# STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on FFY 2022

# Indiana



PART B DUE February 1, 2024

U.S. DEPARTMENT OF EDUCATION WASHINGTON, DC 20202

### Introduction

### Instructions

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

#### Intro - Indicator Data

### **Executive Summary**

The Indiana Department of Education (IDOE) is the designated State Educational Agency (SEA) and includes seven (7) departments (Information Technology (IT), Child Nutrition Program, Finance & Operations, Academics, Student Pathways & Opportunities, External Affairs & Partnerships, and Legal). The Office of Special Education (OSE) is part of the Academics Department and oversees the implementation of the Individuals with Disabilities Education Act (IDEA). The OSE is administered by a Director of Special Education and two (2) Assistant Directors. Currently, there are seventeen (17) specialists who support the implementation of the general supervision system. The OSE interacts regularly with the IDOE legal team members assigned as complaint investigators to ensure the offices are integrated and inform one another. The IDOE organizational chart can be accessed at https://media.doe.in.gov/news/idoe-org-chart-external-overview.pdf.

The OSE structure has been developed to align with the Office of Special Education Programs (OSEP) Differentiated Monitoring and Support (DMS 2.0) Framework ensuring the eight (8) components of general supervision systems are implemented as intended.

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

In addition to the internal IDOE staff assigned to programs serving students with disabilities, Indiana contracts with external entities to provide Technical Assistance (TA) and Professional Development (PD). IDOE also celebrates a long and productive relationship with our state Parent Training and Information Center (IN\*SOURCE). IDOE and IN\*SOURCE maintain a regularly scheduled meeting to ensure the organizations are informing one another of initiatives, relevant changes and/or concerns and opportunities to collaborate.

### Additional information related to data collection and reporting

Indiana's general supervision system is data-driven and supported by the state data systems implemented in collaboration with the Information Technology (IT) Department. A data calendar is shared by the Office of Special Education (OSE) and IT teams with communication occurring in weekly standing and ad hoc meetings to ensure compliance with reporting requirements and timely monitoring activities based on published calendars. The state uses 4 primary data systems; LEA:SEA data transfer and certification system (Data Exchange), Indiana (state-wide) IEP system, Part B grant management system and the online Indiana compliant, hearing and medication process (I-CHAMP) system. Specific data collections ensure all required 616 and 618 data are reported. In addition to required reporting, these systems are utilized to provide specific data requests from stakeholders, including members of the general public, school personnel, State Board of Education, and legislators following applicable confidentiality laws. The implementation of data policies and procedures includes accessing, organizing, analyzing, and storing collected data (such as data used to identify and document correction procedures) which facilitates interaction across system components. Technical assistance related to specific data topics, such as data submission processes, the inclusion of data in root cause analysis of noncompliance and tools for monitoring of local data is also provided.

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

413

### **General Supervision System:**

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

Indiana's general supervision system is based on established policies, procedures and practices which align to the requirements of Part B of IDEA and state regulations across all necessary components. An ongoing continuous improvement process is used to ensure procedures and practices are implemented effectively and efficiently and revised when necessary to improve practices. The state performance plan/annual performance report (SPP/APR) is used as a component of evaluating and informing the state's general supervision system through data analysis and feedback from stakeholders and the federal Office of Special Education Programs (OSEP).

IDOE's integrated monitoring system is multi-faceted and focused on compliance with IDEA programmatic requirements, ensuring improvement of educational results and functional outcomes for children with disabilities and their families. The type of information reviewed is based on the specific regulatory requirements and may include information collected within state data systems, review of LEA policies and procedures, and information received from stakeholders or during on-site monitoring. To support effective connection and information sharing across components of the system, IDOE recently deployed a "Data Hub" that stores data retrieved from the multiple data systems in one location. An important function of this system is to inform a risk assessment used to identify LEAs for targeted monitoring. In addition to analysis, the system allows for record keeping to ensure that each LEA is monitored at least once within the six-year SPP/APR cycle, documentation of areas of concern reported to the state and the resulting actions taken and tracking of the correction of noncompliance. This system is also used to inform LEA annual determinations (Results Driven Accountability, RDA) based on the four categories defined by OSEP (Meets Requirements, Needs Assistance, Needs Intervention, Needs Substantial Intervention). In addition to the inclusion of the required compliance indicators, Indiana includes several results indicators which are weighted to align to the priorities identified in partnership with stakeholders. Currently, priority indicators include graduation rate, placement of students with disabilities in the general education setting, and results of the state early literacy assessment (IREAD-3).

The documentation of correction of noncompliance across system components includes notification to LEAs in writing describing the noncompliance as related to the specific requirement, the data/information used to identify the noncompliance, any required corrective action and the timelines for correction (correction as soon as possible but no later one year from the date of the notification and submission or evidence of correction.) The description of corrective action included in the notification includes that, if applicable, the LEA must correct each individual case of child-specific noncompliance unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a state compliant or due process hearing. The LEAs are also informed that the state must verify, based on a review of subsequently collected data and information, that the LEA is correctly implementing the specific regulatory requirements as specified. If noncompliance is not corrected within 1 year, the LEA is identified as having continued noncompliance and after a second year, identified as having longstanding noncompliance. LEAs with multiple years of noncompliance are monitored more intensively and required to participate in technical assistance to ensure correction and compliance with regulatory requirements. This includes LEAs identified as Needs Assistance for two consecutive years and Needs Intervention for three or more years which require specific enforcement actions.

In addition to monitoring of Part B grant awards, the fiscal team manages the Part B grant application processes including determination and notification of allocations, review and approval of LEA applications and necessary modifications, and reimbursement throughout the grant cycle. The final grant report is verified and any unapproved expenditures identified are reported to the LEA and funds are returned for repayment to the US Department of Education.

Dispute resolution outcomes are an important source of compliance information as part of the state's general supervision system. This system includes both informal and formal dispute options made available to assist parents and LEAs. IDOE encourages parents and LEAs to work together to consider whether a dispute may be settled through an informal meeting or another case conference committee (CCC) meeting. To support resolving issues related specifically to developing or revising the IEP, the IDOE makes available to parents and LEAs an option to participate in a facilitated IEP process at no charge. This process is led by a trained, impartial facilitator who attends a CCC meeting and supports the development of an IEP. The facilitator does not make any decisions regarding the student's IEP, but helps parties resolve their conflicts and develop an IEP that parties feel best meets the student's needs. Formal dispute options consistent with requirements at 34 CFR §300.506 and 34 CFR §300.507-300.516 are available when parents and LEAs are not able to resolve their disagreement through informal methods. IDOE offers three options for formal dispute resolution: state complaints, mediations, and due process hearings. IDOE works with LEAs and Indiana Parent Training and Information Center to ensure that parents receive and understand their rights. State complaints are investigated within 40 days of a request for investigation. Parties are provided a 10 day period to request reconsideration, and the Director of Special Education has an additional 10 days to review any requests made. The state complaint investigation process is completed within 60 days.

Due process hearings are also available to a parent or an LEA. The due process hearing is set up to allow for a 30-day resolution period and a 45-day hearing timeline. Expedited due process hearings are also available for specific matters consistent with the requirements found in the regulations at 34 CFR §§300.532-533. The timeline in an expedited due process hearing is adjusted to allow for a written decision within 30 instructional days of the hearing request. Settlement agreements reached during the resolution period are enforceable through the state complaint process. Mediation is available to parties to resolve due process hearing issues. The Office of Special Education reviews all decisions of independent hearing officers. Hearing orders are monitored by complaint investigators. Parents and LEAs are encouraged to engage in mediation to resolve disputes per 34 CFR §300.506. Mediation is available to parents and LEAs to resolve disagreements as well as to resolve state complaints and due process hearings. In addition to enforcement through state and district court, written mediation agreements are enforceable through the complaint process.

#### **Technical Assistance System:**

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

IDOE's technical assistance systems provide professional guidance and targeted consulting to assist school personnel in making use of available tools to build the capacity of their school districts to improve compliance and outcomes. When LEAs are notified of their performance on compliance indicators, they are also advised of available sources of TA that may support correction of the identified areas of noncompliance. The comprehensive approach of TA enables IDOE to differentiate the scope of services provided based on local needs focused on systems change and improving the level of compliance in LEAs. Currently, there are 3 levels of support available to Indiana LEAs: universal, targeted, and intensive. With the implementation of Indiana's RDA framework; the support is matched to the LEA determination and/or results indicator level, which is based on performance on compliance indicators, and subsequent assistance will be differentiated. Valid and reliable data (including any relevant audit findings) is gathered to make informed decisions about technical assistance needed, then correction of noncompliance can begin. If IDOE determines that an LEA needs assistance for two or more consecutive years, the LEA is advised of available sources of TA that may help the LEA address the areas in which the LEA needs assistance and requires the LEA to work with the appropriate sources of TA. Those LEAs may also be identified as high-risk grantees and have Specific Conditions imposed on the LEA's IDEA Part B grant award. If IDOE determines that an LEA needs intervention for three or more consecutive years, IDOE may also require the LEA to prepare a corrective action plan or improvement plan to correct the identified area(s) and withhold further payments under Part B to the LEA. LEAs may voluntarily content request technical assistance and support throughout the year to be provided virtually and/or onsite. IDOE makes all levels of technical assistance available for all LEAs.

Universal (Level 1) TA is defined as passive in nature and describes information provided to independent users through their own initiative. This results in minimal interaction with technical assistance specialists and includes isolated support. This TA could include information presented as newsletters, guidance documents, toolkits, webinars, etc.

Targeted (Level 2) TA is developed based on the needs of multiple participants, and is not extensively individualized. During targeted TA, a relationship is established between the LEA and the TA provider. This TA can include one-time labor-intensive events, such as facilitating a program evaluation, strategic planning session. Targeted TA can also be episodic and include less-intensive events over an extended period of time such as attending an office hours series based on the participant's needs or reviewing proposed resources, guidance, or presentations the participant has created in order to provide support or suggestions.

Intensive (Level 3) TA is often provided onsite and requires a stable, ongoing relationship between the TA provider and the LEA. These services will include a negotiated series of activities designed to reach a valued outcome such as changes in policy, programming, practice, or operations that support increased recipient capacity and/or improved outcomes. Intensive TA might include holding targeted meetings with LEA leaders for a year or more, engaging in multiple onsite visits, or providing direct assistance.

IDOE contracts with two other TA Centers to provide LEAs with high-quality evidence-based professional development and technical assistance to support the provision of services for children with disabilities: The IEP TA Center and The PATINS Project.

IDOE's technical assistance network includes the IEP Technical Assistance Center (IEP TA Center), a contract funded by IDEA Part B discretionary funds to support technical assistance for special education. The IEP TA Center has adopted a service model that provides three levels of technical assistance: universal, targeted and intensive. IEP TA Center maintains a website which provides a catalog of free workshops for the field in addition to the IEP TA Learning Center. The Learning Center provides access to universal on-demand support through the use of videos and accessible resources in a variety of areas, including instructional practices, evaluations, the IEP process, and MTSS. IEP TA Center also provides training and support on LEA determinations, SPP Indicators and possible indicator findings, and other special education data included in the RDA Dashboard. The IEP TA Center receives a list of RDA results from the IDOE. The IEP TA Center engages with LEAs identified by the IDOE, leads the LEA in a comprehensive data dive, and one or more of the following: success gap rubric, corporation capacity assessment, needs assessment, beliefs survey, climate/culture survey, readiness indicators, self-assessment of MTSS. The results of these assessments are analyzed and reviewed with LEA staff. Following the intake process, the IEP TA Center specialist will work collaboratively with the LEA to determine goals of the work to improve outcomes for students with disabilities and create a plan of support. Additional information regarding IEP TA Center can be found at https://www.iepta.org/.

In addition, IDOE funds technical assistance projects related to assistive technology, universal deprine applications applied to assistive technology, universal deprine applications applied to a projects.

In addition, IDOE funds technical assistance projects related to assistive technology, universal design for learning, and accessible educational materials through the Promoting Achievement through Technology and Instruction for all Students (PATINS) Project. PATINS offers consultation services, guidance, support, observation, and feedback to assist LEAs in selecting assistive technology. The lending library contains assistive technology devices, software, and resource materials that are available for 6 week trial periods. AEMing for Achievement is a voluntary program for LEAs to work with PATINS in order to implement changes to policy, programming, practice, or operations that support increased capacity for assistive technology and accessible educational materials. Additional information regarding the PATINS Project can be found at https://patinsproject.org.

IDOE specialists also provide technical assistance to the field in all areas of general supervision with support available by specialists who are experts in their indicator area. Data from LEA requests are compiled and analyzed annually. TA Centers provide reports about the services they provide, then this is analyzed, and future technical assistance is determined based on this data. Valid and reliable data about LEA program compliance with IDEA is an

essential component used to identify the training and professional development needed for the following year. In addition to the TA being provided after results findings, TA can also be requested by LEAs proactively through a web-based technical assistance request form.

### **Professional Development System:**

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

Professional Development ranges from a basic level of providing general information to targeted and intensive PD, which is focused on data driven school improvement in LEAs, schools, and classrooms. Professional development opportunities were funded by special education grants through the IDOE Office of Special Education and made available through the following centers:

- 1) The IEP TA Center increases knowledge, skills, and capacity of Indiana educators to improve outcomes for students with disabilities. https://www.iepta.org/.
- 2) The PATINS Project helps to support Indiana public schools in creating and sustaining an equitable learning environment for every student through increasing the availability of assistive technology devices and services for students with disabilities. The PATINS Project also provides refurbished technology for students with disabilities. https://www.patinsproject.org/.
- 3) The PASS Project supports improving instructional quality, promotes academic achievement, and fosters successful post-secondary education transition outcomes for students with sensory loss. https://www.indstate.edu/education/Blumberg/PASS.
- 4) IN\*SOURCE is the Parent Training and Information Center in Indiana and provides high quality information, training, and support to families of children and young adults with disabilities and the individuals and organizations who serve them. https://insource.org/.

Training and professional development opportunities provided by the IDOE Office of Special Education include the following sessions through in-person and virtual sessions:

- 1) Annual New Directors Orientation: Offered in-person annually in July.
- 2) Best Practices When Writing Transition IEPs: Offered periodically throughout the year.
- 3) Indiana Learning Lab: A resource hub that is free and available to Indiana Educators. Professional development is offered both live and recorded for ease of access. The following sessions are archived on Indiana Learning Lab related to special education: Preschool SPED Data Collection, Introduction to NIMAC, High Leverage Practices, Expanding High Leverage Practices, RDA Review Process, Results Driven Accountability: Moving Forward, Special Education Program Evaluation Toolkit, Strategies to Support Diverse Learners in Secondary Classrooms, Science of Reading: Supporting Special Education Students, Practical Uses for Paraprofessionals, What Determines ESY?

IDOE OSE team office hours offered periodically throughout the year:

- 1) Preschool SPED Data Collection
- 2) Indicator 13
- 3) Initial Evaluation
- 4) Special Education Child Count
- 5) Alternate Assessment: Indiana's Alternate Measure (IAM).

IDOE sponsors 2 state-wide conferences annually:

- 1) Elevating Education: Improving Outcomes for All Statewide Conference offers:
- Targeted TA sessions with opportunities for correction were provided directly to LEAs with findings of noncompliance in Indicators 4, 9, 10, 11, 12, and 13

Universal TA sessions covering the following topics: Co-teaching, MTSS, Universal Design for Learning (UDL) provided by nationally recognized speakers and local educators.

2) Indiana Deaf Educators Conference: National and local speakers present on a variety of topics relevant to educating students who are deaf, hard of hearing, or deaf-blind.

Training and professional development opportunities provided by IDOE's Office of Special Education through collaboration with other IDOE Offices and State Agencies:

1) Indiana Alternate Measure (I AM) Office Hours (OSE/Office of Assessment collaboration)

## Stakeholder Engagement:

The mechanisms for broad stakeholder engagement, including activities carried out to obtain input from, and build the capacity of, a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting and any subsequent revisions to targets, analyzing data, developing improvement strategies, and evaluating progress.

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members.

Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation.

Examples of planned project-specific events include the State Systemic Improvement Plan (SSIP) implementation and priority indicator projects such as Indicator 13. These activities are described in detail as part of the Indicator data reporting page.

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

As mentioned earlier, IDOE benefits from ongoing collaboration with the parent training center and this has resulted in frequent opportunities to engage parents as stakeholders. IDOE staff have partnered with IN\*SOURCE on a regular basis to offer sessions related to specific topics (transition, early childhood transition, etc.) and during these sessions, parents are able to not only learn more about the topics but provide feedback and input. IDOE also utilizes several recurring mechanisms to share information and request feedback from stakeholders. IDOE provides a weekly update that includes pertinent information from across the department and allows for stakeholders to reach out through email or complete specific forms created to generate feedback. This same format is also utilized through a monthly newsletter sent from the OSE.

The OSE previously engaged the National Center for Systemic Intervention to support the Leveraging General Supervision Systems to Improve Student Outcomes Process. This process includes the engagement of a stakeholder group to explore grounding assumptions related to general supervision and from that process, establish a shared vision for the system. Following a review of mapping, comparing and planning, the stakeholders convened to review and provide additional feedback through broadly distributed surveying.

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

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

NO

**Number of Parent Members:** 

20

### **Parent Members Engagement:**

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

Parent input was obtained in a variety of means. Parent members of the State Advisory Panel along with other members of the panel engaged in discussion around proposed changes to how Indiana determines noncompliance for Indicators 4A and 4B this included analyzing data and evaluating which measurement systems would provide the most accurate way for Indiana to make determinations moving forward. The State Advisory Panel also participated in discussion around the SPP/APR and OSE's annual determinations for LEAs. The panel discussed improvement strategies and evaluated progress on dropout rate, statewide assessments, and discipline.

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

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

Beginning in September 2022, IDOE partnered with INSOURCE, Indiana's Parent Training Center, to hold an open office series. Topics included the annual parent survey to gage family involvement in the special education process, Science of Reading, transition IEPs, and the alternate assessment. Parents were given the opportunity to learn and ask questions about these topics as well as provide suggestions on improvement strategies and the opportunity to evaluate Indiana's progress with these specific areas. Additionally, in May 2023, OSE held stakeholder meetings to seek input on how to improve outcomes around graduation rate, prevent dropout, and improve the process of writing quality transition IEPs. All activities included a diverse group of stakeholders which included parents throughout the state of Indiana.

### **Soliciting Public Input:**

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

OSE utilized stakeholder meetings as well as surveys throughout winter and spring 2023 to solicit public input for setting targets for statewide assessments, parent involvement, and discipline.

### Making Results Available to the Public:

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

The results of target setting, data analysis, development of the improvement strategies, and evaluation are made available to the public on the IDOE special education website as soon as practical but no later than 120 days following the State's submission of the SPP/APR. Information related to the mechanisms and timelines is also available on the IDOE-OSE website in the "General Supervision Timeline" document (https://www.in.gov/doe/students/special-education/#Monitoring\_and\_Compliance\_Resources; direct link at https://www.in.gov/doe/files/General-Supervision-Timeline.pdf).

The OSE data specialists, in collaboration with the information technology team, compile the required information and format is a manner that is user friendly and accessible to the public. Announcements of the posting can be shared through several communication channels (such as IDOE weekly update and OSE newsletter).

### Reporting to the Public

How and where the State reported to the public on the FFY 2021 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 2021 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, is available.

The State reported the FFY 2021 performance of each LEA located in the State through public posting. The posting was made available at https://www.in.gov/doe/students/special-education/#Data\_and\_Data\_Reporting.

A complete copy of Indiana's FFY 2021 State Performance Plan/Annual Performance Report (SPP/APR) is located on the Web site at https://www.in.gov/doe/students/special-education/#State\_Performance\_Plan\_\_\_Annual\_Performance\_Report.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

### **Indicator 1: Graduation**

### **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

#### Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

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

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

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

## 1 - Indicator Data

### Historical Data<sup>1</sup>

Baseline Year	Baseline Data
2020	83.33%

FFY	2017	2018	2019	2020	2021
Target >=	74.00%	76.00%	76.50%	83.88%	84.33%
Data	70.87%	72.64%	71.4%²	83.33%	79.77%

### **Targets**

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

### **Targets: Description of Stakeholder Input**

As part of stakeholder engagement for FFY 2022, IDOE held a series of engagement webinars regarding transition indicators, including indicators 1, 2, 13, and 14. IDOE engaged a group of educators and a group of parents in these webinars to obtain feedback on the current process and determine if there were changes that might be needed in the future. IDOE also attempted to gather a group of students for engagement, but the turnout for this group was so small (1) that no meeting was held. It is the plan of IDOE to gather a group of students for future engagement sessions. IDOE staff actively attends and addresses the regional transition cadre meetings that include many LEAs from around the state. IDOE regularly asks for feedback from these groups in order to remain current with the opinions and ideas from around the state.

As graduation is a priority for the state, the rigorous targets set for youth with IEPs during the development of the state performance plan will remain.

### **Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	6,269
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	693

<sup>&</sup>lt;sup>1</sup> Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator.

<sup>&</sup>lt;sup>2</sup> Percentage blurred due to privacy protection.

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	33
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	527

#### FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
6,269	7,522	79.77%	84.88%	83.34%	Did not meet target	No Slippage

### **Graduation Conditions**

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

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

- 1) pass 40 credits of high school instruction, including specific requirements across subject areas in English, mathematics, social studies, science, physical education, health, and college and career readiness; AND
- 2) either:
- a) pass the graduation qualifying exam administered by the state or be granted a waiver under certain conditions if they do not pass this exam, OR
- b) be certified with a graduation pathway that includes an employability skills component and a postsecondary education readiness component. Requirements for students with disabilities are the same as those for students who are not disabled.

For more information regarding Indiana graduation requirements, see: https://www.in.gov/doe/files/Grad-Req-2019-2022.pdf and https://www.in.gov/doe/files/graduation-requirements.pdf

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

NO

Provide additional information about this indicator (optional)

## 1 - Prior FFY Required Actions

None

7

## 1 - OSEP Response

## 1 - Required Actions

## **Indicator 2: Drop Out**

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

#### **Data Source**

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

#### Magguramant

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

#### Instructions

#### Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a

state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

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

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

#### 2 - Indicator Data

#### **Historical Data**

Baseline Year	Baseline Data
2018	7.50%

FFY	2017	2018	2019	2020	2021
Target <=	7.01%	6.51%	6.01%	7.25%	7.00%
Data	7.04%	7.50%	9.86%	5.44%	9.91%

### **Targets**

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

### **Targets: Description of Stakeholder Input**

As part of stakeholder engagement for FFY 2022, IDOE held a series of engagement webinars regarding transition indicators, including indicators 1, 2, 13, and 14. IDOE engaged a group of educators and a group of parents in these webinars to obtain feedback on the current process and determine if there were changes that might be needed in the future. IDOE also attempted to gather a group of students for engagement, but the turnout for this group was so small (1) that no meeting was held. It is the plan of IDOE to gather a group of students for future engagement sessions. IDOE staff actively attends and addresses the regional transition cadre meetings that include many LEAs from around the state. IDOE regularly asks for feedback from these groups in order to remain current with the opinions and ideas from around the state.

Ensuring youth graduate is a priority for the state, so the rigorous targets set during the development of the state performance plan will remain.

### **Prepopulated Data**

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	6,269
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	693
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	33

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	527

#### FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
527	7,522	9.91%	6.75%	7.01%	Did not meet target	No Slippage

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

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

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

NO

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

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

Through the analysis of this data, it was identified that nearly 30% of all the dropouts in the state were accounted for by four LEAs. Additionally, one of the four LEAs accounted for 43% of the state dropouts. The state is continuing to monitoring these LEAs to ensure compliance with all regulatory requirements and to identify root causes and mitigation strategies.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

## Indicator 3A: Participation for Children with IEPs

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

### 3A - Indicator Data

#### **Historical Data:**

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Α	Grade 4	2018	99.38%
Reading	В	Grade 8	2018	99.27%
Reading	С	Grade HS	2018	96.23%
Math	Α	Grade 4	2018	99.33%
Math	В	Grade 8	2018	99.18%
Math	С	Grade HS	2018	96.43%

### **Targets**

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

## Targets: Description of Stakeholder Input

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. Following the COVID-19 pandemic, the IDOE has been closely monitoring the progress of all students, particularly students with disabilities (see https://www.in.gov/doe/about/news/indiana-department-of-education-presents-update-on-covid-19-academic-recovery-and-ilearn-results/). Strategies to address the instructional needs of students with disabilities is regularly discussed during stakeholder events. As the target of 95% aligns with federal requirements, it has been determined that targets will remain at this rate.

## FFY 2022 Data Disaggregation from EDFacts

### **Data Source:**

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

#### Date:

01/10/2024

## Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	14,590	12,971	11,032
b. Children with IEPs in regular assessment with no accommodations (3)	3,321	1,779	1,240
c. Children with IEPs in regular assessment with accommodations (3)	10,353	9,949	8,121
d. Children with IEPs in alternate assessment against alternate standards	744	919	981

#### **Data Source:**

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

## Date:

01/10/2024

## Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	14,582	12,961	11,029
b. Children with IEPs in regular assessment with no accommodations (3)	3,166	1,498	1,240
c. Children with IEPs in regular assessment with accommodations (3)	10,510	10,212	8,121
d. Children with IEPs in alternate assessment against alternate standards	734	913	978

<sup>(1)</sup> The children with IEPs who are English learners and took the ELP in lieu of the regular reading/language arts assessment are not included in the prefilled data in this indicator.

## FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	14,418	14,590	98.85%	95.00%	98.82%	Met target	No Slippage
В	Grade 8	12,647	12,971	97.44%	95.00%	97.50%	Met target	No Slippage
С	Grade HS	10,342	11,032	92.36%	95.00%	93.75%	Did not meet target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

<sup>(2)</sup> The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the prefilled data in this indicator.

<sup>(3)</sup> The term "regular assessment" is an aggregation of the following types of assessments, as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Α	Grade 4	14,410	14,582	98.84%	95.00%	98.82%	Met target	No Slippage
В	Grade 8	12,623	12,961	97.36%	95.00%	97.39%	Met target	No Slippage
С	Grade HS	10,339	11,029	92.34%	95.00%	93.74%	Did not meet target	No Slippage

### **Regulatory Information**

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

#### **Public Reporting Information**

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

The public report of assessment results is located at the following link. https://www.in.gov/doe/students/special-education/#Data\_and\_Data\_Reporting

Provide additional information about this indicator (optional)

## 3A - Prior FFY Required Actions

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

## Response to actions required in FFY 2021 SPP/APR

The State provided OSEP a web link demonstrating public reporting on the statewide assessment of children with disabilities in accordance with 34 C.F.R. § 300.160(f) within 90 days of the receipt of the State's 2023 determination letter.

A web link has been included in the FFY 2022 report.

## 3A - OSEP Response

## 3A - Required Actions

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

### **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

### 3B - Indicator Data

#### **Historical Data:**

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Α	Grade 4	2018	17.22%
Reading	В	Grade 8	2018	12.93%
Reading	С	Grade HS	2021	15.13%
Math	Α	Grade 4	2018	25.30%
Math	В	Grade 8	2018	8.62%
Math	С	Grade HS	2021	6.41%

### **Targets**

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

## Targets: Description of Stakeholder Input

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. Following the COVID-19 pandemic, the IDOE has been closely monitoring the progress of all students, particularly students with disabilities (see https://www.in.gov/doe/about/news/indiana-department-of-education-presents-update-on-covid-19-academic-recovery-and-ilearn-results/). Strategies to address the instructional needs of students with disabilities is regularly discussed during all stakeholder events. As this is a priority area and progress toward recovery for students with disabilities has been positive, it was determined that the targets should remain rigorous, continue to be closely monitored, but not revised at this time.

## FFY 2022 Data Disaggregation from EDFacts

### **Data Source:**

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

### Date:

01/10/2024

## Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	13,674	11,728	9,361
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,298	560	263
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	671	720	1,168

### **Data Source:**

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

#### Date:

01/10/2024

## Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	13,676	11,710	9,361
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,728	375	126
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,311	535	473

<sup>(1)</sup>The term "regular assessment" is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

## FFY 2022 SPP/APR Data: Reading Assessment

Gr ou p	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Α	Grade 4	1,969	13,674	15.44%	20.22%	14.40%	Did not meet target	Slippage
В	Grade 8	1,280	11,728	10.56%	15.93%	10.91%	Did not meet target	No Slippage
С	Grade HS	1,431	9,361	15.13%	16.13%	15.29%	Did not meet target	No Slippage

### Provide reasons for slippage for Group A, if applicable

During the COVID-19 pandemic, the students in grade 4 in FFY 2022 were in a more vulnerable stage of reading development as compared to the students reported in FFY 2021 which has impacted ongoing reading attainment. While the percentage above the level of slippage is minimal (.04%), OSE continues to closely monitor and support LEAs in the implementation of evidence based reading instruction (https://www.in.gov/doe/students/indiana-academic-standards/literacy/literacy-development/).

### FFY 2022 SPP/APR Data: Math Assessment

Gr ou p	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Α	Grade 4	3,039	13,676	21.55%	28.30%	22.22%	Did not meet target	No Slippage
В	Grade 8	910	11,710	6.63%	11.62%	7.77%	Did not meet target	No Slippage
С	Grade HS	599	9,361	6.41%	7.41%	6.40%	Did not meet target	No Slippage

### **Regulatory Information**

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

### **Public Reporting Information**

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

The public report of assessment results is located at the following link. https://www.in.gov/doe/students/special-education/#Data\_and\_Data\_Reporting

Provide additional information about this indicator (optional)

## 3B - Prior FFY Required Actions

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

## Response to actions required in FFY 2021 SPP/APR

The State provided OSEP a web link demonstrating public reporting on the statewide assessment of children with disabilities in accordance with 34 C.F.R. § 300.160(f) within 90 days of the receipt of the State's 2023 determination letter.

A web link has been included in the FFY 2022 report.

## 3B - OSEP Response

## 3B - Required Actions

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

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

### 3C - Indicator Data

#### **Historical Data:**

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Α	Grade 4	2018	43.05%
Reading	В	Grade 8	2018	47.31%
Reading	С	Grade HS	2018	77.85%
Math	Α	Grade 4	2018	47.30%
Math	В	Grade 8	2018	40.33%
Math	С	Grade HS	2018	54.09%

### **Targets**

Subject	Group	Group Name	2022	2023	2024	2025
Readin g	A >=	Grade 4	46.05%	47.05%	48.05%	49.05%
Readin g	B >=	Grade 8	50.31%	51.31%	52.31%	53.31%
Readin g	C >=	Grade HS	80.85%	81.85%	82.85%	83.85%
Math	A >=	Grade 4	50.30%	51.30%	52.30%	53.30%
Math	B >=	Grade 8	43.33%	44.33%	45.33%	46.33%
Math	C >=	Grade HS	57.09%	58.09%	59.09%	60.09%

## Targets: Description of Stakeholder Input

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. Following the COVID-19 pandemic, the IDOE has been closely monitoring the progress of all students, particularly students with disabilities (see https://www.in.gov/doe/about/news/indiana-department-of-education-presents-update-on-covid-19-academic-recovery-and-ilearn-results/). Strategies to

address the instructional needs of students with disabilities is regularly discussed during all stakeholder events. As this is a priority area and progress toward recovery for students with disabilities has been positive, it was determined that the targets should remain rigorous, continue to be closely monitored, but not revised at this time.

### FFY 2022 Data Disaggregation from EDFacts

**Data Source:** 

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

## Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	744	919	981
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	282	458	468

#### **Data Source:**

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

### Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	734	913	978
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	365	404	333

## FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	282	744	39.36%	46.05%	37.90%	Did not meet target	Slippage
В	Grade 8	458	919	45.85%	50.31%	49.84%	Did not meet target	No Slippage
С	Grade HS	468	981	44.42%	80.85%	47.71%	Did not meet target	No Slippage

## Provide reasons for slippage for Group A, if applicable

During the COVID-19 pandemic, the students in grade 4 in FFY 2022 were in a more vulnerable stage of reading development as compared to the students reported in FFY 2021 impacting ongoing reading attainment. While the percentage above the level of slippage is minimal (.46%), OSE continues to closely monitor and support LEAs in the implementation of evidence based reading instruction (https://www.in.gov/doe/students/indiana-academic-standards/literacy/development/).

### FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	365	734	40.92%	50.30%	49.73%	Did not meet target	No Slippage
В	Grade 8	404	913	46.69%	43.33%	44.25%	Met target	No Slippage
С	Grade HS	333	978	31.13%	57.09%	34.05%	Did not meet target	No Slippage

Provide reasons for slippage for Group A, if applicable

### **Regulatory Information**

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

## **Public Reporting Information**

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

The public report of assessment results is located at the following link. https://www.in.gov/doe/students/special-education/#Data\_and\_Data\_Reporting

Provide additional information about this indicator (optional)

## 3C - Prior FFY Required Actions

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

## Response to actions required in FFY 2021 SPP/APR

The State provided OSEP a web link demonstrating public reporting on the statewide assessment of children with disabilities in accordance with 34 C.F.R. § 300.160(f) within 90 days of the receipt of the State's 2023 determination letter.

A web link has been included in the FFY 2022 report.

## 3C - OSEP Response

## 3C - Required Actions

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

### **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2022-2023 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2022-2023 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

#### Instructions

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

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

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2022-2023 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2022-2023 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

### 3D - Indicator Data

### **Historical Data:**

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Α	Grade 4	2018	27.67
Reading	В	Grade 8	2018	36.52
Reading	С	Grade HS	2018	42.25
Math	Α	Grade 4	2018	28.04
Math	В	Grade 8	2018	28.50
Math	С	Grade HS	2018	26.98

### **Targets**

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A <=	Grade 4	26.17	25.67	25.17	24.67
Reading	B <=	Grade 8	35.02	34.52	34.02	33.52
Reading	C <=	Grade HS	40.75	40.25	39.75	39.25
Math	A <=	Grade 4	26.54	26.04	25.54	25.04
Math	B <=	Grade 8	27.00	26.50	26.00	25.50
Math	C <=	Grade HS	25.48	24.98	24.48	23.98

### Targets: Description of Stakeholder Input

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. Following the COVID-19 pandemic, the IDOE has been closely monitoring the progress of all students, particularly students with disabilities (see

https://www.in.gov/doe/about/news/indiana-department-of-education-presents-update-on-covid-19-academic-recovery-and-ilearn-results/). Strategies to address the instructional needs of students with disabilities is regularly discussed during all stakeholder events.

## FFY 2022 Data Disaggregation from EDFacts

### **Data Source:**

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

### Date:

01/10/2024

### Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	73,538	77,361	73,208
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	13,674	11,728	9,361
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	26,840	31,358	33,420
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,933	1,380	2,637
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,298	560	263
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	671	720	1,168

### **Data Source:**

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

## Date:

01/10/2024

## Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	73,537	77,318	73,209
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	13,676	11,710	9,361
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	31,822	22,619	20,306
d. All students in regular assessment with accommodations scored at or above proficient against grade level	3,284	1,043	1,394
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1,728	375	126
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,311	535	473

<sup>(1)</sup>The term "regular assessment" is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

## FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Α	Grade 4	14.40%	39.13%	24.60	26.17	24.73	Met target	No Slippage
В	Grade 8	10.91%	42.32%	30.89	35.02	31.40	Met target	No Slippage
С	Grade HS	15.29%	49.25%	34.23	40.75	33.97	Met target	No Slippage

## FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Α	Grade 4	22.22%	47.74%	25.13	26.54	25.52	Met target	No Slippage
В	Grade 8	7.77%	30.60%	22.23	27.00	22.83	Met target	No Slippage
С	Grade HS	6.40%	29.64%	23.78	25.48	23.24	Met target	No Slippage

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

## Indicator 4A: Suspension/Expulsion

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

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

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

#### **Data Source**

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

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

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

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

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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) and any enforcement actions that were taken.

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

### 4A - Indicator Data

### **Historical Data**

Baseline Year	Baseline Data
2022	0.00%

FFY	2017	2018	2019	2020	2021
Target <=	0.33%	0.23%	0.00%	1.70%	1.65%
Data	Not Valid and Reliable	7.14%	1.75%	22.22%	4.55%

#### **Targets**

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

### Targets: Description of Stakeholder Input

While targets were not changed for this reporting year, IDOE Office of Special Education has continued to engage stakeholders related to Indicator 4 policies and procedures. IDOE completed interviews with LEAs who were identified as non compliant in the previous year(s) and had effectively corrected the noncompliance. The focus of these discussions were related to corrective actions required by the State and provided stakeholders the opportunity to provide feedback on the impact of these actions related to changes in policies, practices, and procedures as part of the correction of noncompliance. This evidence has assisted IDOE in the review of current processes related to improving outcomes for children with disabilities. Stakeholder engagement sessions also included a discussion related to proposed changes to the state methodology for Indicator 4 and the opportunity to provide feedback. Participants included LEA special education directors and assistant directors, school level administrations such as principals and assistant principals, special education teachers, general education teachers, parents, and representatives from Indiana parent advocacy centers. Overall, stakeholders agreed that the targets set for Indicator 4A based on the 2019 baseline continued to be rigorous yet achievable despite the changed methodology for Indicator 4 for FFY 2022. For this reason, targets for Indicator 4A were not changed.

Information has been provided to the State Advisory Council regarding the proposed changes to Indicator 4 methodology. State Advisory Council meetings are open to the public and the council includes members of local disability organizations, parent advocacy and support groups, related state departments, LEA representatives, parent representatives, and non-public education agency representatives. The State Advisory Council supported IDOE's change in methodology for the FFY 2022 SPP/APR calculation of indicator 4 to decrease the N-size from 15 students to 10 students.

#### FFY 2022 SPP/APR Data

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

YES

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

355

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	56	4.55%	1.60%	0.00%	N/A	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

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

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

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

## Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 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 FFY 2022, no LEAs were identified with Significant Discrepancy. Therefore, a review of policies, procedures, and practices related to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards was not conducted by the State for FFY2022.

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

## Correction of Findings of Noncompliance Identified in FFY 2021

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

## FFY 2021 Findings of Noncompliance Verified as Corrected

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

To verify that the source of noncompliance was corrected and that the LEA is correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that the 1 LEA identified in FFY 2021 achieved 100% compliance with the specific regulatory requirements within one year of issuing a finding of noncompliance, consistent with OSEP QA 23-01. The LEA that was issued a finding of noncompliance for FFY 2021 have been verified as corrected.

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

To verify that each individual case of noncompliance was corrected, IDOE completed a subsequent review of the file found to be noncompliant within the state IEP system and verified that the 1 LEA identified in FFY 2021 completed a review and updated their policies, practices, and procedures relating to the identified noncompliance. IDOE confirmed that the LEA achieved 100% compliance with the requirements within one year of issuing a finding of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP QA 23-01.

### Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

## 4A - Prior FFY Required Actions

The State must report, in the FFY 2022 SPP/APR, on the correction of noncompliance that the State identified in FFY 2021 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Response to actions required in FFY 2021 SPP/APR

The State has verified that the 1 LEA found noncompliant in FFY 2021 is correctly implementing the specific regulatory requirements and has corrected each individual case of noncompliance (unless the child was no longer within the jurisdiction of the district) based on a review of updated data collected through the State data systems and the Indiana IEP student record reporting system.

## 4A - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

### 4A - Required Actions

## Indicator 4B: Suspension/Expulsion

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

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

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

#### **Data Source**

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

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

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

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

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance. Targets must be 0% for 4B.

### 4B - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

## **Historical Data**

Baseline Year	Baseline Data	
2022	1.79%	

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	Not Valid and Reliable	Not Valid and Reliable	0.00%	33.33%	0.00%

### **Targets**

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

#### FFY 2022 SPP/APR Data

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

YES

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

355

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1	1	56	0.00%	0%	1.79%	N/A	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

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

YES

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

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

## Provide additional information about this indicator (optional)

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

### Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 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 the LEA that the State identified as having a significant discrepancy in the rate of suspensions or expulsions greater than 10 days in a school year for children with IEPs, the following process was completed: The LEA was provided written notification that the LEA had significant discrepancy in discipline (over the Indiana defined risk index threshold of 2.0 for each of three years) and the annual data analysis reflected possible noncompliance for this indicator. The LEA was required to participate in a policy and procedure review based on the State developed rubric to examine local policies, practices, and procedures. As part of this review, the LEA submitted all written policies and procedures related to disciplinary practices for students with disabilities. The SEA reviewed policies and procedures using the rubric. The SEA identified specific areas of noncompliance to report to the LEA. The LEA was required to participate in a file review (minimum of 5 files) based on the State developed rubric to examine local practices. As part of this review, the LEA submitted 5 student files to be reviewed (unless the state had previously reviewed files resulting in fewer than 5 files available). The SEA reviewed the files using the rubric. The SEA identified specific areas of noncompliance to report to the LEA. If policies, practices, and/or procedures

relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and/or procedural safeguards were determined to be inappropriate, findings of noncompliance were issued. Following the review, 1 LEA was determined to have noncompliance within their policies, practices, and procedures. This LEA received a written finding of noncompliance.

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

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

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

Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

To address the requirements in OSEP QA 23-01, the state verified that the LEA identified with noncompliance revised their policies, procedures, and practices to comply with applicable requirements consistent with OSEP QA 23-01.

The LEA identified with noncompliance was required to conduct a root cause analysis to review their policies, procedures, and practices including student level noncompliance findings. Root cause analysis findings related to noncompliance were utilized to develop a corrective action plan outlining correction activity, timelines for implementation, person(s) responsible, and additional supports and/or materials necessary for implementation (e.g. training for staff). Progress on this indicator was monitored through the regularly scheduled contacts between the LEA and IDOE specialist to address the specific reason(s) of noncompliance. In addition, the LEA identified with noncompliance was informed that they could request additional technical assistance/professional development with the IDOE specialist and/or TA center provider(s). The LEA were required to submit a copy of their corrective action plan to IDOE for review.

The LEA identified as noncompliant were required to provide evidence of individual student level corrective action and evidence of compliance within policies, procedures, and practices in alignment with state and federal law.

After the submission of their corrective action, IDOE conducted a subsequent file review of individual student files within the LEA to ensure that the individual and regulatory noncompliance had been resolved.

IDOE ensured correction of noncompliance using the standard identified in OSEP QA 23-01 by verifying that the LEA identified with noncompliance addressed child-specific correction and systemic compliance with regulatory requirements. Correction of noncompliance and subsequent verification of implementation of regulatory requirements was completed within one-year of the issuance of finding of noncompliance and individual student level correction was completed, except in instances when the child was no longer within the jurisdiction of the district.

### Correction of Findings of Noncompliance Identified in FFY 2021

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

## Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

### 4B - Prior FFY Required Actions

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

## Response to actions required in FFY 2021 SPP/APR

IDOE held a meeting with our State Advisory Council to discuss proposed changes to Indicator 4 methodology necessary to comply with OSEP's QA 23-01 guidance to include a higher percentage of LEAs in the examination. State Advisory Council meetings are open to the public and the council includes members of local disability organizations, parent advocacy and support groups, related state departments, LEA representatives, parent representatives, and non-public education agency representatives. The State Advisory Council supported IDOE's change in methodology for the FFY 2022 SPP/APR calculation of indicator 4 to decrease the N-size from 15 students to 10 students.

A note regarding Indiana's methodology for 4A and 4B: While inclusion of 13.63% of LEAs in FFY 2022 is an improvement from 5.42% in FFY 2021, Indiana recognizes that a large number of LEAs are still excluded due to their enrollment size. Through engagement with stakeholders, Indiana intends to update our methodology again for FFY 2023 to include a greater number of LEAs in the calculation. These intended changes seek to make the calculation more equitable across the state to prevent LEAs from being excluded from the calculation due to a low enrollment size. Stakeholder engagement and feedback sessions regarding the proposed update to Indiana's Indicator 4 methodology were held in January 2024. To increase capacity of Indiana stakeholders, engagement sessions and feedback opportunities have been intentionally offered at varying times and methods for ways to participate, including facilitated discussions, Q&A sessions, and online surveys. Subsequent stakeholder sessions are scheduled for February 2024 to discuss the anticipated outcomes of these methodology changes, as well as engage with LEAs and other stakeholders on support IDOE can provide via technical assistance. IDOE anticipates that in future years, indicators 4A and 4B are likely to experience additional slippage, due to the increase in LEAs that will be included in the calculation, and therefore identified with noncompliance. IDOE believes that this consistency and accuracy with our methodology and therefore our ability to adequately identify LEAs in need of correction, will help reduce the frequency of instances of noncompliance long-term.

## 4B - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

## **4B- Required Actions**

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the districts identified with noncompliance in FFY 2022 have corrected the noncompliance, including that the State verified that each district with noncompliance 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 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance (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 2022.

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

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

### Measurement

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

#### Instructions

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

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.

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

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

### 5 - Indicator Data

#### **Historical Data**

Part	Baseline	FFY	2017	2018	2019	2020	2021
Α	2020	Target >=	71.00%	72.00%	73.00%	77.45%	77.70%
Α	77.45%	Data	73.98%	75.33%	76.21%	77.45%	77.87%
В	2020	Target <=	10.00%	9.50%	9.00%	7.97%	7.87%
В	7.97%	Data	9.34%	8.68%	8.28%	7.97%	7.88%
С	2020	Target <=	2.12%	2.11%	2.10%	1.65%	1.55%
С	1.65%	Data	1.82%	1.87%	1.94%	1.65%	1.70%

### **Targets**

FFY	2022	2023	2024	2025
Targe t A >=	77.95%	78.20%	78.45%	78.70%
Targe t B <=	7.77%	7.67%	7.57%	7.47%
Targe t C <=	1.45%	1.34%	1.24%	1.14%

## Targets: Description of Stakeholder Input

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. Related to Indicator 5, Indiana has consistently been significantly above the national mean for Part A and significantly below the national mean for Parts B and C. With that, it has been determined that current targets are aligned with the inclusive education goals of stakeholders.

### **Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	174,063
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec 08/30/2023		136,022
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	13,925
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,426
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	389
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	1,005

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.

## FFY 2022 SPP/APR Data

Educat	ion Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day		136,022	174,063	77.87%	77.95%	78.15%	Met target	No Slippage
IEPs age	per of children with ed 5 (kindergarten) 21 inside the class less than 40% by	13,925	174,063	7.88%	7.77%	8.00%	Did not meet target	Slippage
IEPs age through schools, or home	per of children with ed 5 (kindergarten) 21 inside separate residential facilities, bound/hospital ints [c1+c2+c3]	2,820	174,063	1.70%	1.45%	1.62%	Did not meet target	No Slippage
Part	Reasons for slippage, if applicable							
В	Indiana is committed to the inclusion of all students in the least restrictive environment and has historically been significantly below the national mean for Part B rates. The current data remains significantly below the national mean of 10.29% and is .02% above the rate at which slippage is identified. While the rate difference is small, it is important to review and in analyzing the overall education environment data, it is noted that the rate for Part C has improved from 1.70% to 1.62% representing a .08% increase. Many of the students moving						the rate at environment	

Provide additional information about this indicator (optional)

## 5 - Prior FFY Required Actions

None

30 Part B

from the placement represented by Part C would move into Part B and be a primary factor related to the slippage identified.

- 5 OSEP Response
- 5 Required Actions

### Indicator 6: Preschool Environments

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

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

For Indicator 6C: States may express their targets in a range (e.g., 75-85%).

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

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

## 6 - Indicator Data

### **Not Applicable**

Select yes if this indicator is not applicable.

NO

## Historical Data (Inclusive) - 6A, 6B, 6C

Part	FFY	2017	2018	2019	2020	2021
Α	Target >=	41.50%	42.00%	42.00%	27.22%	27.72%
Α	Data	39.98%	39.38%	38.50%	27.22%	29.29%
В	Target <=	32.70%	32.60%	32.60%	39.15%	38.90%
В	Data	32.56%	32.35%	31.54%	39.15%	38.36%
С	Target <=				0.61%	0.60%
С	Data				0.61%	0.43%

## Targets: Description of Stakeholder Input

Indiana's Governor has identified early childhood as a priority within his Next Level Agenda

(https://events.in.gov/event/gov\_holcomb\_unveils\_2024\_next\_level\_agenda). The IDOE and specifically the Office of Special Education (OSE) have been working to support this initiative and to ensure children with disabilities are included in all early learning opportunities. This has involved numerous events to discuss the early childhood indicators and the needs of children with disabilities with stakeholders. The OSE is partnering with several agencies to share information and seek feedback including IN\*SOURCE, the parent training and information center, Indiana Family and Social Services Association, Indiana Department of Health, Indiana First Steps (Part C program), Head Start and others.

Indiana has revised the State Systemic Improvement Plan (SSIP) to address early childhood outcomes and this plan will support inclusive practices. There are also designated stakeholder groups related to this plan who will provide input on the targets and implementation strategies related to inclusive practices.

As the plan is in development, it was determined that targets would remain as established in the state performance plan and continue to be reviewed as the plan progresses.

## **Targets**

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

Inclusive Targets

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

Target Range not used

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

Part	Baseline Year	Baseline Data		
Α	2020	27.22%		
В	2020	39.15%		
С	2020	0.61%		

## Inclusive Targets - 6A, 6B

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

## Inclusive Targets - 6C

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

### **Prepopulated Data**

### **Data Source:**

SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

## Date:

08/30/2023

Description	3	4	5	3 through 5 - Total	
Total number of children with IEPs	4,962	6,233	2,820	14,015	
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	1,226	1,993	1,007	4,226	
b1. Number of children attending separate special education class	2,109	2,232	812	5,153	
b2. Number of children attending separate school	50	57	22	129	
b3. Number of children attending residential facility	0	1	1	2	
c1. Number of children receiving special education and related services in the home	36	41	15	92	

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 2022 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2021 Data	FFY 2022 Target	FFY 2022 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	4,226	14,015	29.29%	28.22%	30.15%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	5,284	14,015	38.36%	38.65%	37.70%	Met target	No Slippage
C. Home	92	14,015	0.43%	0.59%	0.66%	Did not meet target	Slippage

## Provide reasons for slippage for Group C aged 3 through 5, if applicable

In analyzing the data related to preschoolers with IEPs reportedly receiving the majority of their special education services in the home, the primary issue identified was the incorrect use of the location code H. Of the students identified as receiving special education services in the home, only a small percentage actually received their preschool special education services in the home. To improve the quality of data being submitted, IDOE updated and republished several guidance documents to assist LEAs in selecting the correct location code for preschoolers with IEPs. In addition, IDOE held a live learning session to provide guidance on preschool special education data collection which was recorded and can be easily accessed by LEAs.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

### Indicator 7: Preschool Outcomes

## **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

State selected data source.

#### Measurement

Outcomes:

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

#### Progress categories for A, B and C:

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

  e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who
- 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 <u>General Instructions</u> on page 3 for additional instructions on sampling.)

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

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

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

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

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

### 7 - Indicator Data

### **Not Applicable**

Select yes if this indicator is not applicable.

NO

### **Historical Data**

Part	Baseline	FFY	2017	2018	2019	2020	2021
A1	2018	Target >=	76.00%	77.00%	77.00%	75.25%	75.50%
A1	75.41%	Data	74.14%	75.41%		58.93%	42.99%

Part	Baseline	FFY	2017	2018	2019	2020	2021
A2	2018	Target >=	26.00%	27.00%	27.00%	21.00%	22.00%
A2	19.36%	Data	18.98%	19.36%		26.03%	29.69%
B1	2018	Target >=	82.50%	83.00%	83.00%	82.25%	82.50%
B1	81.82%	Data	82.05%	81.82%		60.24%	45.62%
B2	2018	Target >=	17.00%	17.50%	17.50%	11.75%	12.50%
B2	10.15%	Data	10.17%	10.15%		17.85%	33.88%
C1	2018	Target >=	85.00%	85.50%	85.50%	84.25%	84.50%
C1	84.27%	Data	84.31%	84.27%		57.30%	29.57%
C2	2018	Target >=	18.50%	19.00%	19.00%	13.00%	14.00%
C2	11.80%	Data	11.38%	11.80%		17.35%	54.42%

## **Targets**

9								
FFY	2022	2023	2024	2025				
Target A1 >=	75.75%	76.00%	76.25% 76.50%					
Target A2 >=	23.00%	24.00%	24.00% 25.00% 26.00%					
Target B1 >=	82.75%	83.00%	83.25%	83.50%				
Target B2 >=	13.25%	14.00%	14.75%	15.50%				
Target C1 >=	84.75%	85.00%	85.25%	85.50%				
Target C2 >=	15.00%	16.00%	17.00%	18.00%				

### **Targets: Description of Stakeholder Input**

Summary statement 1 of 7a is the primary source of data for the state's new SSIP. As a result, many of the stakeholder meetings around the SSIP also involved discussion around the statewide assessment tool, ISPROUT, and its ability to accurately represent the outcomes of preschoolers in special education. Additionally, a survey was sent out to stakeholders (teachers, administration, parents, speech/language pathologists and other providers) seeking additional input on the benefits of the statewide assessment tool and the concerns with the tool. In the next reporting period, action steps (including training, resources, and additional supports) will be made available to LEAs to improve the quality of the data reported. Stakeholders will also be engaged in the next reporting period in resetting the states' targets to be more achievable and reflective of what is happening in the state.

### FFY 2022 SPP/APR Data

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

1,698

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

Outcome A Progress Category	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	227	13.37%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	529	31.15%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	505	29.74%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	187	11.01%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	250	14.72%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age	692	1,448	42.99%	75.75%	47.79%	Did not meet target	No Slippage

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
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. Calculation:(c+d)/(a+b+c+d)							
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. Calculation: (d+e)/(a+b+c+d+e)	437	1,698	29.69%	23.00%	25.74%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	191	12.14%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	335	21.30%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	566	35.98%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	260	16.53%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	221	14.05%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. Calculation: (c+d)/(a+b+c+d)	826	1,352	45.62%	82.75%	61.09%	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. Calculation: (d+e)/(a+b+c+d+e)	481	1,573	33.88%	13.25%	30.58%	Met target	No Slippage

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

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	142	9.67%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	209	14.24%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	451	30.72%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	487	33.17%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	179	12.19%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.  Calculation:(c+d)/(a+b+c+d)	938	1,289	29.57%	84.75%	72.77%	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.  Calculation: (d+e)/(a+b+c+d+e)	666	1,468	54.42%	15.00%	45.37%	Met 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

Sampling Question	Yes / No
Was sampling used?	NO

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

NC

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

IDOE utilizes the Indiana Student Performance Readiness and Observation of Understanding Tool (ISPROUT) as a statewide assessment tool. This tool is a derivative of the Indiana Early Learning Standards and are aligned to the Indiana standards for kindergarten readiness in the areas of mathematics, English/language arts, physical skills, personal care skills and social-emotional skills. Teachers or speech language pathologists (SLPs) complete the assessment at the entrance and exit of the program. The initial entrance and final exit scores are used to assess growth. Based on the student data, a score that is equal to or above the expected score would be considered evidence of achievement at a level that is 'comparable to same-age peers

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

ISPROUT is the assessment used by educators to: a)identify student skills, knowledge, and behaviors; and b) monitor growth through daily observations and activities. ISPROUT is required for all preschool-aged students eligible for special education. Students are required to be observed by ISPROUT-certified special education teachers or SLPs. The students are rated during their first six weeks of receiving services and within the final six weeks prior to exiting special education services or exiting to kindergarten. To assist in monitoring of the assessment data, the system organizes information on being submitted into 4 assessment windows.

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

The 1,698 preschool children aged 3 through 5 with IEPs reflects all the students that are exiting Special Education and were assessed using ISPROUT. The population for each outcome varies because some students do not have complete entry-exit scores across each target area that make up the three outcome categories and therefore a score cannot be calculated. A student must have two valid scores at least 6 months apart on the majority of targets in each outcome area to receive a rating for the given outcome. Students are included in the overall population 1,698 if that student had a valid entry-outcome pair of scores for at least one outcome area.

# 7 - Prior FFY Required Actions

None

# 7 - OSEP Response

# 7 - Required Actions

### **Indicator 8: Parent involvement**

# **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

#### **Data Source**

State selected data source.

#### Measurement

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

#### Instructions

Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See <u>General Instructions</u> on page 3 for additional instructions on sampling.)

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

Provide the actual numbers used in the calculation.

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

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

Include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

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

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

# 8 - Indicator Data

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

#### Targets: Description of Stakeholder Input

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. Related to Indicator 8, rigorous targets have been set by stakeholders, and ongoing discussions related to the targets support continuing targets at the current levels.

# **Historical Data**

Baseline Year	Baseline Data
2022	99.93%

FFY	2017	2018	2019	2020	2021
Target >=	73.00%	74.00%	75.00%	94.67%	95.67%
Data	79.92%	94.44%	93.67%	93.00%	93.23%

# **Targets**

FFY	2022	2023	2024	2025
Target >=	99.93%	99.94%	99.95%	99.96%

#### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
4,358	4,361	93.23%	99.93%	99.93%	N/A	N/A

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

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

The number of parents to whom the surveys were distributed.

188,221

Percentage of respondent parents

2 32%

# Response Rate

FFY	2021	2022
Response Rate	2.41%	2.32%

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

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

Include the State's analyses of the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must include race/ethnicity in their analysis. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

- 1) Black/African American students were underrepresented by five raw percentage points from their percentage within the targeted population. This is consistent with FFY 2021.
- 2) Hispanic/Latino were underrepresented by five raw percentage points from their percentage within the targeted population. This is a slight increase from FFY 2021 (four raw percentage points).
- 3) Students with a primary disability category of Speech/Language Impairment (8%) were underrepresented by thirteen raw percentage points from their percentage within the targeted population. Students with a primary disability category of Speech/Language Impairment were not underrepresented in FFY 2021

Grade level data is representative of the state population.

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

NO

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics Strategies that will be utilized to increase response rate include:

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

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

Strategies that will be utilized to increase response rate include:

1) Providing reminders for special education staff in the Office of Special Education monthly newsletter and Indiana Department of Education (IDOE)

weekly update to complete the parent survey as part of the Annual Case Review.

- 2) IDOE, in partnership with the state Parent Training Center (INSOURCE), will continue to host webinars for parents and families of students with disabilities to discuss the purpose and importance of the parent survey;
- 3) Continuing to determine what additional languages need to be made available. Languages are selected based on data from the statewide IEP system.
- 4) Reviewing responses throughout the school year and reaching out to LEAs who have not received any responses or have significantly few responses to develop strategies to facilitate the completion of the survey.

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

The response rate remained stable with FFY 2021 having a response rate of 2.41% and FFY 2022 having a response rate of 2.32%.

Analysis for nonresponse bias indicates nonresponse bias in the following areas: Black/African American, Hispanic/Latino, Speech/Language Impairment

When examining the number of parents reporting that they were involved by the LEA in the IEP process, there was no significant difference across all population subgroups (race/ethnicity, grade level, disability status) in the percentage answering in the affirmative.

- IDOE is taking the following steps to reduce identified bias and promote responses from a broad cross section of parents of children with disabilities:
- 1) Track survey responses geographically and target support/professional development for areas not represented
- 2) Provide the survey in a variety of formats (online, paper, and able to respond over the phone) to encourage participation
- 3) Provide the survey in the three most prevalent languages used in Indiana (English, Spanish, and Burmese).

Sampling Question	Yes / No	
Was sampling used?	NO	

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	YES
If yes, provide a copy of the survey.	IDOE 23-24 Parent Survey

Provide additional information about this indicator (optional)

# 8 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

# Response to actions required in FFY 2021 SPP/APR

The State has reported in the FFY 2022 data whether the response group is representative of the demographics of children receiving special education services, and the actions the State is taking to address this issue. The analysis includes the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

# 8 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

The State revised its targets for this indicator, and OSEP accepts those targets.

#### 8 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of children receiving special education services.

# **Indicator 9: Disproportionate Representation**

# **Instructions and Measurement**

Monitoring Priority: Disproportionality

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

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

#### **Data Source**

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

#### Massuramant

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures. 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 2022 reporting period (i.e., after June 30, 2023).

#### Instructions

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

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 child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance.

# 9 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

# **Historical Data**

Baseline Year	Baseline Data
2020	0.79%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.28%	0.00%	0.79%	0.52%

#### **Targets**

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

#### FFY 2022 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.

130

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
3	1	274	0.52%	0%	0.36%	Did not meet target	No Slippage

Were all races and ethnicities included in the review?

YES

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

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

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

LEAs identified as disproportionate based on the state definition were notified by IDOE. This notification included a request to submit policies and procedures and to participate in a file review process. A minimum of five files were identified for review based on the state developed rubric designed to demonstrate LEA practices. Files from the 2022-2023 school year, including evaluations, Response to Intervention (RTI) progress data, conference summaries, parent communication/involvement, and eligibility determinations were monitored. Following the review, 1 LEA was determined to have noncompliance within their policies, practices, and procedures. This LEA received a written finding of noncompliance.

# Provide additional information about this indicator (optional)

Please note there were 413 LEAs in Indiana during FFY 2022.

#### Correction of Findings of Noncompliance Identified in FFY 2021

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

#### FFY 2021 Findings of Noncompliance Verified as Corrected

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

To verify that the source of noncompliance was corrected and that the LEAs identified are correctly implementing regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that the 2 LEAs identified in FFY 2021 achieved 100% compliance with the specific regulatory requirements within one year of issuing findings of noncompliance, consistent with OSEP QA 23-01.

To address the requirements in OSEP QA 23-01, the state verified that the LEAs identified with noncompliance revised their policies, procedures, and practices to comply with applicable requirements consistent with OSEP QA 23-01.

The LEAs identified with noncompliance were required to conduct a root cause analysis to review their policies, procedures, and practices including student level noncompliance findings. Root cause analysis findings related to noncompliance were utilized to develop a corrective action plan outlining correction activity, timelines for implementation, person(s) responsible, and additional supports and/or materials necessary for implementation (e.g. training for staff). Progress on this indicator was monitored through the regularly scheduled contacts between the LEAs and IDOE specialist to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could request additional technical assistance/professional development with the IDOE specialist and/or TA center provider(s). The LEAs were required to submit a copy of their corrective action plan to IDOE for review. The LEAs identified as noncompliant were required to provide evidence of individual student level corrective action and evidence of compliance within policies, procedures, and practices in alignment with state and federal law.

After the submission of their corrective action, IDOE conducted a subsequent file review of individual student files within the LEAs to ensure that the individual and regulatory noncompliance had been resolved.

IDOE ensured correction of noncompliance using the standard identified in OSEP QA 23-01 by verifying that the LEAs identified with noncompliance addressed child-specific correction and systemic compliance with regulatory requirements. Correction of noncompliance and subsequent verification of implementation of regulatory requirements was completed within one-year of the issuance of finding of noncompliance and individual student level correction was completed, unless the child was no longer within the jurisdiction of the district.

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

To verify that each individual case of noncompliance was corrected, if an LEA had a finding of noncompliance within the policies and procedures, the LEA must provide evidence that it corrected the policies and procedures to be compliant with state and federal law. Following submission of each LEA's

corrective action plan, IDOE completed a review of the updated student files found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that the 2 LEAs identified in FFY 2021 achieved 100% compliance within one year of issuing findings of noncompliance and that components of their corrective plan addressed the noncompliance identified in order to promote future compliance. Correction of individual noncompliance was verified except in instances when the child was no longer within the jurisdiction of the district, consistent with OSEP QA 23-01.

### Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

# 9 - Prior FFY Required Actions

Because the State reported greater than 0% actual target data for this indicator for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the two districts identified in FFY 2021 with disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect greater than 0% actual target data for this indicator, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

## Response to actions required in FFY 2021 SPP/APR

IDOE identified two instances of noncompliance in FFY 2021. The State has verified correction of two findings of noncompliance identified in FFY 2021, consistent with OSEP QA 23-01. Each LEA with noncompliance identified in FFY 2021 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data. The state verified that each individual case of noncompliance was corrected, unless the student was no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. Verification of correction was based on a review of updated data collected through the State data systems and the Indiana IEP student record reporting system. These corrections were verified using a combination of file reviews and updated data subsequently collected through the school information system and statewide Indiana Individual Education Plan (IIEP) system.

# 9 - OSEP Response

# 9 - Required Actions

Because the State reported less than 100% compliance for FFY 2022 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the districts identified in FFY 2022 with disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance 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 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance (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 2022.

# 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.

#### Massuramant

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 section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). 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 meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2022 reporting period (i.e., after June 30, 2023).

#### Instructions

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

States are not required to report on underrepresentation

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

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

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

Targets must be 0%.

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

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

#### 10 - Indicator Data

# **Not Applicable**

Select yes if this indicator is not applicable.

NO

### **Historical Data**

Baseline Year	Baseline Data
2020	3.30%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	3.11%	Not Valid and Reliable	1.11%	3.30%	1.16%

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

#### FFY 2022 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.

214

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
14	2	199	1.16%	0%	1.01%	Did not meet target	No Slippage

Were all races and ethnicities included in the review?

YES

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

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

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

LEAs identified as disproportionate based on the state definition were notified in writing by IDOE. This notification included a request to submit policies and procedures and to participate in a file review process. A minimum of five files were identified for review based on the state developed rubric designed to demonstrate LEA practices. Files from the 2022-2023 school year, including evaluations, Response to Intervention (RTI) progress data, conference summaries, and eligibility determinations were monitored. Following the review, 2 LEAs were determined to have noncompliance within their policies, practices, and procedures. These LEAs received a written finding of noncompliance.

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

Please note there were 413 LEAs in Indiana during FFY 2022.

#### Correction of Findings of Noncompliance Identified in FFY 2021

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

# FFY 2021 Findings of Noncompliance Verified as Corrected

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

IDOE identified four instances of noncompliance in FFY 2021. The State has verified correction of four findings of noncompliance identified in FFY 2021, consistent with OSEP QA 23-01. Each LEA with noncompliance identified in FFY 2021 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data. The state verified that each individual case of noncompliance was corrected, unless the student was no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. Verification of correction was based on a review of updated data collected through the State data systems and the Indiana IEP student record reporting system. These corrections were verified using a combination of file reviews and updated data subsequently collected through the school information system and statewide Indiana Individual Education Plan (IIEP) system.

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

To verify that each individual case of noncompliance was corrected, if an LEA had a finding of noncompliance within the policies and procedures, the LEA must provide evidence that it corrected the policies and procedures to be compliant with state and federal law. Following submission of each LEA's corrective action plan, IDOE completed a review of the updated student files found to be noncompliant within the state IEP system subsequent to the finding of noncompliance and verified that the 4 LEAs identified in FFY 2021 achieved 100% compliance within one year of issuing findings of

noncompliance and that components of their corrective plan addressed the noncompliance identified in order to promote future compliance. Correction of individual noncompliance was verified unless the child was no longer within the jurisdiction of the district, consistent with OSEP QA 23-01.

# Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	1	1	0
FFY 2019	1	1	0

#### **FFY 2020**

#### Findings of Noncompliance Verified as Corrected

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

To address the requirements in OSEP QA 23-01, the state verified that the LEA identified with noncompliance revised their policies, procedures, and practices to comply with applicable requirements consistent with OSEP QA 23-01.

To verify that the LEA identified with noncompliance is correctly implementing the regulatory requirements, IDOE completed a review of additional student files within the state IEP system subsequent to the finding of noncompliance and verified that the LEA with noncompliance identified in FFY 2020 has achieved 100% compliance with the regulatory requirements, consistent with OSEP QA 23-01.

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

The LEA identified as noncompliant in FFY 2020 was required to provide evidence of individual student level corrective action and evidence of compliance within policies, procedures, and practices in alignment with state and federal law.

After the submission of their corrective action, IDOE conducted a subsequent file review of individual student files within the LEA to ensure that the individual and regulatory noncompliance had been resolved.

within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP QA 23-01.

#### **FFY 2019**

### Findings of Noncompliance Verified as Corrected

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

The LEA identified as noncompliant and not yet verified as corrected in the FFY 2021 SPP/APR with noncompliance from FFY 2020 and 2019 was the same district. The district identified as noncompliant was required to complete a root cause analysis and develop a Corrective Action Plan (CAP) related to the identified disproportionality and noncompliance. Additional technical assistance was provided through meetings with IDOE special education specialists. Additional monitoring and data submissions were required as part of the CAP and subsequent file review process was completed with student files using the statewide Indiana Individual Education Plan (IIEP) system. IDOE has verified that this LEA with noncompliance that had not been corrected in FFY 2020 and FFY 2019 has achieved 100% compliance consistent with OSEP QA 23-01 requirements.

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

The LEA identified as noncompliant in FFY 2019 was required to provide evidence of individual student level corrective action and evidence of compliance within policies, procedures, and practices in alignment with state and federal law.

After the submission of their corrective action, IDOE conducted a subsequent file review of individual student files within the LEA to ensure that the individual and regulatory noncompliance had been resolved.

within one year of issuing findings of noncompliance, unless the child was no longer within the jurisdiction of the district, consistent with OSEP QA 23-01.

# 10 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the four districts identified in FFY 2021 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021. Further, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining one district identified in FFY 2020, and one district identified in FFY 2019 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification, are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. In demonstrating the correction of the noncompliance identified in FFY 2021, FFY 2020 and FFY 2019, the State must report, in the FFY 2022 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2021 and each district with remaining noncompliance identified in FFY 2020 and FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the

# Response to actions required in FFY 2021 SPP/APR

IDOE identified four instances of noncompliance in FFY 2021. The State has verified correction of four findings of noncompliance identified in FFY 2021, consistent with OSEP QA 23-01. Each LEA with noncompliance identified in FFY 2021 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data. The state verified that each individual case of noncompliance was corrected, unless the student was no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. Verification of correction was based on a review of updated data collected through the State data systems and the Indiana IEP student record reporting system. These corrections were verified using a combination of file reviews and updated data subsequently collected through the school information system and statewide Indiana Individual Education Plan (IIEP) system.

# 10 - OSEP Response

# 10 - Required Actions

Because the State reported less than 100% compliance for FFY 2022 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the districts identified in FFY 2022 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, including that the State verified that each district with noncompliance 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 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance (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 2022.

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

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

# 11 - Indicator Data

# **Historical Data**

Baseline Year	Baseline Data
2020	95.96%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	98.72%	98.34%	96.14%	95.96%	97.28%

#### **Targets**

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

# FFY 2022 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 Stateestablished timeline)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
25,627	25,504	97.28%	100%	99.52%	Did not meet target	No Slippage

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

123

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

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

1-5 days: 44

6-10 days: 18 11-15 days: 23

Over 15 or did not complete that school year: 38

Total: 123

The most common reasons reported by LEAs related to missed timelines include staff shortages, clerical errors and scheduling conflicts.

### Indicate the evaluation timeline used:

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

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

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

The time frame does not apply in the following situations:

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

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

State database that includes data for the entire reporting year

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

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

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

Provide additional information about this indicator (optional)

# Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
92	63	29	0

# FFY 2021 Findings of Noncompliance Verified as Corrected

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

Subsequent to verifying that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify correct implementation of the regulatory requirements. IDOE verified that 53 of the LEAs identified with noncompliance are implementing regulatory requirements (achieved 100% compliance) based on a review of updated data subsequently collected through the State data system consistent with OSEP QA 23-01.

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

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

### Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	16	15	1
FFY 2019	19	17	2
FFY 2018	23	20	3

#### **FFY 2020**

# Findings of Noncompliance Verified as Corrected

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

Subsequent to verifying that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify correct implementation of the regulatory requirements. IDOE verified that 15 of the LEAs identified with noncompliance are implementing regulatory requirements (achieved 100% compliance) based on a review of updated data subsequently collected through the State data system consistent with OSEP QA 23-01.

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

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

#### **FFY 2020**

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

#### Actions taken if noncompliance not corrected

IDOE has verified that the LEA identified as noncompliant in FFY 2020 has corrected each individual case of noncompliance from all previous reporting years. Through targeted monitoring using the state IEP system, IDOE has continued to identify noncompliance. IDOE continues to verify that each individual case of noncompliance is corrected and requires the LEA to submit a corrective action plan that will be supported through available technical assistance made available by the state.

#### **FFY 2019**

# Findings of Noncompliance Verified as Corrected

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

Subsequent to verifying that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify correct implementation of the regulatory requirements. IDOE verified that 17 of the LEAs identified with noncompliance are implementing regulatory requirements (achieved 100% compliance) based on a review of updated data subsequently collected through the State data system consistent with OSEP QA 23-01.

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

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

#### FFY 2019

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

### Actions taken if noncompliance not corrected

IDOE has verified that the 2 LEAs identified as noncompliant in FFY 2019 have corrected each individual case of noncompliance from all previous reporting years. Through targeted monitoring using the state IEP system, IDOE has continued to identify noncompliance. IDOE continues to verify that each individual case of noncompliance is corrected and requires the LEA to submit a corrective action plan that will be supported through available technical assistance made available by the state.

# **FFY 2018**

# Findings of Noncompliance Verified as Corrected

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

Subsequent to verifying that each individual case of noncompliance was corrected, IDOE utilized the State system for developing and storing individual education programs, Indiana IEP (IIEP), to verify correct implementation of the regulatory requirements. IDOE verified that 20 of the LEAs identified with noncompliance are implementing regulatory requirements (achieved 100% compliance) based on a review of updated data subsequently collected through the State data system consistent with OSEP QA 23-01.

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

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

#### **FFY 2018**

### Findings of Noncompliance Not Yet Verified as Corrected

#### Actions taken if noncompliance not corrected

IDOE has verified that the 3 LEAs identified as noncompliant in FFY 2018 have corrected each individual case of noncompliance from all previous reporting years. Through targeted monitoring using the state IEP system, IDOE has continued to identify noncompliance. IDOE continues to verify that each individual case of noncompliance is corrected and requires the LEA to submit a corrective action plan that will be supported through available technical assistance made available by the state.

# 11 - Prior FFY Required Actions

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

When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021, FFY 2020, FFY 2019, and FFY 2018 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

# Response to actions required in FFY 2021 SPP/APR

The State has reported on the status of correction of noncompliance identified in FFY 2021, FFY 2020, FFY 2019 and FFY 2018. The State did verify that 81 LEAs are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data collected through the State IEP system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA as verified through the State IEP system.

The State has reported on 6 LEAs that have not been verified as corrected and the actions that have been taken.

# 11 - OSEP Response

# 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2020, two remaining uncorrected findings identified in FFY 2019, and three remaining uncorrected findings identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and each LEA with remaining noncompliance identified in FFYs 2020, 2019, and 2018 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 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

# **Indicator 12: Early Childhood Transition**

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

#### **Data Source**

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

#### Measurement

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

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

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

#### Instructions

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

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

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR §303.211 or a similar State option.

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

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

# 12 - Indicator Data

# **Not Applicable**

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2005	95.80%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	97.39%	99.68%	92.08%	92.00%	96.19%

#### **Targets**

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

# FFY 2022 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	3,945
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	425

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,955
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.	440
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	7
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	2,955	3,073	96.19%	100%	96.16%	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

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

For the 118 children served in Part C and referred to Part B found to have a late eligibility determination, the ranges and reasons for the delay are as follows:

1 to 5 days: 8 6 to 10 days:10

11 to 15 days:14

16 to end of year:85

Timelines were missed for a variety of reasons identified as follows:

Staff shortages: Indiana continues to struggle finding qualified FTE early childhood special education providers. Many of the districts have to contract with outside providers and rely on their availability to schedule the evaluations

Timeline errors: Several LEAs would put the transition notification from Part C into their system only after the parent provided consent which prevented the evaluation team from knowing the timeline was related to the 3rd birthday rather than a traditional initial evaluation.

LEA staff errors: One of the state's largest LEAs documented the notification date as the date of case conference notification which led to many of the missed timelines. A few other LEAs assumed children transitioning from Part C who had birthdays over breaks could have their case conferences held when school was in session rather than during the break.

# Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

The data for this indicator is submitted to IDOE using Ed-Fi from the local education agency (LEA) student information system (SIS) to the Data Exchange (DEX) platform. Each LEA must upload child count, performance data, and compliance data to the DEX platform. These data are then stored in the IDOE data warehouse where it can be extracted and used for state and federal funding, performance indicators, and compliance indicators. Initial evaluation data is gathered from the IDOE-Evaluation collection and verified by LEAs to ensure accuracy. This data includes the date of receipt of parental consent, the date of the case conference determining eligibility and that outcome, as well as any reason the timeline could not be completed in a timely fashion. This data is then compared to the school calendar submissions to determine compliance. Data is reviewed for any data quality issues through a verification process between IDOE and LEAs. Any data issues are then corrected before the finding of noncompliance is recorded.

Provide additional information about this indicator (optional)

# Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
31	29	1	1

# FFY 2021 Findings of Noncompliance Verified as Corrected

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

There were 31 LEAs identified as the source of the 114 Indicator 12 instances of noncompliance related to regulatory requirements. Subsequently, all 31 LEAs corrected each instance of noncompliance. Of those 31 LEAs who were subsequently monitored for instances of noncompliance, 30 demonstrated the correct implementation of regulatory requirements based on review of subsequent data verifying compliance. The review completed is based on data available within the state system for developing and storing individual education programs, Indiana IEP (IIEP). To verify that each LEA found to have noncompliance was correctly implementing regulatory requirements the educational evaluation (EV) report available within IIEP (consisting of student identifying information such as: date of birth, Part C transition date, parental consent, case conference and services begin date) is reviewed to determine compliance. IDOE verified that 30 of the 31 LEAs were subsequently implementing regulatory requirements with 100% compliance.

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

There were 114 individual cases Indicator 12 noncompliance. IDOE utilized the state system for developing and storing individual education programs, Indiana IEP (IIEP) to verify each case was corrected. IIEP stores student event history which includes Part C transition date, date of birth, parental consent, case conference and services begin date. With the advanced reporting feature included within IIEP, each individual case of noncompliance was reviewed to ensure that the evaluation was completed, case conference held, and (if appropriate) services were started.

### FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

#### Actions taken if noncompliance not corrected

The LEA identified as noncompliant and not yet verified as corrected had previously completed a root cause analysis (RCA) with support from IDOE education and data specialists. A corrective action plan (CAP) was developed based on the RCA including additional monitoring. Through additional virtual meetings with the LEA, the LEA relayed there was a delay in referrals from Part C to the LEA which was prohibiting them from being timely with its transition practices. Further work with the Part C program and data specialist demonstrated the error was occurring when the data was initially entered into the student information system. The referral date was being listed as the parent consent date not the date of notification from Part C which was causing the delay. Additional training will be conducted with the LEA to ensure subsequent correction of noncompliance and correct implementation of the regulatory requirements.

## Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	1	0	1

#### **FFY 2020**

### Findings of Noncompliance Not Yet Verified as Corrected

### Actions taken if noncompliance not corrected

The LEA identified as noncompliant and not yet verified as corrected completed a root cause analysis (RCA) with support from IDOE education and data specialists. A corrective action plan (CAP) was developed based on the RCA including additional monitoring. This may include on-site/virtual monitoring visits to provide training regarding policies related to early childhood transition practices. It may also include support in improving and developing practices and procedures addressing identified barriers related to timely completion. Pursuant to General Supervision Guidance Doc 23-01 and OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements by achieving 100% compliance.

# 12 - Prior FFY Required Actions

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

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

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

# Response to actions required in FFY 2021 SPP/APR

The LEA identified as noncompliant and not yet verified as corrected completed a root cause analysis (RCA) with support from IDOE education and data specialists. A corrective action plan (CAP) was developed based on the RCA including additional monitoring. This may include on-site/virtual monitoring visits to provide training regarding policies related to early childhood transition practices. It may also include support in improving and developing practices and procedures addressing identified barriers related to timely completion. Pursuant to OSEP Memorandum 09-02, IDOE will continue to monitor the LEA to verify the correct implementation of the regulatory requirements by achieving 100% compliance.

# 12 - OSEP Response

# 12 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the remaining uncorrected finding of noncompliance identified in FFY 2021 and the remaining uncorrected finding identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and each LEA with remaining noncompliance identified in FFY 2021 and FFY 2020 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 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the

FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

# **Indicator 13: Secondary Transition**

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

#### **Data Source**

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

#### Measurement

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

#### Instructions

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

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

Targets must be 100%.

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

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

# 13 - Indicator Data

# **Historical Data**

Baseline Year	Baseline Data
2009	80.22%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	86.14%	68.70%	75.60%	77.04%	52.99%

# **Targets**

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

# FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
604	879	52.99%	100%	68.71%	Did not meet target	No Slippage

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

State monitoring

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

Indiana's Article 7 requires transition plans begin at age 14, prior to the 9th grade, or earlier if determined appropriate by the case conference committee. Indiana Department of Education (IDOE) conducts a compliance review of a randomly selected sample of students' transition IEPs. The review was conducted to ensure IDOE meets the reporting requirements and is providing ongoing technical assistance for local education agencies with compliance rates below 100%.

To determine and ensure compliance with Indicator 13, IDOE has developed the Indiana Transition IEP Checklist based on a data collection tool created by the National Technical Assistance Center on Transition the Collaborative (NTACT:C) and approved by OSEP. The IDOE utilized the 15-item Indiana Transition IEP Checklist to assess evidence in a student's IEP that the student had been provided the appropriate transition services to prepare them to successfully transition from secondary school to a post-secondary education and/or training program and to employment at an accuracy rate of 100%.

To generate the sample, IDOE used Microsoft Excel to run a random sampling program. If the corporation had fewer than 100 students with disabilities, four students were selected for the review. For corporations with more than 500 students, 10 students were selected. Therefore, a minimum of four and maximum of 10 transition IEPs were reviewed based on the size of the district. In some cases, charter schools had sample sizes of fewer than three students because these schools were serving a limited number of students or did not have large populations of students with disabilities.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	YES
If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age?	YES
If yes, at what age are youth included in the data for this indicator	14

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

#### Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
188	184	1	3

### FFY 2021 Findings of Noncompliance Verified as Corrected

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

IDOE issued 188 Indicator 13 findings of noncompliance with regard to regulatory requirements. Subsequently, 185 LEAs corrected all instances of noncompliance and demonstrated implementation of regulatory requirements in the additional file reviews conducted. To verify correction, IDOE reviewed updated policies, procedures, and practices, as well as reviewed data through a subsequent data set consisting of additional IEPs for these components and overall compliance. This review found that 185 LEAs demonstrated 100% compliance in the implementation of regulatory requirements. The three LEAs not verified as compliant continue to engage in technical assistance and professional development. Subsequent reviews of Transition IEPs will be completed until IDOE has verified 100% compliance in the implementation of regulatory requirements.

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

IDOE verified the correction of all individual cases of noncompliance based on the review of each noncompliant record via the Indiana statewide IEP system. IDOE also verified the enrollment status of a student with a non-compliant IEP if an LEA advised that the student was no longer enrolled due to graduation, transfer, withdrawal, etc. Correction was not required if the student was no longer enrolled.

### FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

# Actions taken if noncompliance not corrected

For the three findings that have yet to be corrected, the initial individual cases of noncompliance have been corrected for one LEA; however, subsequent reviews identified additional findings of noncompliance for the three LEAs. The districts have been engaged in reviewing and revising policies and procedures related to transition IEPs as well as engaging in ongoing technical assistance and professional development to improve transition IEPs. The three remaining districts will continue to be monitored until each individual case of noncompliance has been verified as corrected and subsequent file reviews verify the LEA is correctly implementing regulatory requirements by achieving 100% compliance.

# Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2020	11	11	0

# **FFY 2020**

#### **Findings of Noncompliance Verified as Corrected**

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

IDOE reviewed updated policies, procedures, and practices, as well as reviewed data through a subsequent data set consisting of additional IEPs for these components and overall compliance. These reviews took place using a subsequent review of records via the Indiana statewide IEP system. This review found that all 11 LEAs demonstrated 100% compliance in the implementation of regulatory requirements.

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

IDOE verified the correction of all individual cases of noncompliance based on the review of each noncompliant record via the Indiana statewide IEP system. IDOE also verified the enrollment status of a student with a non-compliant IEP if an LEA advised that the student was no longer enrolled due to graduation, transfer, withdrawal, etc. Correction was not required if the student was no longer enrolled. IDOE reviewed updated policies, procedures, and practices, as well as reviewed data through a subsequent data set consisting of additional IEPs for these components and overall compliance.

# 13 - Prior FFY Required Actions

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

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

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

# Response to actions required in FFY 2021 SPP/APR

In FFY 2021 IDOE issued 188 Indicator 13 findings of noncompliance with regard to regulatory requirements. Subsequently, 185 LEAs corrected all instances of noncompliance and demonstrated implementation of regulatory requirements in the additional file reviews conducted. To verify correction, IDOE reviewed updated policies, procedures, and practices, as well as reviewed data through a subsequent data set consisting of additional IEPs for these components and overall compliance. This review found that 185 LEAs demonstrated 100% compliance in the implementation of regulatory requirements. For the three findings that have yet to be corrected, the initial individual cases of noncompliance have been corrected for one LEA; however, subsequent pulls identified additional findings of noncompliance for all three LEAs. The districts have been engaged in reviewing and revising their policies and procedures related to transition IEPs as well as engaging in ongoing technical assistance and professional development to improve transition IEPs. The three remaining districts will be determined to be compliant once all findings of noncompliance have been corrected and no additional findings are identified in subsequent file reviews.

For FFY 2020, IDOE reviewed updated policies, procedures, and practices, as well as reviewed data through a subsequent data set consisting of additional IEPs for these components and overall compliance. These reviews took place using a subsequent pull of records via the Indiana statewide IEP system. This review found that all 11 LEAs demonstrated 100% compliance in the implementation of regulatory requirements.

# 13 - OSEP Response

#### 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the three (3) remaining uncorrected findings of noncompliance identified in FFY 2021 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and each LEA with remaining noncompliance identified in FFY 2021 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 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

### Indicator 14: Post-School Outcomes

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

#### **Data Source**

State selected data source.

#### Measurement

- A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.
- B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.
- C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

#### Instructions

Sampling of youth who had IEPs and are no longer in secondary school is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See <u>General Instructions</u> on page 3 for additional instructions on sampling.)

Collect data by September 2023 on students who left school during 2021-2022, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2021-2022 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

### I. Definitions

Enrolled in higher education as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

Competitive employment as used in measures B and C: States have two options to report data under "competitive employment":

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

Option 2: States report in alignment with the term "competitive integrated employment" and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Enrolled in other postsecondary education or training as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

Some other employment as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services).

# II. Data Reporting

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

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of "leavers" who are:

- 1. Enrolled in higher education within one year of leaving high school;
- 2. Competitively employed within one year of leaving high school (but not enrolled in higher education);
- 3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed):
- 4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).

"Leavers" should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, "leavers" who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also

happen to be employed. Likewise, "leavers" who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

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

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

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

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

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

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

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

# 14 - Indicator Data

### **Historical Data**

Measure	Baseline	FFY	2017	2018	2019	2020	2021
А	2022	Target >=	38.30%	38.80%	39.00%	25.00%	25.50%
Α	41.18%	Data	36.22%	25.00%	24.17%	22.06%	24.18%
В	2022	Target >=	65.50%	66.00%	66.00%	69.94%	70.44%
В	75.29%	Data	63.78%	63.89%	64.33%	69.94%	71.91%
С	2022	Target >=	79.50%	86.20%	86.00%	82.30%	82.80%
С	85.29%	Data	88.19%	83.33%	75.83%	82.30%	82.49%

# FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A >=	41.18%	26.50%	27.00%	41.19%
Target B >=	75.29%	71.44%	71.94%	75.30%
Target C >=	85.29%	83.80%	84.30%	85.30%

# Targets: Description of Stakeholder Input

As part of stakeholder engagement for FFY 2022, IDOE held a series of engagement webinars regarding transition indicators, including indicators 1, 2, 13, and 14. IDOE engaged a group of educators and a group of parents in these webinars to obtain feedback on the current process and determine if there were changes that might be needed in the future. IDOE also attempted to gather a group of students for engagement, but the turnout for this group was so small (1) that no meeting was held. It is the plan of IDOE to gather a group of students for future engagement sessions. IDOE staff actively attends and addresses the regional transition cadre meetings that include many LEAs from around the state. IDOE regularly asks for feedback from these groups in order to remain current with the opinions and ideas from around the state.

#### FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	405
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	170
Response Rate	41.98%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	70
2. Number of respondent youth who competitively employed within one year of leaving high school	58
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)	4
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).	13

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Enrolled in higher education (1)	70	170	24.18%	41.18%	41.18%	N/A	N/A
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	128	170	71.91%	75.29%	75.29%	N/A	N/A
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	145	170	82.49%	85.29%	85.29%	N/A	N/A

### Please select the reporting option your State is using:

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

# Response Rate

FFY	2021	2022
Response Rate	83.93%	41.98%

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

Indiana used a relative share of responses to the survey by category compared to the overall population of students who have exited by category. This metric included a +/- 3% discrepancy.

Include the State's analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in its analysis. In addition, the State's

analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

IDOE's analysis of response data indicates underrepresentation in the race/ethnicity areas of Black/African American by 5.22% and Hispanic by 4.86%.

There is underrepresentation in the disability area of Intellectual Disability by 4.68% and Emotional Disability by 3.54%.

There was expected overrepresentation in the race/ethnicity area of White. There was overrepresentation in the disability area of Other Health Impairment.

There was an overrepresentation in gender for males by 5% and an underrepresentation in gender for females by 5%.

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

The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)

NO

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

For the purpose of targeting underrepresented groups, the IDOE plans to use an electronic survey via the state electronic IEP system to reach out to all students who have exited and their parents as a first source of information gathering in the future. This method will ensure that all individuals with an email address will be contacted and offered the survey. Following the first round of communication and data collection, those who do not respond will be contacted by phone and email directly by a staff member in an attempt to obtain survey results. The intent is that students will likely find it more convenient and less invasive to speak with an individual or entity that they recognize as a familiar or known contact. Indiana is in the process of working with a new vendor to develop a new version of the electronic IEP system. There is hope that the system will mesh with a school's student information system and make the survey distribution seamless for all students.

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

For the 2023 leavers, training has been held to ensure the student and family contact data is updated and correct within the statewide IEP system to allow for increased contacts with students. Emphasis has been placed on the importance of entering data in the IEP system that reflects the primary language spoken by the student and in the family home. Indiana will continue to partner with the state parent training center (IN\*SOURCE) to improve the response rate for the coming year. As part of stakeholder engagement for FFY 2022, IDOE held a series of engagement webinars regarding transition indicators, including indicators 1, 2, 13, and 14. IDOE plans to continue holding these meetings with parents and educators, but plans to hold a meeting with students as well to gather relevant information on obtaining information from underrepresented groups.

For the purpose of targeting underrepresented groups in future years, Indiana plans to use an electronic survey via the state electronic IEP system to reach out to all students who have exited and their parents as a first source of information gathering in the future. This method will ensure that all individuals with an email address will be contacted and offered the survey. Following the first round of communication and data collection, those who do not respond will be contacted by phone and email directly by a staff member from their previous LEA to obtain survey results. The intent is that students will likely find it more convenient and less invasive to speak with an individual or entity that they recognize as a familiar or known contact. Indiana is in the process of working with a new vendor to develop a new version of the electronic IEP system, which will likely be implemented in the 2024–2025 school year. There is hope that the system will mesh with a school's student information system and make the survey distribution seamless for all students

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Based on the data set, Indiana has determined that there is possible nonresponse bias in the totals. However, there is not enough data in the small sample demographic subdivisions to make a confident assertion that data can be used to make inferences of the demographics. Therefore, we cannot specify how much nonresponse bias there actually is because the confidence intervals are too large for the underrepresented groups. As to the overrepresented groups, we can generate meaningful assertions based on the data. Indiana did try to oversample to ensure that the underrepresented groups were more representative, but was unable to achieve the desired sample size. In the future, Indiana will work to try and achieve more meaningful sample sizes in the underrepresented demographic populations.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

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

IDOE initially emailed contacts identified in the sample with a request to participate in the survey. Contacts not responding to the emails were contacted by phone. Based on responses, an additional phone call attempt was made to an expanded sample of students in the race/ethnicity area of Black/African American to achieve a more representative response population.

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	YES
If yes, attach a copy of the survey	Indiana Post-School Outcomes Survey

Provide additional information about this indicator (optional)

# 14 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

### Response to actions required in FFY 2021 SPP/APR

IDOE's analysis of response data indicates underrepresentation in the race/ethnicity areas of Black/African American by 5.22% and Hispanic by 4.86%. There is underrepresentation in the disability area of Intellectual Disability by 4.68% and Emotional Disability by 3.54%. There was expected overrepresentation in the race/ethnicity area of White. There was overrepresentation in the disability area of Other Health Impairment. There was an overrepresentation in gender for males by 5% and an underrepresentation in gender for females by 5%. Based on the data set, Indiana has determined that there is possible nonresponse bias in the totals. However, there is not enough data in the small sample demographic subdivisions to make a confident assertion that data can be used to make inferences of the demographics. Therefore, we cannot specify how much nonresponse bias there actually is because the confidence intervals are too large for the underrepresented groups. As to the overrepresented groups, we can generate meaningful assertions based on the data. Indiana did try to oversample to ensure that the underrepresented groups were more representative, but was unable to achieve the desired sample size.

# 14 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

The State revised its targets for this indicator, and OSEP accepts those targets.

# 14 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 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 EDFacts Metadata and Process System (EMAPS)).

#### Measurement

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

#### Instructions

Sampling is not allowed.

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

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

States may express their targets in a range (e.g., 75-85%).

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

States are not required to report data at the LEA level.

### 15 - Indicator Data

Select yes to use target ranges

Target Range not used

# **Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	52
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	27

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

NO

# **Targets: Description of Stakeholder Input**

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. After the development of the SPP (which coincided with the COVID-19 pandemic), there has been an increase in the number requests for dispute resolution procedures. The state, in collaboration with stakeholders, will continue to monitor Indicator 15 data to determine if targets need to be revised.

#### **Historical Data**

Baseline Year	Baseline Data
2017	20.00%

FFY	2017	2018	2019	2020	2021
Target >=	74.50%	75.00%	75.50%	20.00%	20.50%
Data	20.00%	36.51%	17.14%	52.17%	68.00%

# **Targets**

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

# FFY 2022 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
27	52	68.00%	21.00%	51.92%	Met target	No Slippage

Provide additional information about this indicator (optional)

# 15 - Prior FFY Required Actions

None

# 15 - OSEP Response

# 15 - Required Actions

### Indicator 16: Mediation

# **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

#### **Data Source**

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

#### Measurement

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by 2.1) times 100.

#### Instructions

Sampling is not allowed.

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

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

States may express their targets in a range (e.g., 75-85%).

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

States are not required to report data at the LEA level.

### 16 - Indicator Data

#### Select yes to use target ranges

Target Range not used

# **Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	79
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	8
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	42

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

NO

# Targets: Description of Stakeholder Input

As part of the development of the State Performance Plan (SPP), IDOE's Office of Special Education (OSE) initiated a series of stakeholder meetings to establish targets for the six-year cycle of the State Performance Plan/Annual Performance Report (SPP/APR). These meetings were held virtually over a three-month period and were designed to engage stakeholders from various backgrounds -educators, parents, current students, school administrators, related service providers, family support centers, early education, advocacy groups, other state agencies, and state advisory board members. Since the development of the SPP, the OSE has systematically approached stakeholder engagement through planned project-specific events and through naturally occurring opportunities for stakeholder engagement as related to the SPP/APR targets, outcomes, improvement strategies and evaluation. After the development of the SPP (which coincided with the COVID-19 pandemic), there has been an increase in the number requests for dispute resolution procedures. The state, in collaboration with stakeholders, will continue to monitor Indicator 16 data to determine if targets need to be revised.

#### **Historical Data**

Baseline Year	Baseline Data		
2019	66.67%		

FFY	2017	2018	2019	2020	2021
Target >=	76.50%	77.00%	77.50%	67.00%	68.00%
Data	85.71%	81.63%	66.67%	74.00%	68.49%

# **Targets**

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

# FFY 2022 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
8	42	79	68.49%	69.00%	63.29%	Did not meet target	Slippage

# Provide reasons for slippage, if applicable

While parents and schools have increased the use of mediation to resolve disputes under the IDEA, the nature of disputes are more complex than in previous years. As our data show, there was a decrease in the number of cases resolved through mediation. IDOE has provided additional training to its state contracted mediators to help build strategies and content needed to better prepare parents and schools to engage in mediation as well as facilitate the tough discussions needed to help parents and schools solve multifaceted issues.

Provide additional information about this indicator (optional)

# 16 - Prior FFY Required Actions

None

# 16 - OSEP Response

# 16 - Required Actions

# **Indicator 17: State Systemic Improvement Plan**

### **Instructions and Measurement**

Monitoring Priority: General Supervision

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

#### Measurement

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

#### Instructions

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

<u>Targets:</u> In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

<u>Updated Data:</u> In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

#### Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

### Phase I: Analysis:

- Data Analysis;
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Children with Disabilities;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

Phase II: Plan (which, is in addition to the Phase I content (including any updates)) outlined above):

- Infrastructure Development;
- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and
- Evaluation.

Phase III: Implementation and Evaluation (which, is in addition to the Phase I and Phase II content (including any updates)) outlined above):

- Results of Ongoing Evaluation and Revisions to the SSIP.

# Specific Content of Each Phase of the SSIP

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

# Phase III: Implementation and Evaluation

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result(s) for Children with Disabilities (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

# A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPPs/APRs, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

#### B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

### C. Stakeholder Engagement

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

### Additional Implementation Activities

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

#### 17 - Indicator Data

#### Section A: Data Analysis

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

Increase the percent of preschool children ages three through five with Individualized Education Programs (IEPs) who demonstrate improved positive social-emotional skills (including social relationships) (as measured by Indicator 7A, SS1)

#### Has the SiMR changed since the last SSIP submission? (yes/no)

YES

#### Provide a description of the system analysis activities conducted to support changing the SiMR.

During the evaluation process for Indiana's recent SIMR, discussion began amongst the stakeholders about the potential to address a different area for the SSIP. During the meeting, stakeholders were presented with a list of what outcomes could be considered for the SSIP, and the following were chosen to examine more closely:

- Graduation (Indicator 1)
- Post School Outcomes (Indicator 14)
- Preschool Outcomes (Indicator 7)

Following the stakeholder meeting, Indiana's Office of Special Education began the analysis of system activities. This included creating a list of the potential outcome areas and creating documentation of data and infrastructure analysis of those areas. During the subsequent stakeholder meeting, a review of the potential outcome areas was presented along with longitudinal data, current and anticipated infrastructure support, and other initiatives taking place within the state. Here is a summary of the information provided to stakeholders in June of 2022:

#### Data sets:

- -Graduation
- Number of youth with IEPS (ages 14-21) who exited special education due to graduating with a regular high school diploma disaggregated by race, economic, and geographical factors over the last five years
- Percent of youth without IEPs who graduated with a regular high school diploma disaggregated by cultural, economic, and geographical factors over the last five years.
- -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: a) enrolled in higher education within one year of leaving high school; b) enrolled in higher education or competitively employed within one year of leaving high school; c) enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school over the last five years.
- Compliance for transition IEPs over the last five years
- · Data on the use of vocational rehabilitation services throughout the state
- -Preschool outcomes
- Percent of preschool aged children who entered the program below age expectations in positive social-emotional skills, acquisition and use of knowledge and skills, and the use of appropriate behaviors to meet needs who substantially increased their rate of growth by the time they exited the program over the past five years.
- Preschool outcomes data in relationship with the rest of the country
- Percent of preschool children included in regular early childhood programming and in what location they receive their special education services over the past five years.
- Percent of preschool children suspended or expelled from early childhood programs disaggregated by race, disability, geographical location, and socio-economic status over the past 3 years.
- The state rate of FTE early childhood special educators compared to the child count and survey data on reasons for turnover.

# Current infrastructure:

#### -Graduation:

- Indiana is developing a pathway program to graduation which allows multiple avenues a student can take to fulfill graduation requirements.
- Other offices within the Indiana Department of Education are continuing to add and modify the pathway program to be more inclusive which will increase the graduation rates.

# Post-Secondary Outcomes:

- Indiana's parent training and information center, IN\*Source, is supporting post-school outcomes and transition IEPs by speaking with parents monthly through facilitated office hours and webinars in which the OSE also participates
- Indiana's learning management systems for parents and educations, the Indiana Learning Lab, houses multiple webinars and resources on to increase knowledge related to transition.
- Indiana has a transition advisory council that meets monthly which includes vocational rehab, IDOE, ARC of Indiana and multiple transition agencies. Preschool Outcomes:
- Indiana's Part C program State Systemic Improvement Plan is to increase the positive social-emotional outcomes of infants and toddlers with IFSPs.

- HeadStart's within Indiana have begun using social-emotional curriculum and assessments to improve classroom environments.
- The Office of Early Childhood and Out of School Learning (OECOSL), has a strategic goal to improve behavior supports across all early childhood settings.
- OECOSL is planning to update their Quality Rating and Improvement System for childcare providers.
- Indiana is looking to expand the eligibility criteria for state-funded preschool.

- The Preschool Development Grant was awarded to the Family Social Services Administration and the Indiana Department of Education with a subgoal to address behavior problems in the early childhood space
- The Office of Kindergarten Readiness was developed and the Early Learning Standards are being updated.

#### Please list the data source(s) used to support the change of the SiMR.

The data was gathered from the state-data system, reports to Congress, reports from the Center for IDEA Early Childhood Data Systems (DaSy), and the annual report from Indiana's HeadStart.

#### Provide a description of how the State analyzed data to reach the decision to change the SiMR.

Stakeholders reviewed this information and presented the following summation to the state for consideration:

- Graduation and Post-School Outcomes were an area of concern, but the data demonstrated an increasing trend. The improving rates paired with the initiatives occurring cross-sectionally should adequately support those outcomes.
- Preschool outcomes have continued to be well below the nation's average. There are a lot of initiatives to increase access to early childhood care and education within the state. The state continues to push forward initiatives for preschoolers without IEPs. If the state does not put forward initiatives specifically for preschoolers with IEPs, they will continue to fall behind.

The state considered the input from the stakeholders in addition to the data and infrastructure supports listed above. The state determined preschool outcomes would be the area of focus. To reach the specific SiMR, the state reviewed longitudinal data on each of the summary statements for each part of the Part B SPP/APR Indicator 7 which demonstrated well-below national trends and stagnation. In addition, survey data was reviewed on causes of suspensions and expulsions in early childhood settings which listed problem behavior. In addition, the state considered Part C's SSIP and the initiatives in the early childhood space towards improving social emotional behavior and reducing suspension and expulsion rates.

#### Please describe the role of stakeholders in the decision to change the SiMR.

Stakeholders have been involved throughout the SSIP process, and their input and guidance has been critical to the selection of the SIMR. The state has identified various levels of stakeholder involvement including: SSIP State Leadership Team and SSIP stakeholder group (which includes members from Part C, IN\*Source, early childhood educators, psychologists, and administrators), Pyramid Model State Leadership Team (which includes members from the Office of Kindergarten Readiness, Office of Early Childhood and Out of School Learning, Home Visiting, Department of Child Services, and the Infant and Mental Health Coalition), stakeholders for preschool outcomes reporting. LEA stakeholders.

Stakeholder Group: SSIP State Leadership Team and stakeholder group

Roles/Responsibilities: Provides direct oversight of the data collection and analysis, infrastructure analysis, development of Theory of Action, etc.

Stakeholder Group: Pyramid Model State Leadership Team

Roles/Responsibilities: Crafts strategic plan for rolling out the Pyramid Model across early childhood agencies and scaling up the model statewide

Stakeholder Group: LEA Stakeholders

Roles/Responsibilities: Provides broad input and feedback on the SSIP process and focus area

Stakeholder Group: Preschool Outcomes Reporting

Roles/Responsibilities: Provides feedback specific to collecting and reporting preschool outcomes data including setting targets, assessment tool/type, need for training and professional development related to preschool outcomes

Stakeholder discussions on adjusting Indiana's SIMR began in June of 2022. Stakeholders have consistently been involved in the process of reviewing and analyzing data and the current infrastructure, SIMR selection, selection of strategies and development of the Theory of Action. Formal and informal stakeholder engagement meetings were held on the following dates:

Date: June 29, 2022

Activities: Review of previous SIMR and began discussion of changing SIMR with SSIP State Leadership Team and stakeholder group

Date: September 28, 2022

Activities: Review of current data and infrastructure with SSIP State Leadership Team and stakeholder group

Date: December 8, 2022

Activities: Stakeholder feedback surveys and email follow-up

Date: June 23, 2023

Activities: Review of SSIP and purpose of stakeholder engagement. SWOT Analysis of Infrastructure. Deep review or data and determination of SIMR with SSIP State Leadership Team and stakeholder group

Date: September 15, 2023

Activities: Review of data and infrastructure analyses. Development of theory of action and strategies with SSIP State Leadership Team and stakeholder group

Date: October 20, 2023

Activities: Overview of SSIP, new SIMR, strategies and theory of action with LEA stakeholders

#### Is the State using a subset of the population from the indicator (e.g., a sample, cohort model)? (yes/no)

NO

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

YES

# Please provide a description of the changes and updates to the theory of action.

The theory of action was developed to support the new SiMR. The new theory of action is targeted to improve preschool social emotional outcomes as measured by Part B Indicator 7a SS1 by addressing the following focus areas: collaboration across early childhood agencies and coalitions, early childhood special education technical assistance, data collection, accountability, and personnel.

# Please provide a link to the current theory of action.

#### Progress toward the SiMR

Please provide the data for the specific FFY listed below (expressed as actual number and percentages). Select yes if the State uses two targets for measurement. (yes/no)

NO

#### **Historical Data**

Baseline Year	Baseline Data	
2022	47.79%	

### **Targets**

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	47.79%	48.00%	48.25%	48.50%

#### FFY 2022 SPP/APR Data

(Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) + (Preschool children who improved functioning to reach a level comparable to same-aged peers)	(Preschool children who did not improve functioning)+ (Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to sameaged peers)+(Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it)+(Preschool children who improved functioning to reach a level comparable to sameaged peers)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
692	1,448	89.71%	47.79%	47.79%	N/A	N/A

# Provide the data source for the FFY 2022 data.

ISPROUT is the assessment used to compile data on preschool outcomes. Johns Hopkins collects and distributes the raw data to the state and to West Ed for summation and disaggregation.

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

Data are gathered by teachers on preschoolers with IEPs on skills, behaviors, and knowledge the child presents which represent the three reporting categories of Indicator 7. The data are submitted through an electronic based portal housed by a vendor, Johns Hopkins. The raw data is then exported to another vendor, West Ed, where it is cleaned and analyzed against cut scores. Each set of student data is then classified into one of the following categories: did not improve functioning, improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers, improved functioning to a level nearer to same-aged peers but did not reach it, improved functioning to reach a level comparable to same-aged peers, or maintained functioning at a level comparable to same-aged peers.

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

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

YES

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

The Early Childhood Technical Assistance Center suggest that, at a minimum, states should report 12% of their child count in their childhood outcomes summary. Recently, Indiana's percentage has fallen below 10% which indicates issues with data quality and representativeness. To address these issues, the IDOE is actively seeking input from stakeholders on documenting and reporting preschool outcomes and on resetting the targets for Indicator 17. In addition, the IDOE is currently evaluating the reporting mechanisms involved in the statewide assessment tool which is used to determine the child outcome summary statements. Finally, the IDOE is exploring adding reporting of preschool outcomes to the IEP template Indiana LEAs are required to use.

Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)

NO

Section B: Implementation, Analysis and Evaluation

Please provide a link to the State's current evaluation plan.

https://drive.google.com/file/d/1hCJehGwjGLoOHHJYEuzbZemg5vBWFT9B/view?usp=sharing

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

VES

If yes, provide a description of the changes and updates to the evaluation plan.

The evaluation plan was updated to be reflective of the new theory of action and SiMR. Outcomes were updated to be reflective of the new strategies and attached to the reflective performance indicators. The evaluation questions were based on the desired outcomes. Please see updated evaluation plan to review the detailed updates. The evaluation plan will be further developed over the next reporting period to be more robust.

If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.

The evaluation plan has been updated to reflect the new SIMR and theory of action.

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

The reporting period was used primarily to complete Phase 1 and 2 of the SSIP. The IDOE began implementation on the following improvement strategies, as well, during the reporting period:

- · Partners with early childhood systems to work with programs already implementing social-emotional curriculum
- Partners with existing early childhood coalitions/ round tables to expand demographics of stakeholders to be reflective of the population served within the state
- Provides a mentor from the Pyramid Model Consortium to provide technical assistance to local educational agencies (LEAs) working to implement the Pyramid Model Framework
- Develops meaningful, streamlined data collection systems
- Provides professional development on data collection systems
- Adds Indicator 6 and Indicator 7 to local determinations
- Reviews special education preschool discipline data as part of the monitoring cycle
- · Works with state colleges/universities on early childhood special education programs, student teaching placements, and assistantships

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

Partners with early childhood systems to work with programs already implementing social-emotional curriculum

Outcome: Developed a state leadership team for pyramid model and inclusion practices which is comprised of all state departments who work in the early childhood sector.

Systems Framework: Governance

Partners with existing early childhood coalitions/ round tables to expand demographics of stakeholders to be reflective of the population served within the state

Outcome: Began attending Indiana Council of Administrators in Special Education roundtables across the state to discuss early childhood and locate any coalitions that already exist.

Systems Framework: Governance

Provides a mentor from the Pyramid Model Consortium to provide technical assistance to local educational agencies (LEAs) working to implement the Pyramid Model Framework

Outcome: Attended an orientation presentation with the Pyramid Model Consortium (PMC) and completed the documentation necessary to secure a mentor from the PMC.

Systems Framework: Technical Assistance

Outcome: Joined a learning community hosted by the National Center for Pyramid Model Innovation.

Systems Framework: Professional Development

Develops meaningful, streamlined data collection systems

Outcome: Analysis of data collection on preschool indicators to determine levels of fidelity. Conducted a root cause analysis on data errors Systems Framework: Data and Accountability and Monitoring

Outcome: Worked with stakeholders and Office of Assessment to begin work on a strategic plan to increase the completion rates for preschool outcomes

Systems Framework: Data and Accountability and Monitoring

Provides professional development on data collection systems

Outcome: Development of professional development and technical assistance materials to improve quality of data including video module, guidance documents, and office hours.

Systems Framework: Data. Professional Development

Adds Indicator 6 and Indicator 7 to local determinations

Outcome: Gathered stakeholder input on Indicator 6 and 7 regarding including scores in results driven accountability. Created feedback forms for stakeholders to provide input on strengths, weaknesses, opportunities, and threats related to using Ind. 6 and 7 in RDA.

System Framework: Accountability and Monitoring

Reviews special education preschool discipline data as part of the monitoring cycle

Outcome: Began work with Office of Kindergarten Readiness (OKR) and Family Social Services Administration on universally defining and reporting of preschool/early childhood discipline measures. Outlined assessment tool to be administered through a vendor to gather needed information to inform next steps to improve data on early childhood discipline.

System Framework: Data. Accountability and Monitoring. Quality Standards

Works with state colleges/universities on early childhood special education programs, student teaching placements, and assistantships Outcome: Collaborated with OKR on competencies for early childhood special education apprenticeship programs.

System Framework: Professional Development

### Did the State implement any <u>new</u> (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)

#### Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

Develops meaningful, streamlined data collection systems [Increase in data quality for Indicators 6 and 7]

Adds Indicator 6 and Indicator 7 to local determinations. [Increase in 6a and 7a]

Reviews special education preschool discipline data as part of the monitoring cycle [Increase in number of LEAs accurately reporting preschool discipline data]

Works with state colleges/universities on early childhood special education programs, student teaching placements, and assistantships [Campaign with IHEs to increase number and quality of early childhood special education professionals]

Provides a mentor from the Pyramid Model Consortium to provide technical assistance to local educational agencies (LEAs) working to implement the Pyramid Model Framework [Increase in cross-agency collaboration related to Pyramid Model and inclusion] .[Increase in the number of LEAs implementing the Pyramid Model framework]

Partners with existing early childhood coalitions/ round tables to expand demographics of stakeholders to be reflective of the population served within the state [Increase in number, capacity and family engagement of regional early childhood coalitions]

### Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.

- 1. Partners with First Steps to streamline effective practices through a shared STN [continued meetings with Office of Kindergarten Readiness, Office of Technology, First Steps to work towards a shared STN/ data system]
- 2. Partners with existing early childhood coalitions/round tables to expand demographics of stakeholders to be reflective of the population served within the state [Attend ICASE roundtables to gather information on early childhood coalitions in the area. Meet with early childhood coalitions. Pitch stakeholder involvement during the meetings; Attend INECC (Indiana Early Childhood Collaborative) meetings to get connected to early childhood coalitionsl
- 4. Provides a mentor from the Pyramid Model Consortium to provide technical assistance to state and local educational agencies in the implementation of the Pyramid Model [Begin hosting monthly State Leadership Team meetings on the Pyramid Model and Early Childhood Inclusion with assistance from PMC mentor]
- 5. Adds Indicator 6 (preschool LRE) and Indicator 7 (preschool outcomes) to local determinations [Review data from Indicator 6 and 7 to determine additional professional development needs and create resources. Meet with other states who use 6 or 7 in their local determinations to discuss infrastructure needs]
- 6. Develops meaningful, streamlined data collections systems [Work with the new IEP vendor to create streamlined, efficient and effective early childhood data collection systems]
- 7. Adds Indicator 6 (preschool LRE) and Indicator 7 (preschool outcomes) to local determinations [Conduct a barriers and needs assessment on early childhood inclusion and develop a plan to address needs/barriers in collaboration with other early childhood sectors]
- 8. Reviews special education preschool discipline data as part of the monitoring cycle [Conduct an assessment on the current state of preschool discipline across sectors. Develop a plan to improve the accuracy of data collection and reduce exclusionary practices in collaboration with other early childhood sectors.]
- 9. Provides universal and targeted technical assistance to LEAs related to positive social emotional skills in preschool special education through the use of the Pyramid Model [Provide grants to LEAs to receive targeted technical assistance to be model Pyramid Model sites.]

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

Pyramid Model

#### Provide a summary of each evidence-based practices.

Pyramid Model is a framework of evidence-based practices for promoting young children's healthy social and emotional development.

Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.

The Pyramid Model was chosen to be a framework through which the LEAs would build a system of evidence-based practices to address challenging behaviors in preschoolers with disabilities. It can be used to inform local policy change, teacher/provider practices, parent supports and ultimately child outcomes.

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

Data will be collected using the Teaching Pyramid Observation Tool to assess fidelity

Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.

No additional data was collected

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

The Office of Special Education for the IDOE completed the process with the Indiana Department of Finance to secure the vendor: Pyramid Model Consortium (PMC) to provide a mentor to the state to begin the Pyramid Model work. The State Leadership Team (SLT) will meet with the PMC mentor to develop a strategic roll out plan for the Pyramid Model. To begin, there are 4-5 LEAs who have volunteered to adopt the framework and roll out the program within their respective districts. The IDOE has opted to do a cohort rollout rather than an individual LEA roll out. This will allow all the participants within a cohort to develop a community of practice—in order to provide a foundation for sustainability long after the state and PMC are not directly involved. The PMC mentor will work with the local implementation teams at those LEAs to ensure the framework is implemented with fidelity. The LEAs will be mapped across the state for ease in assessing the areas which are being served. To recruit for the subsequent cohorts, IDOE will determine areas where HeadStart and other early childhood agencies are using social emotional curriculum or already implementing the Pyramid Model framework and will ask leaders from LEAs in those areas to participate. LEAs who are out of compliance for Indicators 4, 9, and/or 10 will also be solicited for involvement.

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

YES

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

This reporting period marked the full development of Indiana's new SSIP. There has not been enough time spent on the improvement strategies to completely answer the evaluation questions, and as a result, no data to support modifications needed.

#### Section C: Stakeholder Engagement

#### **Description of Stakeholder Input**

The SSIP team engaged a broad base of stakeholders in 22-23. An invitation was extended through listservs as an open call to join the SSIP stakeholder team. In addition, direct messages were sent to those who had previously expressed an interest in early childhood special education matters. To gather a more diverse group of stakeholders, an invitation was given through various early childhood circles around the state. Stakeholders gathered quarterly via Microsoft Teams to provide input on each of the key parts of the state's new SSIP including the SIMR, Theory of Action, Logic Model and evaluation plan. Stakeholders were involved in developing each of these areas and also asked to conduct their own SWOT analysis on each of the areas to help proactively identify any unintended consequences of the plan. Stakeholders included:

State Technical Assistance Representatives

Participants (administrators, teachers, psychologists etc.) from LEAs

Indiana Family and Social Services Administration (FSSA) representatives including the Director of Part C; and

IDOE representatives (Assistant Director, Office of Kindergarten Readiness, Office of Assessment)

The stakeholder convened quarterly over the course of the year in March, June, September, and December 2023.

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

The early childhood special education team will be attending various early childhood coalitions and roundtables around the state to recruit additional stakeholders for the SSIP to ensure diversity of the stakeholder group reflects that of the state. Sub-committee groups will be formed from the SSIP stakeholder team to reflect the improvement strategies. The SSIP stakeholder group will meet quarterly at an informing and networking level to keep stakeholders abreast of the current improvement strategies and their progress. Subcommittees will meet more regularly, frequency to be decided by the team, and will work at a collaborating and transforming level, as suggested in Leading by Convening. The subcommittees will use the evaluation plan to strategically analyze the improvement strategies, assess their effectiveness in achieving the SiMR, and propose updates, as needed, to the whole group.

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

YES

#### Describe how the State addressed the concerns expressed by stakeholders.

Stakeholders expressed concern over using Indicator 7a data to determine the effectiveness of strategies implemented through the SSIP. The state acknowledges the data quality issues associated with using the statewide assessment tool, and is currently seeking additional stakeholder input on the way the state records and reports child outcomes through a survey to the field. The data compiled through the survey will be coded for significance and discussed with the SSIP State Leadership team to determine next steps.

#### **Additional Implementation Activities**

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

All activities have been identified.

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

There are no additional activities to be identified

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

There are no newly identified barriers.

#### Provide additional information about this indicator (optional).

As noted, the SiMR changed since the last submission. With that, the 2021 Data included in the 2022 SPP/APR Data was preloaded and is reflective of the previous SiMR.

#### 17 - Prior FFY Required Actions

None

#### 17 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision. OSEP notes that the FFY 2021 data in the data table reflects data from a different data source, measuring the previous SiMR.

The State revised its targets through FFY 2025 for this indicator, and OSEP accepts those targets.

#### 17 - Required Actions

#### Certification

#### Instructions

Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

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

#### Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Angela Vaughn

Title:

Assistant Director of Monitoring & Compliance

Email:

AVaughn@doe.in.gov

Phone:

8127011054

Submitted on:

04/24/24 2:29:56 PM

#### **Determination Enclosures**

#### **RDA Matrix**

# Indiana 2024 Part B Results-Driven Accountability Matrix

#### Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
92.50%	Meets Requirements

#### **Results and Compliance Overall Scoring**

Section	Total Points Available	Points Earned	Score (%)
Results	20	20	100.00%
Compliance	20	17	85.00%

<sup>(1)</sup> For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B."

#### 2024 Part B Results Matrix

#### **Reading Assessment Elements**

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	99%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	98%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	30%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	98%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	31%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	98%	1

#### **Math Assessment Elements**

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	99%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	97%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	56%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	97%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	26%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	97%	1

<sup>(2)</sup> Statewide assessments include the regular assessment and the alternate assessment.

#### **Exiting Data Elements**

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	7	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	83	2

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

#### 2024 Part B Compliance Matrix

Part B Compliance Indicator (3)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2021 (4)	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	1.79%	N/A	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.36%	YES	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	1.01%	YES	2
Indicator 11: Timely initial evaluation	99.52%	NO	2
Indicator 12: IEP developed and implemented by third birthday	96.16%	NO	2
Indicator 13: Secondary transition	68.71%	NO	0
Timely and Accurate State-Reported Data	95.24%		2
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			1
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	Yes, 2 to 4 years		

<sup>(3)</sup> The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: <a href="https://sites.ed.gov/idea/files/2024">https://sites.ed.gov/idea/files/2024</a> Part-B SPP-APR Measurement Table.pdf

<sup>(4)</sup> This column reflects full correction, which is factored into the scoring only when the compliance data are >=5% and <10% for Indicators 4B, 9, and 10, and >=90% and <95% for Indicators 11, 12, and 13.

# Data Rubric Indiana

FFY 2022 APR (1)

Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1

#### **APR Score Calculation**

Subtotal	21
<b>Timely Submission Points</b> - If the FFY 2022 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	26

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

#### 618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 8/30/23	1	1	1	3
Personnel Due Date: 2/21/24	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Discipline Due Date: 2/21/24	1	1	0	2
State Assessment Due Date: 1/10/24	1	0	1	2
Dispute Resolution Due Date: 11/15/23	1	1	1	3
MOE/CEIS Due Date: 5/3/23	1	1	1	3

#### **618 Score Calculation**

Subtotal	19
Grand Total (Subtotal X 1.23809524) =	23.52

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

#### **Indicator Calculation**

A. APR Grand Total	26
B. 618 Grand Total	23.52
C. APR Grand Total (A) + 618 Grand Total (B) =	49.52
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator) (3) =	0.9524
E. Indicator Score (Subtotal D x 100) =	95.24

<sup>(3)</sup> Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.

#### APR and 618 -Timely and Accurate State Reported Data

#### **DATE: February 2024 Submission**

#### SPP/APR Data

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

#### Part B 618 Data

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

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	C002 & C089	8/30/2023
Part B Personnel	C070, C099, C112	2/21/2024
Part B Exiting	C009	2/21/2024
Part B Discipline	C005, C006, C007, C088, C143, C144	2/21/2024
Part B Assessment	C175, C178, C185, C188	1/10/2024
Part B Dispute Resolution	Part B Dispute Resolution Survey in EMAPS	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in EMAPS	5/3/2023

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

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

# Dispute Resolution IDEA Part B

#### Indiana

School Year: 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing' if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

#### Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	260
(1.1) Complaints with reports issued.	138
(1.1) (a) Reports with findings of noncompliance	72
(1.1) (b) Reports within timelines	138
(1.1) (c) Reports within extended timelines	0
(1.2) Complaints pending.	1
(1.2) (a) Complaints pending a due process hearing.	1
(1.3) Complaints withdrawn or dismissed.	121

#### **Section B: Mediation Requests**

(2) Total number of mediation requests received through all dispute resolution processes.	110
(2.1) Mediations held.	79
(2.1) (a) Mediations held related to due process complaints.	17
(2.1) (a) (i) Mediation agreements related to due process complaints.	8
(2.1) (b) Mediations held not related to due process complaints.	62
(2.1) (b) (i) Mediation agreements not related to due process complaints.	42
(2.2) Mediations pending.	6
(2.3) Mediations withdrawn or not held.	25

#### Section C: Due Process Complaints

(3) Total number of due process complaints filed.	115
(3.1) Resolution meetings.	52
(3.1) (a) Written settlement agreements reached through resolution meetings.	27
(3.2) Hearings fully adjudicated.	3
(3.2) (a) Decisions within timeline (include expedited).	1
(3.2) (b) Decisions within extended timeline.	2
(3.3) Due process complaints pending.	27
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	85

#### Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)

(4) Total number of expedited due process complaints filed.	21
(4.1) Expedited resolution meetings.	11
(4.1) (a) Expedited written settlement agreements.	6
(4.2) Expedited hearings fully adjudicated.	1
(4.2) (a) Change of placement ordered	0
(4.3) Expedited due process complaints pending.	4
(4.4) Expedited due process complaints withdrawn or dismissed.	16

#### **State Comments:**

#### Errors:

Please note that the data entered result in the following relationships which violate edit checks:

State error comments:

This report shows the most recent data that was entered by:

These data were extracted on the close date: 11/15/2023

#### **How the Department Made Determinations**

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

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



## UNITED STATES DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

#### **Final Determination Letter**

June 21, 2024

Honorable Katie Jenner Secretary of Education Indiana Department of Education 200 West Washington Street, Suite 228 Indianapolis, IN 46204

Dear Secretary Jenner:

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Indiana meets the requirements and purposes of Part B of the IDEA. This determination is based on the totality of Indiana's data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Indiana's 2024 determination is based on the data reflected in its "2024 Part B Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for each State and Entity and consists of:

- (1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;
- (2) a Results Matrix that includes scoring on Results Elements;
- (3) a Compliance Score and a Results Score;
- (4) an RDA Percentage based on both the Compliance Score and the Results Score; and
- (5) the State's or Entity's Determination.

The RDA Matrix is further explained in a document, entitled "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2024, as it did for Part B determinations in 2014-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for Indiana).

In making Part B determinations in 2024, OSEP continued to use results data related to:

- (1) the participation and performance of CWD on the most recently administered (school year 2021-2022) National Assessment of Educational Progress (NAEP), as applicable (For the 2024 determinations, OSEP using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2024 determination as it did for Puerto Rico's 2023 determination. OSEP did not use NAEP data in making the BIE's 2024 determination because the NAEP data available for the BIE were not comparable to the NAEP data available for the 50 States, the District of Columbia, and Puerto Rico; specifically, the most recently administered NAEP for the BIE is 2019, whereas the most recently administered NAEP for the 50 States, the District of Columbia, and Puerto Rico is 2022.)
- (2) the percentage of CWD who graduated with a regular high school diploma; and
- (3) the percentage of CWD who dropped out.

For the 2024 IDEA Part B determinations, OSEP also considered participation of CWD on Statewide assessments (which include the regular assessment and the alternate assessment). While the participation rates of CWD on Statewide assessments were a factor in each State or Entity's 2024 Part B Results Matrix, no State or Entity received a Needs Intervention determination in 2024 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2025 determinations.

You may access the results of OSEP's review of Indiana's SPP/APR and other relevant data by accessing the EMAPS SPP/APR reporting tool using your Indiana-specific log-on information at <a href="https://emaps.ed.gov/suite/">https://emaps.ed.gov/suite/</a>. When you access Indiana's SPP/APR on the site, you will find, in applicable Indicators 1 through 17, the OSEP Response to the indicator and any actions that Indiana is required to take. The actions that Indiana is required to take are in the "Required Actions" section of the indicator.

It is important for you to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

You will also find the following important documents in the Determinations Enclosures section:

(1) Indiana's RDA Matrix;

- (2) the HTDMD link;
- (3) "2024 Data Rubric Part B," which shows how OSEP calculated Indiana's "Timely and Accurate State-Reported Data" score in the Compliance Matrix: and
- (4) "Dispute Resolution 2022-2023," which includes the IDEA Section 618 data that OSEP used to calculate the Indiana's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Indiana's 2024 determination is Meets Requirements. A State's or Entity's 2024 RDA Determination is Meets Requirements if the RDA Percentage is at least 80%, unless OSEP has imposed programmatic Specific Conditions on the State's or Entity's last three IDEA Part B grant awards (for FFYs 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering three criteria related to IDEA Part B determinations as part of the Department's continued efforts to incorporate equity and improve results for CWD. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). This factor would be reflected in the determination for each State and Entity through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State or Entity that would otherwise receive a score of Meets Requirements would not be able to receive a determination of Meets Requirements if the State or Entity had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is considering as potential additional factors the improvement in proficiency rates of CWD on Statewide assessments. Third, the Department is considering whether and how to continue including in its determinations criteria the participation and proficiency of CWD on the NAEP.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix and States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 3, 5, and 6 (as they have in the past). Under EDFacts Modernization, States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in the EDPass or EMAPS system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, Indiana must report annually to the public, by posting on the State educational agency's (SEA's) website, the performance of each local educational agency (LEA) located in Indiana on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Indiana's submission of its FFY 2022 SPP/APR. In addition, Indiana must:

- (1) review LEA performance against targets in the State's SPP/APR;
- (2) determine if each LEA "meets the requirements" of Part B, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part B of the IDEA;
- (3) take appropriate enforcement action; and
- (4) inform each LEA of its determination.

Further, Indiana must make its SPP/APR available to the public by posting it on the SEA's website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

- (1) includes Indiana's determination letter and SPP/APR, OSEP attachments, and all State or Entity attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and
- (2) will be accessible to the public via the ed.gov website.

OSEP appreciates Indiana's efforts to improve results for children and youth with disabilities and looks forward to working with Indiana over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,

Valerie C. Williams

Director

Office of Special Education Programs

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cc: Indiana Director of Special Education