnicities and the underlying population of students with disabilities are as follows:

**SURVEY POPULATION diff**

Asian	740.99%	1,950	1.09%	-0.001	0.52	107
White	6,057	80.75%	124,530	69.72%	11.03%	
Black/African American	541	7.21%	23,709	13.27%	-6.06%	
Multi-racial	423	5.64%	9,367	5.24%	0.39%	
Hispanic/Latino	388	5.17%	18,570	10.40%	-5.22%	
American Indian/Alaska Native	18	0.24%	396	0.22%	0.02%	
Hawaiian/Pacific Islander	0	0.00%	91	0.05%	-0.05%	

Regarding age, parents were asked to indicate their child's grade level on the parent survey, which is also collected by the Indiana Department of Education on the child count. Tests of representativeness are strongly indicative that the response rate was representative of the overall population of students with disabilities. Deviations from expected values of survey response distribution by grade level are within reasonable assumptions of

representativeness, though note that white students are slightly overrepresented and black or African American students slightly underrepresented. Tests of significance suggest interdependence between the survey respondents and the population.

**SURVEYPOPULATIONdiff**

Pre-Kindergarten 89811.84%13,7157.68%4.16%  
Kindergarten 5777.61%10,1755.70%1.91%  
Grade 15 557.32%11,4296.40%0.92%  
Grade 25 517.26%12,0406.74%0.52%  
Grade 36 909.10%13,5737.60%1.50%  
Grade 46 108.04%14,0707.88%0.16%  
Grade 56 138.08%14,3258.02%0.06%  
Grade 65 407.12%13,8147.73%-0.61%  
Grade 75 677.48%13,4467.53%-0.05%  
Grade 84 896.45%13,2317.41%-0.96%  
Grade 93 875.10%13,0657.31%-2.21%  
Grade 10 3324.38%12,1686.81%-2.44%  
Grade 11 3594.73%11,4346.40%-1.67%  
Grade 12 3644.80%11,1386.24%-1.44%  
Adult 530.70%9900.55%0.14%

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

**8 - Prior FFY Required Actions**

None

**8 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

**8 - Required Actions**

## Indicator 9: Disproportionate Representation

### Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

#### Data Source

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

#### Measurement

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

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

Based on its review of the 618 data for FFY 2018, 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 2018 reporting period (i.e., after June 30, 2019).

#### Instructions

Provide racial/ethnic disproportionality data for all children aged 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 2018 SPP/APR, the data for FFY 2017), 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	2016	0.29%			
FFY	2013	2014	2015	2016	2017
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.29%	0.00%

### Targets

FFY	2018	2019
Target	0%	0%

### FFY 2018 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.

Number of districts with disproportionate representation of racial and ethnic groups in special education and related services	Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1	1	354	0.00%	0%	0.28%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

Indiana Department of Education did not meet its current target for the reporting year and had slippage. The primary reason for slippage in this indicator is that 0% of districts were found to have disproportionate representation due to inappropriate identification in the previous fiscal year, therefore the single district identified for FFY 2018 resulted in a large enough percentage increase to cause slippage.

The Indiana Department of Education (IDOE) in conjunction with the Indiana Disproportionality Resource Center (IDRC) have been providing technical assistance to school districts on how to address areas of noncompliance. In order to correct the slippage that has occurred, IDOE has placed those school districts who are out of compliance into a system of technical support. School districts are required to demonstrate appropriate systems or policy change in order to correct and prevent non-compliance.

**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).**

Indiana defines disproportionate representation as disproportionate representation of racial and ethnic groups (American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander, Hispanic or Latino, Black or African American, White, Multiracial) in special education and related services that is the result of inappropriate identification.

Indiana defines disproportionate representation as a risk ratio greater than 2.0 in special education and related services for three consecutive years. Indiana has a required minimum "n" size of 15 students with a disability in a given population as well as a minimum of 15 in the comparison group (rate of overall special education identification of a racial or ethnic group of students comparing to all other racial or ethnic groups).

Indiana notified the LEAs that the annual data analysis reflected possible noncompliance (over the Indiana defined risk ratio threshold) with this indicator. Each LEA was required to participate in a policy and procedure review. Additionally, a minimum of 5 files (to determine practice) were reviewed on students who were evaluated and identified as students with disabilities. If policies, procedures and/or practices were determined to be inappropriate, findings were issued.

**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.**

Indiana notified the LEAs that the annual data analysis reflected possible noncompliance (over the Indiana defined risk ratio threshold) with this indicator. Each LEA was required to participate in a policy and procedure review. Additionally, a minimum of 5 files (to determine practice) were reviewed on students who were evaluated and identified as students with disabilities. If policies, procedures and/or practices were determined to be inappropriate, findings were issued. One finding of noncompliance was issued.

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

**Correction of Findings of Noncompliance Identified in FFY 2017**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

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**9 - Prior FFY Required Actions**

None

**9 - OSEP Response**

Because the State reported less than 100% compliance for FFY 2018 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. The State must demonstrate, in the FFY 2019 SPP/APR, that the district identified in FFY 2018 with disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification is 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 2019 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 2018, although its FFY 2018 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 2018.

**9 - Required Actions**

# Indicator 10: Disproportionate Representation in Specific Disability Categories

## Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

### Data Source

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

### Measurement

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

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

Based on its review of the 618 data for FFY 2018, 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 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 2018 reporting period (i.e., after June 30, 2019).

### Instructions

Provide racial/ethnic disproportionality data for all children aged 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 2018 SPP/APR, the data for FFY 2017), 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	2016	2.78%			
FFY	2013	2014	2015	2016	2017
Target	0%	0%	0%	0%	0%
Data	1.94%	2.70%	1.84%	2.78%	3.11%

### Targets

FFY	2018	2019
Target	0%	0%

### FFY 2018 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.

70

Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
10	6	320	3.11%	0%	1.88%	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).

Indiana's definition of disproportionate representation is the disproportionate representation of racial and ethnic groups (American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander, Hispanic or Latino, Black or African American, White, Multiracial) in specific disability categories (Cognitive Disability, Specific Learning Disability, Emotional Disability, Language or Speech Impairment, Other Health Impairment, and Autism Spectrum Disorder) that is the result of inappropriate identification. Indiana has a required minimum "n" size of 15 students with a disability in a given population as well as a minimum of 15 in the comparison group. Indiana calculates risk ratios for all of LEAs in the state. School districts must exceed the data threshold (2.0 risk ratio) for 3 consecutive years.

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

LEAs were notified that the annual data analysis reflected possible noncompliance (over the Indiana defined risk ratio threshold of 2.0) for this indicator. The relative risk ratio was computed as a ratio of the risk index of a race/ethnicity in the LEA to the risk index of all other races/ethnicities in the LEA for each specific disability category. (LEA rate of one race and eligibility category compared to LEA rate for all other races of same eligibility category.)

Each LEA was required to participate in a policy and procedure review which included the following information:

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

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

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

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

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

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

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

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

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

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

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

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

Ensuring that the multidisciplinary team includes the requisite qualified professionals

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

Ensuring that the evaluation report for a student with the suspected disability of Autism Spectrum Disorder includes assessment results and other

information collected as aligned to the characteristics of Autism Spectrum Disorder

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

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

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

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

Ensuring that the case conference committee includes the requisite members

Ensuring that at least one of the qualified professionals from the multidisciplinary team attends the initial case conference committee meeting

Each LEA was required to participate in a file review (practices) (minimum of 5 files). Topics/areas reviewed:

1. General Initial Evaluation Requirements

1.1 Written notice of evaluation.

1.2 Signed parental consent for evaluation.

1.3 Written notice prior to the initial CCC containing:

(1) A description and overall findings of each:

(A) evaluation;

(B) procedure;

(C) assessment;

(D) record; or

(E) report;

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

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

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

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

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

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

1.7 Notice of case conference committee meeting.

1.8 Notice of ineligibility or proposed IEP.

2. Disability-Specific Evaluation Requirements

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

3. Eligibility Determination

3.1 Parent participation as a member of the case conference committee.

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

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

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

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

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

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

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

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

**Correction of Findings of Noncompliance Identified in FFY 2017**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	0	2	8

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center's Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review, and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

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

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review, and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected.

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Eight LEAs did not correct within a year. The IDOE specialist and/or the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting specialist provided virtual and/or on-site technical assistance as mentioned previously but at greater frequency. Additionally, system wide improvement strategies were shared and encouraged with LEAs.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2016	6	4	2
FFY 2013	1	0	1

**FFY 2016**

**Findings of Noncompliance Verified as Corrected**

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review, and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

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

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA. In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review, and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.

Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific

reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected.

#### **FFY 2016**

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

##### **Actions taken if noncompliance not corrected**

Two LEAs did not correct. The IDOE specialist and/or the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting specialist provided virtual and/or on-site technical assistance as mentioned previously but at greater frequency. Additionally, system wide improvement strategies were shared and encouraged with LEAs.

#### **FFY 2013**

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

##### **Actions taken if noncompliance not corrected**

Please see introduction for more information on the LEA that is currently on Special Conditions for the Part B funds.

### **10 - Prior FFY Required Actions**

None

### **10 - OSEP Response**

The State did not provide valid and reliable data for this indicator. These data are not valid and reliable because the State reported that it excluded a total of 70 LEAs from the calculation, and that 320 LEAs met the minimum "n" size. However, The number of districts excluded from the calculation because they do not meet the minimum "n" size, plus the number of districts that met the State-established minimum "n" size, do not equal 401, the total number of districts the State reported in the FFY 2018 Introduction. Therefore, OSEP could not determine whether the State met its target.

The State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2013 because it did not report that it verified correction of those findings, consistent with OSEP Memo 09-02. Specifically, the State did not report that that it verified that each LEA with noncompliance identified FFY 2013 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.

Because the State reported less than 100% compliance for FFY 2018 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. The State must demonstrate, in the FFY 2019 SPP/APR, that the six districts identified in FFY 2018 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 2018, although its FFY 2018 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 2018.

Further, the State must demonstrate, in the FFY 2019 SPP/APR, that the remaining eight districts identified in FFY 2017, two districts identified in FFY 2016, 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 2017, FFY 2016, and FFY 2013, the State must report, in the FFY 2019 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2018 and each LEA with remaining noncompliance identified in FFY 2017, FFY 2016, and FFY 2013: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2019 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

### **10 - Required Actions**

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR.

## 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 2018 SPP/APR, the data for FFY 2017), 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	2005	78.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	98.84%	99.26%	98.71%	98.46%	98.72%

### Targets

FFY	2018	2019
Target	100%	100%

### FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
29,492	29,001	98.72%	100%	98.34%	Did Not Meet Target	No Slippage

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

491

**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.**

The total number of students that were evaluated outside of the timelines for Indiana is 491 students. Timelines were missed for a variety of reasons identified as follows: staff shortages, the volume of referrals, scheduling conflicts, timeline errors, inadequate timeline tracking, improper documentation, LEA data system errors, and LEA staff errors.

Indicated below are the ranges of days for evaluations that were beyond the state designated timeline of 50 instructional days:

- 1-5 days beyond the timeline- 255 STNs
- 6-10 days beyond the timeline- 76 STNs
- Greater than 10 days beyond the timeline- 160

**Indicate the evaluation timeline used:**

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

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

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

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

State database that includes data for the entire reporting year

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

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

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

**Correction of Findings of Noncompliance Identified in FFY 2017**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
28	27	1	0

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

The LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to review and revise their policies, procedures, and practices relating to the process of conducting the initial evaluation within timeline parameters. Each LEA created a Corrective Action Plan (CAP) through the submission of a Monitoring Workbook. The Monitoring Workbook included LEA specific data in regard to the file review and a tab to create a Corrective Action Plan to be completed by the staff of the LEA. In addition, the LEAs identified with noncompliance were informed that they were required to work with IDOE staff and/or appropriate Indiana Resource Network (IRN) technical assistance provider(s). Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and Indiana Department of Education consultant to address the specific reason(s) of noncompliance.

To verify correction for LEAs out for for their FIRST year, IDOE staff reviewed three (3) months (March 30 through June 30) of data for the following year. Those months were pulled and reviewed for each LEA to ensure 100% compliance was achieved. This data was accessed through the DOE data collection systems via the DOE-EV report (Evaluation report). If LEAs are out for more than one consecutive year, IDOE staff pulled a full year of data to review corrections for full compliance.

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

The LEAs with findings of non-compliance were informed that the non-compliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to correct each individual case of non-compliance identified in the file review unless the student was no longer under the jurisdiction of the LEA. (Prong 1 in OSEP Memo 09-02)

Specifically, the LEAs worked with OSE staff and identified those individual cases of non-compliance that were due to factors other than a student receiving services within the 50 day timeline. For example, the specific reason(s) of non-compliance included improper documentation, staff errors, inadequate tracking, scheduling conflicts, staff shortage, and school calendar errors. The OSE staff then verified each of the Prong 1 files were corrected by a review of each student STN (the student unique identifier) associated with the non-compliance.

The LEAs work with IDOE staff through the regularly scheduled contacts to address the specific reason(s) of non-compliance. The LEAs that were issued findings were assigned an IDOE consultant and required to develop a corrective action plan (CAP) in order to identify the root cause(s) of non-compliance and to change and update policies, procedures, and practices in order to correctly implement all regulatory requirements of the Indicator. The IDOE consultant collected the updated policies, procedures, and practices from LEAs and verified that the appropriate changes were made. Pursuant to OSEP Memorandum 09-02, the IDOE verified that unless the child no longer remained under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations were completed, although late. The IDOE verified completion of the outstanding non-compliant timelines by collecting and reviewing updated evaluation information from LEAs on each individual case through the State’s data system and verified the LEA achieved the 100% percent compliance requirement. (Prong 2 in OSEP Memo 09-02)

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

<b>Year Findings of Noncompliance Were Identified</b>	<b>Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR</b>	<b>Findings of Noncompliance Verified as Corrected</b>	<b>Findings Not Yet Verified as Corrected</b>
	2	0	2

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

**Actions taken if noncompliance not corrected**

LEAs identified as not meeting the required timeline for compliance were required to develop a Corrective Action Plan (CAP) in coordination with an education specialist at the IDOE during FFY2014. The LEAs that were not able to verify correction of policies and procedures receive intensified consultation from an assigned IDOE consultant and participated in state required corrective action. Additional monitoring and data submissions were required as a part of the Corrective Action Plan. 1 LEA that still had not corrected by FFY 2018 showed significant progress and substantial compliance by achieving 99% in both FFY2017 and FFY 2018; the other LEA also showed progress by achieving 96% and is receiving in-person targeted support on Indicator 13 as part of Indiana’s Results Driven Accountability monitoring. Because of this longstanding noncompliance, IDOE will continue to collect, review, and verify subsequent data obtained by a new randomized sample to ensure that the LEAs are correctly implementing the regulatory requirements by achieving 100% compliance.

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

**11 - Prior FFY Required Actions**

None

**11 - OSEP Response**

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2019 SPP/APR, that the remaining two uncorrected findings of noncompliance identified in FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2018 and each LEA with remaining noncompliance identified in 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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

**11 - Required Actions**

## Indicator 12: Early Childhood Transition

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Effective Transition

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

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

#### Data Source

Data to be taken from State monitoring or State data system.

#### Measurement

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

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

Percent = [(c) divided by (a - b - d - e - f)] times 100.

#### Instructions

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

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

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.

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 2018 SPP/APR, the data for FFY 2017), 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	2005	95.80%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	98.56%	99.25%	100.00%	99.43%	97.39%

#### Targets

FFY	2018	2019
Target	100%	100%

#### FFY 2018 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	4,372
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	582
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	3,119

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.	661
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

	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2017 Data	FFY 2018 Target	FFY 2018 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.	3,119	3,129	97.39%	100%	99.68%	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**  
10

**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.**

Our data indicates there were ten students in our state who were not offered a Free Appropriate Public Education by their third birthday. Upon further investigation, it was found, for three of these students, services were provided on the first school day following their birthday and that their birthdays each fell over the weekend. For two students, services were delayed by 1 day, and in regard to the other, services were delayed by two days.

One of the students' birthday fell over a school break. In this case, the case conference was able to determine eligibility by the third birthday, but the services were not implemented until the school year began, as this student did not require extended school year services. This student is on our list of findings due to the LEA not making changes to their report during the data verification process, so we are unable to release this finding based solely on our own interpretation of the information.

In regard to the additional six students whose services were delayed, it has been reported by the LEA the services were not provided on time, and the LEA is working on policies and procedures to address the barriers to the timeline for future transitions. These students were from four different LEAs. Each has been contacted and provided with a planning tool to walk through, which will help to address the systemic changes necessary for success in their Part C to Part B transition process. Of these six students, services were delayed between two and seven days.

**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.**

In FFY 2018, the data for this indicator was submitted to the Indiana Department of Education (IDOE) via a secure site known as the Student Test Number (STN) Application Center. Each Local Educational Agency (LEA) must upload Child count as well as performance and compliance data to the STN Application Center. This data is then stored in the IDOE data warehouse where it can be extracted and used for state and federal funding, performance indicators, and compliance indicators.

Indicator 12 data was collected through the DOE-EV (Evaluation) report on July 1, 2019, and ranged from July 1, 2018, to June 30, 2019, in order to encompass the entire reporting year.

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

When reviewing the previous year's data, we had 3,585 students who were served in Part C and referred to Part B for eligibility. Of those who qualified for services, Indiana had sixty-four students whose services were delayed. This year's APR data indicates Indiana had 4,372 students who were served in Part C and referred to Part B for eligibility. Of those, there were ten students whose services were delayed. Though the compliance target is 100% and Indiana fell short, it is encouraging to see the guidance, roadshows, individualized technical assistance and supports to LEAs is translating to greater compliance and understanding across the state of Indiana.

**Correction of Findings of Noncompliance Identified in FFY 2017**

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	1	1	0

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

The LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to review and revise their policies, procedures, and practices relating to the process of conducting the initial evaluation within timeline parameters. Each LEA created a Corrective Action Plan (CAP) through the submission of a Monitoring Workbook. The Monitoring Workbook included LEA specific data in regard to the file review and a tab for to create a Corrective Action Plan to be completed by the staff of the LEA.

In addition, the LEAs identified with noncompliance worked with IDOE staff and/or appropriate Indiana Resource Network (IRN) technical assistance provider(s). Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and Indiana Department of Education consultant to address the specific reason(s) of noncompliance.

To verify correction, IDOE staff reviewed three (3) months (March 30 through June 30) of data for the following year. Those months were pulled and reviewed for each LEA to ensure 100% compliance was achieved. This data was accessed through the DOE data collection systems via the DOE-EV report (Evaluation report).

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

Specifically, the LEAs worked with the Office of Special Education (OSE) staff and identified those individual cases of noncompliance that were due to factors that impeded a student from receiving services by the third birthday. For example, the specific reason(s) of noncompliance included improper documentation, staff errors, inadequate tracking, scheduling conflicts, staff shortage, and school calendar errors.

The LEAs that were issued findings were assigned an Indiana Department of Education (IDOE) specialist and were required to develop a corrective action plan (CAP) in order to identify the root cause(s) of noncompliance and to change and update policies, procedures, and practices in order to correctly implement all regulatory requirements of the Indicator. The IDOE specialist collected the updated policies, procedures, and practices from LEAs and verified that the appropriate changes were made. Pursuant to OSEP Memorandum 09-02, the IDOE verified that unless the child no longer remained under the jurisdiction of the initiating LEA, all outstanding noncompliant initial evaluations were completed, although late. The IDOE verified completion of the outstanding noncompliant timelines by collecting and reviewing updated evaluation information from LEAs on each individual case through the State's data system and verified the LEA achieved the 100% percent compliance requirement.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**12 - Prior FFY Required Actions**

None

**12 - OSEP Response**

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each LEA with noncompliance identified in 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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

**12 - Required Actions**

## Indicator 13: Secondary Transition

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Effective Transition

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

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

#### 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 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 2018 SPP/APR, the data for FFY 2017), 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	2009	80.22%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	81.05%	80.16%	86.36%	85.47%	86.14%

### Targets

FFY	2018	2019
Target	100%	100%

### FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
371	540	86.14%	100%	68.70%	Did Not Meet Target	Slippage

### Provide reasons for slippage, if applicable

The Indiana Department of Education (IDOE) has implemented stricter guidelines when it comes to measurable goals. These guidelines require annual goals to be both skill-based and measurable. In reviewing the IEPs monitored for FFY 2018, local education agencies (LEAs) struggled with annual goal

writing. In addition, LEAs wrote transition services and activities which were not individualized to the student, instead the services and activities were generic or were transition assessments which are required to be completed annually.

**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.**

For Indicator 13, 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. The Indiana Department of Education (IDOE) Office of Special Education contracted with the Center on Community Living and Careers (CCLC) at Indiana University to conduct a compliance review of a randomly selected sample of students' transition IEPs. The review was conducted to ensure that IDOE meets the reporting requirements and is providing ongoing assistance for school corporations with compliance rates less than 100%.

To determine and ensure compliance to Indicator 13, IDOE has developed the Indiana Transition Requirements Checklist based on a data collection tool created by the National Secondary Transition Technical Assistance Center (NSTTAC) and approved by the Office of Special Education Programs of the US Department of Education (OSEP). The Indiana Secondary Transition Resource Center at the CCLC, Indiana Institute on Disability and Community at Indiana University has created an on-line version of Indiana's data collection tool that was used to analyze Indiana's student records to determine compliance with Indicator 13. The ten-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 him/her 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 Test Number (STN), which is the State of Indiana's student identification number and the Corporation Code Number. To generate the sample, CCLC used Microsoft Excel software to run a random sampling program. If the corporation had less than 100 students with disabilities, three students were selected for the review. For corporations with more than 500 students, 10 students were selected. Therefore, a minimum of 3 and maximum of 10 Transition IEPs were reviewed based on size of the district. In some cases, charter schools had sample sizes of less than three students because these schools were serving limited number of students or did not have large populations of students with disabilities. A report of the review was then provided to IDOE.

	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 2017**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
64	61	2	1

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

The Indiana Department of Education (IDOE) issued 64 Indicator 13 findings of noncompliance with regard to regulatory requirements. These new findings were identified through an assessment by Center on Community Living and Careers (CCLC) using the Indiana Transition IEP Checklist. 61 of those LEAs demonstrated correction within a year by achieving 100% compliance on current IEPs using the Indiana IEP Requirements Checklist. The IDOE verified the correction of all noncompliance in those 61 LEAs. In order to verify correction, the IDOE reviewed updated policies, procedures, and practices (prong 2) and confirmed correction of each individual non-compliant transition IEP that had been identified previously (prong 1). The IDOE collected and verified the data by obtaining a new, randomized sample of youth with IEPs aged 14 and above, using Indiana's Transition Requirements Checklist which comes from the National Technical Assistance Center on Transition (NTACT) to ensure that the individual and systemic noncompliance had been resolved. The IDOE also maintained monthly communication via emails and phone calls, providing resources and technical assistance on transition activities and services as well as annual goal writing to the LEA until non-compliance was corrected. Depending upon the corrective action plan generated by the LEA, IDOE provided one-on-one training and technical assistance on site at the LEA or through regional training. Both LEA administrative and teaching personnel attended those opportunities. There are 2 LEAs marked as having been subsequently corrected. These LEAs closed prior to completing the needed regulatory requirements in order to demonstrate 100% compliance; because no individual instances of noncompliance remained, IDOE determined no further correction was required.

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

The 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. The 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 2017 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The IDOE issued a finding of continued noncompliance to 1 LEA which was unable to demonstrate the regulatory requirements needed to have 100% compliance one year after their initial finding. IDOE will be holding monthly phone and/or in-person meetings with the LEA until noncompliance is resolved by providing technical assistance in how to implement a self-monitoring system as well as how to assist teachers in writing annual goals.

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**13 - Prior FFY Required Actions**

None

**13 - OSEP Response**

Because the State reported less than 100% compliance for FFY 2018, the State must report on the status of correction of noncompliance identified in FFY 2018 for this indicator. In addition, the State must demonstrate, in the FFY 2019 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2017 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2019 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2018 and each LEA with remaining noncompliance identified in FFY 2017: (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 2019 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 2018, although its FFY 2018 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2018.

**13 - Required Actions**

## Indicator 14: Post-School Outcomes

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Effective Transition

**Results indicator:** Post-school outcomes: Percent 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.

Enrolled in higher education or competitively employed within one year of leaving high school.

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 =  $\left[ \frac{\text{(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school)}}{\text{(# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)}} \right] \times 100$ .

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

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

#### 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 2019 on students who left school during 2017-2018, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2017-2018 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" in the FFY 2018 SPP/APR, due February 2020:

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, 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.

*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

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.

#### III. Reporting on the Measures/Indicators

Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school must be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

Include the State's analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States should consider categories such as race and ethnicity, disability category, and geographic location in the State.

If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

## 14 - Indicator Data

### Historical Data

	Baseline	FF Y	2013	2014	2015	2016	2017
A	2009	Target >=	36.30%	36.80%	37.30%	37.80%	38.30%
A	34.30%	Data	33.21%	35.68%	30.00%	31.15%	36.22%
B	2009	Target >=	63.50%	64.00%	64.50%	65.00%	65.50%
B	49.10%	Data	60.26%	62.81%	65.71%	70.49%	63.78%
C	2009	Target >=	77.50%	78.00%	78.50%	79.00%	79.50%
C	86.10%	Data	79.49%	83.92%	87.14%	86.07%	88.19%

### FFY 2018 Targets

FFY	2018	2019
Target A >=	38.80%	39.00%
Target B >=	66.00%	66.00%
Target C >=	86.20%	86.00%

### Targets: Description of Stakeholder Input

The Indiana Department of Education, Office of Special Education has analyzed the data from past Annual Performance Reports to determine appropriate, achievable, yet rigorous targets for 2013-2019.

The Indiana Department of Education, Office of Special Education included stakeholder input from the State Advisory Council on the Education of Children with Disabilities (SAC), as well as other constituents, to set the targets submitted for 2013-2019.

### FFY 2018 SPP/APR Data

Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	108
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	27
2. Number of respondent youth who competitively employed within one year of leaving high school	42

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)	11
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).	10

	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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Enrolled in higher education (1)	27	108	36.22%	38.80%	25.00%	Did Not Meet Target	Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1+2)	69	108	63.78%	66.00%	63.89%	Did Not Meet 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)	90	108	88.19%	86.20%	83.33%	Did Not Meet Target	Slippage

Part	Reasons for slippage, if applicable
A	According to the 2019 College Readiness Report for Indiana, the number of students who enroll in higher education directly after leaving high school has decreased slightly in the past two years. The slippage is reflective of the broader downward trend of students enrolling in post secondary education within a year after graduating from high school. However, it is speculated that only a portion of the slippage can be attributed to this broader trend. The slippage observed is likely a result of the under representation of women responding to the survey. The assumption is supported by the findings in the 2019 College Readiness Report for Indiana, which it found that women are more likely to pursue higher education than men.
C	Again, for Target C the slippage is attributed to the broader trend of less students attending college right after high school in the last two years and the under representation of women in the survey responses. Note that both the number of respondents in "competitively integrated employment" (i.e., Input Date Type 2) rate and the number of respondents in "other employment" (i.e., Input Data Type 4) slightly increased compared to the prior year.

**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.

	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.**

Of the 352 youth selected in the sample, 113 respondents completed the survey, 61 individuals exercised their option to refuse participation. The telephone survey interviewers failed to make contact with 178 individuals eligible to respond to the survey. In each case, interviewers tried to reach youth on five different occasions. Changing telephone numbers, along with wrong phone numbers and individuals that did not answer the phone, accounted for a large number of those who could not be contacted.

Of the 113 respondents who completed the survey, 108 indicated they graduated and 5 indicated they had not graduated. The 108 respondents who graduated were used to compute measures A, B, and C. Respondents who had not graduated were excluded from the computation of the three measures. All 5 respondents who had not graduated from high school indicated they had dropped out for varying reasons. In addition to those who did not graduate, we also had 18 individuals that did graduate, but could not be assigned to any of the four Data Input Types. These youth are generally referred to as "Not Engaged" but are nevertheless included in the total number of 108 "countable" responses.

A valid response rate of 30.7% was calculated based on the circumstances explained above. This number was found to be two percentage points lower than the FFY 2017 response rate of 32.7%. The FFY 2018 response rate percentage falls within the accepted return range based on an analysis of FFY 2017 Indicator 14 prepared by the National Technical Assistance Center on Transition (NTACT).

	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO

**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.**

Criteria developed by NPSO were used to determine whether the respondent group was representative of youth with disabilities who left school within the State. The table below shows the ethnicity of White accounted for 67.3% of the sample, compared to the FFY 2017 Indiana 618 Child Count population of 69.8% for youth 14 to 21 years of age. Black or African American comprised about 16.5% of the sample, whereas the 618 Child Count percentage is about 15.5%. Hispanic/Latino were represented by about 10% in the sample, whereas the percentage of this group was 8.9% according to 2016-2017 618 federal Child Count. The remainder of the groups within the sample also appeared to be consistent with the percentages reported for their counterparts by the State 618 Child Count. Note that Black and Hispanic/Latino youth were deliberately over sampled. These two groups historically are under represented in the survey responses. It can be seen in the table that the "over/under" percentages of sample and population youth fall well within the discrepancy parameters recommended by NPSO.

Ethnicity State Sample NPSO Criterion<sup>1</sup>

White 69.8% 67.3% -2.5%

Black 15.5% 16.5% 1.0%

Hispanic Ethnicity and of any race 8.9% 10.0% 1.1%

Multiracial (two or more races) 4.8% 4.8% 0.0%

Asian 0.8% 1.3% 0.5%

American Indian/Alaskan Native 0.3% 0.0% -0.3%

Native Hawaiian or Other Pacific Islander 0.0% 0.3% 0.3%

<sup>1</sup> Note: NPSO criterion of ±3.0 is used to determine over or under representation.

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

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

The responses are representative of youth with disabilities who left school within the State in all demographic categories except for female and youth with an emotional disability. The State will over sample these two groups in future data collections. In addition, the State will ensure that sample members in these two groups who cannot be contacted due to invalid phone numbers or inaccurate information get sampled again or replaced.

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

Beginning with FFY 2019, Indiana plans to incorporate information from every LEA through a revised sampling process. The plan includes reaching out to students who have exited and/or graduated through phone call, email (when provided), and through other mediums. Indiana is in the process of improving our outreach to students who have exited and/or graduated by giving advance notice than the current letter sent home to families prior to graduation.

**14 - Prior FFY Required Actions**

None

**14 - OSEP Response**

The State provided targets for FFY 2019 for this indicator, and OSEP accepts those targets.

## **14 - Required Actions**

In the FFY 2019 SPP/APR, the State must report whether the FFY 2019 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, targets and improvement activities, 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 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1 Number of resolution sessions	63
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1(a) Number resolution sessions resolved through settlement agreements	23

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

NO

#### Targets: Description of Stakeholder Input

IDOE received valuable stakeholder input from the Education Dispute Resolution (EDR) Working Group in 2019. The EDR was established under Indiana Code 20-19-2-22.5 and was created to make recommendations to IDOE, the State Board of Education, and the general assembly on a variety of education topics and laws, including but not limited to the special education mediation and due process hearing processes made available by OSE. The EDR input received was directly relevant to targets for this indicator.

#### Historical Data

Baseline	2005	30.20%			
FFY	2013	2014	2015	2016	2017
Target >=	72.50%	73.00%	73.50%	74.00%	74.50%
Data	80.43%	82.61%	50.94%	35.09%	20.00%

#### Targets

FFY	2018	2019
Target >=	75.00%	75.50%

#### FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage

<b>settlement agreements</b>						
23	63	20.00%	75.00%	36.51%	Did Not Meet Target	No Slippage

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

The Indiana Department of Education, Office of Special Education has analyzed the data from past Annual Performance Reports to determine appropriate, achievable, yet rigorous targets for 2013-2019.

The Indiana Department of Education, Office of Special Education included stakeholder input from the State Advisory Council on the Education of Children with Disabilities (SAC), as well as other constituents, to set the targets submitted for 2013-2019.

**15 - Prior FFY Required Actions**

None

**15 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

**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 resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline, targets and improvement activities, 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 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1 Mediations held	49
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.a.i Mediations agreements related to due process complaints	6
SY 2018-19 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.b.i Mediations agreements not related to due process complaints	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

IDOE received valuable stakeholder input from the Education Dispute Resolution (EDR) Working Group in 2019. The EDR was established under Indiana Code 20-19-2-22.5 and was created to make recommendations to IDOE, the State Board of Education, and the general assembly on a variety of education topics and laws, including but not limited to the special education mediation and due process hearing processes made available by OSE. The EDR input received was directly relevant to targets for this indicator.

### Historical Data

Baseline	2005	52.00%			
FFY	2013	2014	2015	2016	2017
Target >=	74.50%	75.00%	75.50%	76.00%	76.50%
Data	79.25%	100.00%	88.33%	90.48%	85.71%

### Targets

FFY	2018	2019
Target >=	77.00%	77.50%

### FFY 2018 SPP/APR Data

2.1.a.i Mediation agreements	2.1.b.i Mediation agreements not	2.1 Number of mediations held	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage

related to due process complaints	related to due process complaints						
6	34	49	85.71%	77.00%	81.63%	Met Target	No Slippage

Provide additional information about this indicator (optional)

**16 - Prior FFY Required Actions**

None

**16 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, and OSEP accepts that target.

**16 - 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:**

Traci R. Tetrick

#### **Title:**

Assistant Director, Office of Special Education

#### **Email:**

ttetrick@doe.in.gov

#### **Phone:**

317-232-9062

#### **Submitted on:**

04/29/20 2:07:21 PM