

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2020**

New Mexico



PART B DUE February 1, 2022

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

In Federal Fiscal Year (FFY) 2020, Local Education Agencies (LEAs) started the year learning online. By September 2020, some LEAs were allowed to offer a hybrid model of learning. Students in these LEAs had the opportunity to attend classes both in-person and online. In February 2021, all LEAs were allowed to enter a hybrid model of learning which is a combination of in-person and online classes. Then in April 2021, All LEAs were allowed to return to school in-person. LEAs had the opportunity to extend the school year, some LEAs elected to do so while others chose to keep with the traditional calendar. During this period, the State saw a 2% decrease in the number of school-age students with disabilities and 13% decrease in the number of preschool students with disabilities. This decrease is indicative of the State which also saw a total decrease in the number of students enrolled in LEAs for the 2020-2021 school year.

Setting targets during the COVID-19 pandemic has been a challenge due to the impact the pandemic has had on the data. Although the data was collected, several factors had an impact on outcomes. First, that State saw a decline in the number of students that were enrolled in LEAs for the 2020-2021 school year. With this decline, we saw a rise in the number of students that were home schooled. This decline impacted the numerator and denominators in State Performance Plan/Annual Performance Report calculations which skewed the data for some indicators. Second, indicators linked to timelines saw slippage as the process for gathering data to complete evaluations was a challenge and sometimes took longer due to parents requesting delays or not producing their child for evaluation. The lack of internet access in the State attributed to the inability for parents to produce their children for testing online. Staffing shortages are also another key factor. Finally, the changes in measurements also posed a challenge as the State did not have pre-pandemic data to refer to or utilize to establish targets. Data that is available, is pandemic-period data which is impacted by all the factors listed above.

To mitigate the impact the COVID-19 pandemic had on outcomes for students with disabilities, the State continued to provide technical assistance, resources and supports to LEAs. LEAs were informed the requirements of IDEA B must still be complied with including all timelines, data reporting and program requirements. The state continued monitoring of LEAs, provided technical assistance and professional development for LEAs as would normally be provided but through a video conferencing platform. LEAs were allowed to convert to electronic signature for some documents to help the keep processes moving forward.

Despite the challenges the pandemic has brought forth, the State has been making numerous efforts to improve outcomes for students with disabilities. For the first time, numerous stakeholder engagement meetings were held to gather feedback for developing improvement strategies and progress indicators. A pilot project using evidence-based practices for keeping students in four schools has seen an increase in graduation rates and a decline in drop-out rates for students in these schools. Overall, the State has also seen a decrease in the drop-out rate. In addition, the response rate for indicators 8 and 14 increased due to newly developed systems and the use of technology to improve responses received. The Special Education Division is striving to continually improve outcomes for students as is evident throughout this SPP/APR.

Additional information related to data collection and reporting

LEA groups in the state are comprised of school districts, state charter schools and State Supported Schools (SSSs). The number of LEAs fluctuate each year due to the number of state charter schools which open, close, or convert to local charter schools in a particular year. In FFY 2020, the number of LEAs increased by two as two additional State Charters Schools were opened, while the number of School Districts and SSSs remained the same. In total, the State had 147 LEAs of which 89 were school districts, 52 were state charter schools and 6 were State Supported Schools.

State statute identifies the dates LEAs must report data to the State via the Student Teacher Accountability and Reporting System (STARS), which is the State's database. LEAs are required to report data four times each school year which are identified as the 40-day, 80-day, 120-day and End of Year (EOY) reporting periods. 40-day reporting occurs the second Wednesday in October, 80-day reporting occurs the first Wednesday in December, 120 day occurs the second Wednesday in February and EOY occurs the last day of each LEA's school year.

Once LEAs submit data into the STARS database, the State completes a review of the data to ensure there are no errors and the data is valid. The timeliness of the data is also monitored to ensure State established submission timelines are met. These reviews are completed for each of the State's four reporting periods.

While most data reported to OSEP and the U.S. Department of Education originates from STARS, some of the data is compiled outside of the STARS database, the mandated reporting periods as well as outside of the Special Education Division. Within the NMPED, various departments compile and report data on students with disabilities. Graduation and assessment data is compiled and reported by the Accountability Division. Drop-out data is compiled and reported by the Information Technology (IT) department. Resolution Sessions and Mediation data is compiled and reported by the Office of General Counsel. The data compiled from STARS data as well as that compiled from other methods aside from STARS, are used for EdFacts reporting. The EdFacts Coordinator for our State is a member of the IT team and completes all the EdFacts reporting on behalf of the State.

Data originated outside from STARS also comes from contractors. Contractors are used for Indicators, 8 and 14, which involve surveys. The State chooses to use contractors as a means for increasing the ease of parents and students that have left school, to improve the comfort level for these key stakeholders versus reporting their responses directly to the State. The contractors administer the surveys used for data collection, compile the data, and then provide a report to the State.

Number of Districts in your State/Territory during reporting year

147

General Supervision System:

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

In the state of New Mexico, the New Mexico Public Education Department (NMPED) is responsible for implementing the requirements of the Individuals with Disabilities Education Act (IDEA), Part B. Within the PED, the Special Education Division has the primary responsibility of carrying out the responsibilities of the grant. This responsibility is carried out in collaboration with other divisions and departments within NMPED and the State, to ensure that all the requirements of IDEA B are implemented including the oversight of Local Education Agencies (LEAs) and students with disabilities have improved outcomes.

The State has systems established to ensure that the IDEA Part B requirements are met. The main monitoring system is data reviews of LEA data. Reviews are completed four times each school year for all the compliance indicators and many of the results indicators. The STARS system, the State's database, has business rules built in to identify violations or potential violations of the requirements of IDEA Part B and the State's requirements by causing errors or warnings in reports to occur for each indicator. When an error is identified during the data monitoring reviews, LEAs must immediately address the issue(s) either by correcting the data in STARS or providing an explanation for the error. Some are data entry issues, and the LEA corrects the issue within the timeframe allotted while others are issues of non-compliance. Once non-compliance is identified, the LEA must demonstrate correction of the individual case of non-compliance as well as compliance with the regulatory requirements, as soon as possible and at the maximum within one year.

Non-compliance is also identified through the dispute resolution processes, desk-top monitoring, review of IEPs and reviews conducted by other divisions or bureaus within the PED. Once non-compliance is identified, regardless of the source, LEAs enter a cycle of correcting the individual case of non-compliance as well as the regulatory requirements. First, LEAs are asked to complete a Root Cause Analysis (RCA) or Self-Assessment (SA) depending on the indicator the LEA is non-compliant with. Once the LEA submits the completed RCA or SA, the State's Special Education Division (SED) staff review the information in the RCA to get a complete picture of the issues which may be causing the non-compliance. SED staff then develop a corrective action plan (CAP) which identifies the steps the LEA must take to correct the issues causing non-compliance with the regulatory requirements. In addition, LEAs review updated data to verify that the individual case of non-compliance was corrected and subsequent data to confirm that the regulatory requirements are being properly implemented.

The CAP also identifies technical assistance and professional development the LEA may need and sets timelines for the LEA to ensure the needed support is received. This is important to ensure that LEAs have a full understanding of the requirements and are appropriately implementing the requirements. These items must also be completed for the LEA to be considered as meeting the regulatory requirements. Additional information specific to each indicator can be found in each section of this APR.

Technical Assistance System:

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

The State's Targeted Technical Assistance System (TTAS) is designed to ensure timely delivery of high quality, evidenced based technical assistance and support to LEAs. The goals of the State's TTAS are to improve LEA special education programs, systems and operations while sustaining compliance and cultivating performance. The TTAS is also designed to inform the need for other technical assistance and new initiatives to respond to LEA needs.

The data gathered through the various systems (monitoring, self-assessment, Student Teacher Accountability Reporting System (STARS), due process hearings, state complaints, etc.) are used to identify the need for specific statewide technical assistance. Data are examined by State SED staff to gain a full understanding of statewide trends and to determine the type of technical assistance needed statewide. Statewide technical assistance is provided regionally with the support of Regional Education Cooperatives (RECs), which provide evidence based targeted technical assistance to LEAs within each REC region.

Individual LEA data is also examined by State SED staff to determine LEA specific issues which require targeted technical assistance. The LEA's annual determination along with any issues with significant discrepancy, disproportionate representation or significant disproportionality, are key factors in determining an LEA's need for targeted technical assistance. Once an LEA's need is determined, State staff identify evidence-based technical assistance to provide to the LEA and include this information within a CAP if the LEA has one, or otherwise a technical assistance plan is developed. The State has many state and national organizations that provide technical assistance on evidence-based practices to draw support from. The State works with the LEA to coordinate these efforts. The State monitors the supports provided to the LEA to ensure the technical assistance needed is received.

As another resource of technical assistance for LEAs, the State develops numerous manuals and guidance documents to assist LEAs in implementing the requirements of IDEA Part B. These manuals are available on the SED website.

Professional Development System:

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

The State's professional development system provides opportunities for LEA staff serving students with disabilities to gain skills to effectively provide services that improve results for students with disabilities. Professional development is provided year-round for special education directors, special education teachers, general education teachers and related service providers. The topics of the professional development provided are targeted to areas of need identified to ensure needed skills are developed. In addition, various divisions within the State collaborate to provide professional development opportunities for LEA staff, which is especially important as students with disabilities are integrated into all areas. The trainings are usually held as webinars, are recorded and made available on the website for LEA staff to refer to as needed or view if they did not have the opportunity to participate during the live session.

Two Special Education Director Conferences are held each year. This is usually done in person; however, due to the COVID-19 pandemic these were held online via Zoom. A year-long webinar series is held on various special education topics. If staff are unable to attend a particular webinar or if any would like to refer to the information, the presentations are recorded and available to be accessed at a later date and time. Each year, a STARS training on special education data is provided at the annual STARS conference. Training on the local IDEA B application is held annually as well during the annual School Budget Conference.

LEAs also have the opportunity to request training from the SED. This can be provided as an individual training specifically to the LEA or can be offered to all LEAs depending on the need and preference of the requesting LEA.

Broad Stakeholder Impact:

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

To establish targets and baselines as needed for the next five years beginning with FFY 2020, the State developed a four-phased plan to expand stakeholder engagement. The first phase of the plan was having targeted stakeholder groups work on establishing baselines and target proposals for specific indicators and targets. The stakeholder groups consisted of parents, parent advocacy groups, LEA staff and professionals with experience in the focus area. In total, there was 6 targeted stakeholder groups as follows: Group one was the secondary stakeholder group and worked on selecting the most appropriate baselines from previous years data and targets for graduation, drop-out and post-school outcomes (Indicators 1, 2 and 14). Group two worked on statewide assessments and learning environments (Indicators 3 and 5). Group three, the preschool stakeholder group, worked on preschool learning environments and outcomes (Indicators 6 and 7). Group four worked on suspension and expulsions (Indicators 4a). Group five worked on parent involvement (Indicator 8). Group six worked on mediations and resolution sessions (Indicators 15 and 16). The meeting information for these targeted groups was available on the Special Education Division (SED) website. Flyers and postcards were created and LEAs were asked to disseminate the information to their staff, parents and students. Other groups were sent individual invitations to each of the meetings, such as parent advocacy groups and tribes. Once these smaller targeted stakeholder groups recommended baselines and targets, the stakeholder engagement process moved to phase 2.

Phase two of the stakeholder engagement process included three groups, the IDEA Panel, parents and tribes. Each of the three groups separately reviewed the proposed FFY20 to FFY25 targets and baselines recommended by the Focused Stakeholder Groups in phase 1. Two meetings were held for parents, one meeting was in the day and another was in the evening to allow working parents to attend. These three groups provided input and completed a final review of proposed targets and baselines. The information gathered from these meetings was then used to develop targets and baseline proposals for phase 3.

Phase three of the stakeholder engagement process was originally planned to be the final acceptance of targets by the department. It was decided however to complete one more round of stakeholder engagement for parents and all stakeholders to provide final comment on final target and baseline recommendations via a survey. The intent was to provide the opportunity to provide input for parents and those who may not have been able to attend any of the previous meetings. The information for this stakeholder feedback opportunity was made available on the SED website and shared with LEAs to disseminate to their staff, parents and students. Phase 3 of stakeholder input was completed through a survey process. The final data was compiled for Phase 4 of the process.

Phase four of the stakeholder engagement process consisted of PED Management reviewing and accepting proposed targets and baselines from Phases 1, 2 and 3. The purpose of this review was to ensure that targets and baselines align with current State rules and requirements, meet SMART goal components and are in alignment with the department's mission. These accepted targets and baselines are the final targets and baselines and will be reported to OSEP in the FFY 2020 APR.

Most feedback received indicated that the target rates for graduation, drop-out, assessment proficiency rates, pre-school outcomes and post-school outcomes should be decreased for the current target rates to allow the state and LEAs to close achievement gaps first, then gradually increase the rates. The goal is not to diminish the need for higher expectations for students with disabilities but to allow time for the educational system to adjust from the COVID-19 pandemic, to train staff, improve teacher preparation programs and improve other practices for closing the achievement gap. It is also important to note that stakeholders are concerned with the impact the COVID-19 pandemic will have on student outcomes including State and LEA performance on the SPP/APR indicators. Stakeholders highly recommended that the targets hold steady for at least two years as the pandemic impacts State and LEA rates. The stakeholder groups are electing to review the data each year and again prior to the submission of the FFY21 SPP/APR to reestablish targets as needed.

In regard to the development and implementation of the SSIP, the Excellence from Coaching in Literacy for Intensive Preparation in Special Education (ECLIPSE) Indicator 17 program has solicited broad stakeholder input in the development and implementation of New Mexico's State Systemic Improvement Plan (SSIP). The ECLIPSE program has engaged stakeholders in several key improvement efforts:

- 1) At the community level, ECLIPSE program coordinators presented data and program updates to the state IDEA Panel (members include: parents, advocates, state staff, and educators) during the 2020-21 school year. IDEA Panel members participated and were engaged in the ECLIPSE program presentations. An ECLIPSE IDEA Panel committee met as a small group to discuss the program at the conclusion of the day. The ECLIPSE IDEA Panel committee provided SIMR feedback using the SMART goal process along with the Istation data.
- 2) One ECLIPSE stakeholder meeting was held during 2020-2021 via the Zoom online platform. Stakeholders included the ECLIPSE staff, Regional Education Cooperative Executive Directors (REC'S), Special Education Directors, ECLIPSE Principals, ECLIPSE Special Education Teachers, CORE NMSU Director, and Regional Education Cooperative Contractors. Stakeholders were provided with ECLIPSE program details for the school year and stakeholders provided verbal feedback about the ECLIPSE program at the conclusion of the meeting.
- 3) Parent engagement stakeholder meetings were held via online platforms to provide direct explicit literacy training to parents via hands-on activities at each ECLIPSE school. Once trained, parents could engage their students' in fun literacy activities at home. Regional Education Cooperative (REC) contractors dropped off tote bags with the hands-on literacy materials to each school prior to the online parent training. Parent survey data following the training indicated favorable results; parents were pleased with the literacy tools that could be utilized at home with their child. Since the training was online, many parents along with their child/ren attended the interactive family literacy event.
- 4) All stakeholder groups participated in SIMR feedback meetings and feedback surveys. The external and internal ECLIPSE stakeholder groups provided needed input on the SIMR. This feedback has helped the ECLIPSE team to coalesce our five year SIMR plans for improvement of literacy outcomes for students with disabilities.
- 5) An online end of year survey was sent to all ECLIPSE stakeholders as the 2020-2021 school year ended. The feedback from this survey supported the development of an ECLIPSE strategic plan focused on short term goals, intermediate goals, and longer term goals.
- 6) At the school level, School Implementation Partners (SIP's) worked directly with Collaborating for Outstanding Readiness in Education (CORE) New Mexico State University (NMSU) coaches and REC support specialists. In most cases, SIP's are K-3 special education teachers. SIP's attended virtual gatherings with CORE coaches and directors.
- 7) Engagement with contracted specialists occurred in a number of ways including regular meetings, emails, and phone/text conversations. Collaborative conversations supported the transition to the Special Education Division with the implementation of internal processes to facilitate collaboration, such as using Google docs to co-develop protocols.

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

NO

Number of Parent Members:

9

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.

All parents of students with disabilities, the parent members of the special education advisory panel known as the IDEA Panel include, parent center staff from the parent centers, Parent Reaching Out (PRO) and Education for Parents of Indian Children (EPICS), staff members from advocacy groups such as Parents Reaching Out (PRO) and Disability Rights New Mexico were invited to participate in setting targets in numerous ways. First, members of these groups were invited to participate in the targeted stakeholder meetings, or phase one of the stakeholder engagement process. A Stakeholder Engagement webpage (<https://webnew.ped.state.nm.us/bureaus/special-education/stakeholder-engagement/>), where an invitation for parents and other stakeholders to participate in the process was posted. Dates, times and links for each meeting were all made available on the website and was available in English and Spanish. A flyer was developed and shared with LEAs who were asked to share the information within their LEA as well as with parents. LEAs reported they shared information by printing the flyers, sending out message blasts and making the information available on their websites.

During phase 1 of the engagement process, each stakeholder group focused on various target indicators which were grouped together by relationship. At each meeting, a PowerPoint presentation was developed and presented to parents and stakeholders that explained the stakeholder engagement requirements, how data is collected, how the data is measured in accordance with the SPP/APR measurement table along with data from Federal Fiscal Year (FFY) 2014 to current was reviewed and analyzed. Baseline and targets were proposed including incremental increases each year. Progress measures including quantitative and qualitative data for identifying progress were identified for each indicator. Finally, parent members provided strategies for improving results.

After this process was completed, parents and parent members of the IDEA panel had the opportunity to participate in phase two of the stakeholder engagement process. Phase 2 of the process consisted of a review of the recommendations from phase 1 of the process. The data from phase 1 was provided to the IDEA panel members along with a Google Form where additional input on data analysis, target setting, improvement strategy development and progress evaluation was collected. For parents, two separate meetings were held to review the phase 1 recommendations. One meeting was held during the day and another was held during the evening so working parents would have the opportunity to participate in the meeting.

Eight parent members participated in phase 1 and 2 of the stakeholder engagement process overall. Of the eight parents, 3 parents participated in more than one targeted stakeholder group meeting. Due to the low participation rate, it was decided that parents and all stakeholders would be offered another opportunity to provide input. The state collects parent email addresses as part of the data collection from LEAs. Each parent with an email address was sent a Google Form along with the data and was asked to provide input, via email. Data was posted to the website and LEAs were asked to inform parents of the opportunity to provide input, the announcement was also sent to parent advocacy groups and Regional Education Cooperatives. This round of stakeholder input yielded one response from a parent. The data gathered from this final round was used to establish the baselines and targets.

Phase 3 of the stakeholder engagement process was originally planned to be the final acceptance of targets by the department. It was decided however to complete one more round of stakeholder engagement for parents all stakeholders to provide final comment on final target and baseline recommendations. The intent was to provide the opportunity to parents and those who may not have been able to attend any of the previous meetings. The information for this stakeholder feedback opportunity was made available on the SED website and shared with LEAs to disseminate to their staff, parents and students. Phase 3 of stakeholder input was completed through a survey process. The final data was compiled for Phase 4 of the process. 1 parent participated in this process.

Despite the numerous efforts the state made to engage parents in setting targets, analyzing data, developing improvement strategies, and evaluating progress, the parent participation rates remain low. The state will continue to seek ways to engage parents in the stakeholder engagement process.

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.

First, a stakeholder engagement process webpage was developed <https://webnew.ped.state.nm.us/bureaus/special-education/stakeholder-engagement/>. Information was available in English and Spanish. In addition, post cards and flyers were developed for LEAs to share and disseminate with parents. These were also available in English and Spanish. Second, parents were included in every phase of the stakeholder engagement process, from phase 1 the targeted stakeholder groups to the final step which included an email to all parents with the Google Form where input was collected. Third, two separate parent meetings were held one during the day and another in the evening to allow for working parents to participate. Fourth, at the meeting with tribal education leaders, we asked them to invite parents from the tribes to also attend the meeting. At each phase, parents were asked to provide input on how to improve outcomes for children with disabilities. Fifth, an email was sent to parents asking them to participate in the feedback process. A Google Form was provided to parents to where they could provide input.

In addition, parents were asked to provide SIMR feedback via a survey at a parent/family literacy night. Parents/families suggested several ways for the ECLIPSE program to grow such as: toolkits, training, and frequent parent feedback. Also, ECLIPSE support specialists provided ongoing literacy training for parents/families and schools on effective family literacy engagement. Since the family literacy events were held on online platforms due to the COVID-19 pandemic, entire families were able to participate in the literacy activities. The home environment in addition to the school environment is necessary in supporting a child's literacy achievement which supports the achievement of the SIMR at the ECLIPSE school.

Soliciting Public Input:

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

From March 2021 to April 2021, the State conducted six meetings via Zoom with stakeholders. The Zoom platform was used rather than in-person meetings due to the COVID-19 pandemic. As indicated in previous sections, the target indicators were divided into 6 groups and organized based on relationship, these groups were referred to as targeted stakeholder groups. To see how the groups were organized for phase 1 of the stakeholder engagement process, please refer to the Broad Stakeholder input section of this SPP/APR. At each meeting, input was sought on the required components of setting targets, analyzing data, developing improvement strategies, and evaluating progress. Information for each of the meetings including topics, dates, times and links to each of the six meetings was made available on the stakeholder engagement webpage of the SED website. Identified stakeholders such as parent advocacy groups, associations and other stakeholder such as LEA staff were sent invitations to the meeting.

In April and May 2021, the state conducted meetings via Zoom with three main groups, parents, the IDEA Panel and Tribal Education staff. Two parent meetings were held on April 15, 2021, one meeting was held in the morning and another in the evening to allow for working parents to attend. Information on all indicators were reviewed and input on setting targets, analyzing data, developing improvement strategies, and evaluating progress

was collected. All indicator information was then shared with the IDEA panel on April 26, 2021. The panel was given a Google Form to enter their recommendations for setting targets, analyzing data, developing improvement strategies, and evaluating progress. On May 27, 2021, a meeting was held with tribal education leaders and again information on all indicators was shared with the tribal leaders. Information on all indicators were reviewed and input on setting targets, analyzing data, developing improvement strategies, and evaluating progress was collected at this important meeting.

From June to November 2021, the state aggregated and disaggregated the data, synthesized and analyzed the data, reviewed quantitative and qualitative data and worked with internal stakeholders in preparation for the upcoming FFY2020 SPP/APR. After all the meetings were conducted and participation data was aggregated, the State decided to provide parents and all stakeholders with an additional opportunity to provide input using a survey. The survey became phase 3 of the stakeholder engagement process. The survey was made available on the SED Stakeholder Engagement webpage <https://webnew.ped.state.nm.us/bureaus/special-education/stakeholder-engagement/> and included each of the components of the stakeholder engagement process: setting targets, analyzing data, developing improvement strategies, and evaluating progress.. The final data was compiled for Phase 4 of the process. acceptance of targets and baselines from previous year's data by SED management. The accepted baseline year data and targets are used in this APR.

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.

All the data collected over the course of the stakeholder engagement process, will be made available on the Special Education Division's, Stakeholder Engagement webpage <https://webnew.ped.state.nm.us/bureaus/special-education/stakeholder-engagement/>. This will include PowerPoint presentations, survey responses and other information collected during the engagement process.

Reporting to the Public

How and where the State reported to the public on the FFY 2019 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2019 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2019 APR in 2021, is available.

The State has a District Profile Reporting System (DPRS) for publicly reporting the performance of each LEA on the targets in the SPP/APR. The DPRS contains data from FFY19 data and will soon include FFY20. The system contains two levels of data, one level is the general public view which contains suppressed (masked) data for indicators with less than 10 students reported. The general public can look at this level of data for each LEA. The second level of data views is the LEA view. This view requires a login and password as the data is not suppressed (unmasked). Having non-suppressed data available for LEAs is beneficial as they are able to track the LEA's performance over time and can analyze data for program improvement purposes.

Once on the DPRS site, general public users should click on General Public Data View. In the General Public Data View, users can select a Local Education Agency (LEA) to view data for that LEA. Once the LEA is selected, there are two buttons available, a Results Indicator Button and a Compliance Indicator Button. When the Results Indicator button is clicked, the data for the results (target) indicators are displayed. When the Compliance Indicator button is clicked, the data for the compliance indicators will be displayed. Each indicator contains the state target, district (LEA) rate and if the State target was met.

The DPRS can be found at: <http://webed.ped.state.nm.us/sites/DPR/SitePages/DPRHome.aspx>. To get to the site, go the New Mexico Public Education Department website, click on Offices/Programs in the banner at the top of the page, click on Special Education, click on the gold button labeled "Visit the District Profile Reporting System" in the middle of the Special Education page. FFY2020 data will be made available in the DPR site within 120 days following the submission of this APR.

A complete copy of the FFY2020 APR will also be posted on the Special Education page located at: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. To get to the site, go the New Mexico Public Education Department Website, click on Offices/Programs in the banner at the top of the page, click on Special Education, on the left banner, click on District Data, click on FFY2020 Annual Performance Report.

Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2019 SPP/APR

The State determined the results elements and/or compliance indicators, and improvement strategies, on which it will focus using available technical assistance, to improve performance are identified below.

1. Office of Special Education Programs (OSEP): State staff have monthly calls with the OSEP lead assigned to the State. The meetings are targeted to areas need identified by the State or by OSEP. Staff from other departments within OSEP are brought in to support the State as well. The information provided by OSEP help State staff to identify strategies and to make sound decisions for improving outcomes for students with disabilities.
2. OSEP, State Personnel Development Grant Support: Monthly meetings with program officer. At these meetings, State staff are informed of our grant balances on which the State we can draw down funds. Also, the staff are connected with staff from other States to learn about how the State has implemented the SPDG; which in turn supported New Mexico in developing a reworked SPDG program. The program officer links the State to resources to support any challenges or barriers the State may encounter.
3. IDEA Data Center (IDC): State staff have monthly calls with IDC staff to guide the State Systemic Improvement Plan (SSIP) implementation process including support in developing an appropriate New Mexico SSIP Evaluation Plan for FFY 2020. State SSIP staff also belong to the IDC SSIP Data Quality Peer Group and the Data Supervisor belongs to the Data Manager Data Quality Peer Group. These groups help State staff to learn more on the requirements and how to correctly implement the requirements of IDEA as well as meeting the reporting requirements. The IDC State lead is always available for questions and this support further enhances the State's ability to implement improvement efforts.

4. National Technical Assistance Center on Transition (NTACT): The Collaborative (NTACT:C): State staff have bimonthly meetings with NTACT:C staff to discuss transition services and tools that are available which the State can implement. In addition, support on ways to improve transition methods is offered. Training opportunities are also made available.

5. Dasy Center: State staff participate in 619 support calls to enhance knowledge and seek support around topics coming up in the state and nationally. Dasy Center staff provide professional and development and technical assistance support to State staff which in turn is shared with LEAs.

6. ECTA Center: Improving Systems, Practices and Outcomes: ECTA personnel have supported State staff by answering questions around Federal law and the correct implementation of the requirements. ECTA supported and edited the State's early childhood outcomes guidance manual and the early childhood outcome conversion chart for statewide alignment of the process for administrators and teachers. ECO training modules provided were placed in the State's professional development system for state and LEA staff use.

7. WIDA Consortium: The State has invested in WIDA Early Years which is a professional development system for multilingual learners with disabilities. Access to training modules and resources are available for parents, LEA administrators and school staff through this investment.

Intro - OSEP Response

The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2021 determination letter informed the State that it must report with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

Intro - Required Actions

The State's IDEA Part B determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2017	72.83%

FFY	2015	2016	2017	2018	2019
Target >=	75.60%	77.40%	77.40%	77.40%	77.40%
Data	59.32%	61.85%	61.54%	65.60%	64.66%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	73.33%	73.83%	74.83%	76.33%	78.33%	80.83%

Targets: Description of Stakeholder Input

On March 4, 2021, the State held the first targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicators 1. Graduation, 2. Dropout and 14. Post School Outcomes and engaged stakeholders in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the state's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on state graduation, dropout and post-school outcome rates. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing targets over the next couple of years. Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. It was recommended for the target rates to show little to no growth over the first few years. The group also recognized the current targets were set high, even higher than the rate for all students for graduation and drop-out. Lowering the targets will allow for the state to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the state is choosing to close the gap between the target and state data and holding the targets low but ambitious and achievable for the package period. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these three indicators.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,890

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	65
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	231

FFY 2020 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1,890	2,186	64.66%	73.33%	86.46%	Met target	N/A

Graduation Conditions

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

The New Mexico statute 22-13-1.1 establishes the requirements for graduating from high school with a regular high school diploma. A cohort system is used which is based on the year a student enters grade nine, for both coursework and competency in five content areas: reading, writing, mathematics, science, and social studies. Students must complete 24 credits of high school coursework in math (4), English (4), science (3), social studies (3.5), PE (1), career or foreign language(1), and electives (7.5). Beginning in school year 2019-2020, students may demonstrate competency by any of the methods from approved options which include: grade 11 required assessments (e.g., SBA, Transition, PARCC scores from previous years, the SAT in spring 2020 and beyond); nationally recognized tests like ACT, ACCUPLACER, ASVAB, AP, etc. For Cohorts 2020 and 2021, school districts may use locally determined demonstrations of competency. New Mexico Administrative Code 6.19.7 and 6.29.1.9 provides the specific requirements.

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)

YES

If yes, explain the difference in conditions that youth with IEPs must meet.

Students with Disabilities have three graduation options. These graduation options enable IEP teams to develop a program of study that is the most appropriate for preparing a student to achieve post-secondary goals and maintain the integrity of the high school diploma. The first graduation option is the Standard Option as described in the previous section. The second is the Modified Option. Students on the Modified Option will take general assessments, with accommodations as indicated in the student's IEP. The students IEP team will also establish individualized passing scores for determining demonstration of competency. End of Course (EoC) exams can be used to demonstrate graduation competency. The third is the Ability Option. Students following the Ability Option will take the state's alternative assessment as the academic achievement assessment rather than the general assessment. IEP teams will set individualized cut scores for demonstrating competency.

Provide additional information about this indicator (optional)

The State will be setting a new baseline for FFY2020 and new targets, starting with FFY2020 through FFY2025. The baseline and targets must be set because OSEP has changed the measurement for this indicator. Previously, the State used the 4 year adjusted cohort rate (ACR) as the graduation rate. Starting with FFY2020, OSEP will no longer allow the use of the 4 year ACR but rather require the graduation rate to be calculated using 618 data reported in the State's EdFacts reporting of exiting data.

Data from FFY2017, using exiting data, was selected as the baseline year because this data was prior to the pandemic and is indicative of the data in the years prior to the pandemic. This new baseline will allow for the State to demonstrate growth over the 5 year period while ensuring the expectations for students with disabilities are not set higher than the rate for students without disabilities which is 74.00% in the State.

1 - Prior FFY Required Actions

None

1 - OSEP Response

The State has revised the baseline for this indicator, using section 618 data from FFY 2017, and OSEP accepts that revision.

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

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

Measurement

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

Instructions

Sampling is not allowed.

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

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

OPTION 1:

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

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

OPTION 2:

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

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

Options 1 and 2:

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2013	24.75%

FFY	2015	2016	2017	2018	2019
Target <=	23.22%	22.97%	22.97%	22.97%	22.97%
Data	26.30%	26.94%	22.84%	25.79%	23.78%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	23.75%	22.75%	21.75%	20.75%	19.75%	18.75%

Targets: Description of Stakeholder Input

On March 4, 2021, the State held the first targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicators 1. Graduation, 2. Dropout and 14. Post School Outcomes and engaged stakeholders in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on state graduation, dropout and post-school outcome rates. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing targets over the next couple of years. Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. It was recommended for the target rates to show little to no growth over the first few years. The group also recognized the current targets were set high, even higher than the rate for all students for graduation and drop-out. Lowering the targets will allow for the state to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the state is choosing to close the gap between the target and state data and holding the targets low but ambitious and achievable for the package period. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these three indicators.

Please indicate the reporting option used on this indicator

Option 1

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,890
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	65
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	231

FFY 2020 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
231	2,186	23.78%	23.75%	10.57%	Met target	No Slippage

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

The New Mexico Administrative Code (NMAC), 6.29.1.9(K)(13)(j) Procedural Requirements defines a dropout as a student who does not return to complete the program of study.

For data collection purposes, the state includes students in the following categories as a dropout: dropouts, runaways, GED recipients (in New Mexico students are required to drop out of the secondary educational program in order to pursue the GED certificate), expulsions, status unknown, students who moved and are not known to be continuing in another educational program, and other students who exited from special education without a valid exit reason.

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)

The State will not be setting a new baseline for this indicator because OSEP does not require a baseline change unless there is a change in methodology or data source by either OSEP or the State. Since the State and OSEP did not make any changes to the methodology or data source, the State will not set a new baseline for this indicator. New targets for FFY2020 to FFY2025 are required and have been set.

At the beginning of the school year, the State saw a large decline in the overall LEA enrollment of students. In response, the State conducted numerous outreach programs to re-engage families and students. This outreach effort led to the return of approximately 90% of all students back to LEAs. The outreach programs had a positive impact on dropout rates for students with disabilities in that students that may have originally dropped out but were reengaged and then returned to school. For this indicator, the outcome was positive and the State mitigated the impact of the COVID-19 pandemic by reaching out to families and students once the decrease in enrollment became apparent.

2 - Prior FFY Required Actions

None

2 - OSEP Response

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

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	6.50%
Reading	B	Grade 8	2020	6.17%
Reading	C	Grade HS	2020	4.06%
Math	A	Grade 4	2020	7.71%
Math	B	Grade 8	2020	6.23%
Math	C	Grade HS	2020	4.07%

Targets

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

Targets: Description of Stakeholder Input

On March 11, 2021, the State held the second targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 3. Statewide Assessments and 5. Learning Environments and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on assessment and learning in regard to assessment data. The state applied for and was granted a waiver by the U.S. Department of Education, on the requirement to administer the statewide assessment for school year 2019-2020 due to the pandemic. The stakeholder group discussed the potential impacts this waiver may have on the state's data for upcoming years and learning loss of students with disabilities. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing targets over the next couple of years.

Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. It was recommended for the target rates to show little to no growth over the first few years for indicator 3. The group also recognized the current assessment targets were set high. Lowering the targets will allow for the state to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the state is choosing to close the gap between the target and state data for indicator 3. The targets will be held at low rates of growth for the package period for both indicators 3 and 5. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these indicators.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

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

Date:

03/30/2022

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	4,308	4,670	12,746
b. Children with IEPs in regular assessment with no accommodations	127	114	124
c. Children with IEPs in regular assessment with accommodations	153	121	365
d. Children with IEPs in alternate assessment against alternate standards	0	53	28

Data Source:

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

Date:

03/30/2022

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	4,360	4,671	12,749
b. Children with IEPs in regular assessment with no accommodations	130	115	124
c. Children with IEPs in regular assessment with accommodations	153	124	368
d. Children with IEPs in alternate assessment against alternate standards	53	52	27

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

FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	280	4,308		95.00%	6.50%	N/A	N/A
B	Grade 8	288	4,670		95.00%	6.17%	N/A	N/A

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C	Grade HS	517	12,746		95.00%	4.06%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	336	4,360		95.00%	7.71%	N/A	N/A
B	Grade 8	291	4,671		95.00%	6.23%	N/A	N/A
C	Grade HS	519	12,749		95.00%	4.07%	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

Assessment data for students with disabilities can be found on the Special Education Division page under District Data: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment data for students without disabilities can be found on the Accountability Division webpage at <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>

Provide additional information about this indicator (optional)

Due to the unprecedented circumstances brought on by the COVID-19 pandemic and the closure of schools, the U.S. Department of Education has granted the New Mexico Public Education Department (PED) a waiver to bypass assessment and accountability requirements under the Elementary and Secondary Education Act of 1965 (ESEA), as amended by the Every Student Succeeds Act (ESSA). Specifically, the waiver addresses the state's inability to administer assessments as required under ESEA section 1111(b)(2) or to comply with the test administration, reporting requirements, and school identification, as would normally be planned due to extensive school closures in the state. This waiver was applicable for the 2019-2020 school year and allowed New Mexico to forgo or cancel statewide testing that would be typically administered; therefore, the State has no data available for FFY2019.

In FFY 2020, school year 2020-2021, since the majority of students in the State were learning online during the assessment administration window, this posed a challenge to the State in administering the assessment. To mitigate the impact of the COVID-19 pandemic, the New Mexico Public Education Department submitted a waiver request to the U.S. Department of Education regarding the requirement that 95 percent of New Mexico students participate in statewide assessments. Instead, New Mexico proposed to allow schools and districts to voluntarily elect to administer statewide assessments, thus create a sample of data to identify where students stand academically after a year of non-traditional education. Results from the optional testing would not be used to make important decisions about students, educators, schools, or districts..

On April 21, 2021, the US Department of Education, Office of Elementary and Secondary Education, approved the waiver and indicated the following in the approval letter: "Accountability and school identification requirements in sections 1111(c)(4) and 1111(d)(2)(C)-(D): the requirements that a State measure progress toward long-term goals and measurements of interim progress; meaningfully differentiate, on an annual basis, all public schools, including by adjusting the Academic Achievement indicator based on a participation rate below 95 percent." The waiver approval letter also indicated: "The Department encourages States, when posting State assessment results for the 2020-2021 school year, to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. For example, in a situation where participation rates are low and/or uneven across student groups as a result of the pandemic, the results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population. As always, assessment data should also be viewed alongside other important measures of student outcomes and opportunity to learn data to provide a more complete perspective on resources, support, and student success." Since the waiver allowed for the participation rate to be below 95% and the State allowed LEAs flexibility in determining participation in the statewide assessment, it is important to note, the 95% participation rate for students with disabilities was not met and thereby the data in this APR for FFY2020 is incomplete and is not representative of the make-up of the State's population of students with disabilities.

Since the State received a waiver from meeting the participation rate of 95% not all LEAs administered the statewide assessment or for LEAs that did administer the assessment, not all students participated in the assessment. Overall, LEA and student participation in statewide assessments was low. The targets were not met as the waiver granted, waived the requirement to meet the target. It is important to note the data presented in this indicator is

incomplete, not valid and reliable since the data is not inclusive of all students with disabilities that would have participated in the statewide assessment and only represents a small subset of students that did participate in the assessment and are not representative of the make-up of the State population.

The State changed the baseline because OSEP has changed the measurement from allowing all students to be included in one rate, to separate rates for each grades 4, 8 and high school. In addition, the State changed the measurement from the TAMELA to the NMSSA for grades 4 and 8 and to the SAT for grade 11. Grade 11 is the only grade included in the high school assessment rates per the State ESEA plan. For Math participation rates, the State has elected to use the 2017 participation rate of 92.73%. This year was selected for the baseline year because it was the only year that the data was not above 95.00% due to the OSEP rule which requires the baseline to be below the targets. For reading participation rates, the State will use the 2017 data and set the baseline at 95.85%, although this rate is higher than the ESEA rate, it is the only rate the closest to 95%. The State will be using the ESEA requirement of 95% for the baseline and target for each year and is the reason for the decrease in targets from previous years. Since the ESEA rate will be used, the State is not required to demonstrate progress over baseline hence the targets will remain at 95%.

For indicators 3A – 3B, the State has reset baselines and targets using 2020 data. However, this year not all students participated in statewide assessments due to the impact the COVID-19 pandemic had on our State, as well as the waiver received from meeting the 95% participation rate. In addition, 2020, was the first-year new assessments were administered. Therefore, 2020 is not a good year to use as a baseline or for setting targets as the State has no comparison data. Since 2020 data is the only data available, the State had no other alternatives. We are hopeful we will be allowed to adjust baselines and targets based on all student participation and the new assessments.

3A - Prior FFY Required Actions

None

3A - OSEP Response

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

The State has revised the baseline for Math using data from FFY 2020 as reported in the Historical Data table, but OSEP cannot accept that revision because the State reported in its narrative that the baseline for math is FFY 2017. The State must correct this discrepancy.

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection. Further, the State reported, "It is important to note the data presented in this indicator is incomplete, not valid and reliable since the data is not inclusive of all students with disabilities that would have participated in the statewide assessment and only represents a small subset of students that did participate in the assessment and are not representative of the make-up of the State population." OSEP notes that under this indicator the State reported zero (0) children with IEPs participating in the Grade 4 RLA alternate assessment based on alternate academic achievement standards; however, under Indicator 3C, the State reported four (4) children with IEPs scored proficient or above on the Grade 4 RLA alternate assessment based on alternate academic achievement standards.

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

3A - Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, 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 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

In its FFY 2021 SPP/APR, the State must clarify the baseline year and data being used to report on this indicator.

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	23.57%
Reading	B	Grade 8	2020	11.44%
Reading	C	Grade HS	2020	21.34%
Math	A	Grade 4	2020	2.47%
Math	B	Grade 8	2020	2.09%
Math	C	Grade HS	2020	9.35%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	23.57%	24.02%	24.47%	24.92%	25.37%	25.82%
Reading	B >=	Grade 8	11.44%	11.89%	12.34%	12.79%	13.24%	13.69%
Reading	C >=	Grade HS	21.34%	21.79%	22.24%	22.69%	23.14%	23.59%
Math	A >=	Grade 4	2.47%	2.88%	3.29%	3.70%	4.11%	4.52%
Math	B >=	Grade 8	2.09%	2.50%	2.91%	3.32%	3.73%	4.14%
Math	C >=	Grade HS	9.35%	9.76%	10.17%	10.58%	10.99%	11.40%

Targets: Description of Stakeholder Input

On March 11, 2021, the State held the second targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 3. Statewide Assessments and 5. Learning Environments and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on assessment and learning. In regard to assessment data, the State applied for and was granted a waiver by the U.S. Department of Education, on the requirement to administer the statewide assessment for school year 2019-2020 due to the pandemic. The stakeholder group discussed the potential impacts this waiver may have on the state's data for upcoming years and learning loss of students with disabilities. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing

targets over the next couple of years.

Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. It was recommended for the target rates to show little to no growth over the first few years for indicator 3. The group also recognized the current assessment targets were set high. Lowering the targets will allow for the state to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the State is electing to close the gap between the target and state data for indicator 3. The targets will be held at low rates of growth for the package period for both indicators 3 and 5. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these indicators.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

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

Date:

03/03/2022

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	280	236	492
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	41	19	34
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	25	8	71

Data Source:

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

Date:

03/03/2022

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	283	239	492
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	6	4	23
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1	1	23

FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	66	280		23.57%	23.57%	N/A	N/A
B	Grade 8	27	236		11.44%	11.44%	N/A	N/A

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C	Grade HS	105	492		21.34%	21.34%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	7	283		2.47%	2.47%	N/A	N/A
B	Grade 8	5	239		2.09%	2.09%	N/A	N/A
C	Grade HS	46	492		9.35%	9.35%	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

Assessment data for students with disabilities can be found on the Special Education Division page under District Data:

<https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment data for students without disabilities can be found of the Accountability webpage at

<https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>

Provide additional information about this indicator (optional)

Due to the unprecedented circumstances brought on by the COVID-19 pandemic and the closure of schools, the U.S. Department of Education has granted the New Mexico Public Education Department (PED) a waiver to bypass assessment and accountability requirements under the Elementary and Secondary Education Act of 1965 (ESEA), as amended by the Every Student Succeeds Act (ESSA). Specifically, the waiver addresses the state's inability to administer assessments as required under ESEA section 1111(b)(2) or to comply with the test administration, reporting requirements, and school identification, as would normally be planned due to extensive school closures in the state. This waiver was applicable for the 2019-2020 school year and allowed New Mexico to forgo or cancel statewide testing that would be typically administered; therefore, the State has no data available for FFY2019.

For FFY 2020, school year 2020-2021, the New Mexico Public Education Department submitted a waiver request to the U.S. Department of Education regarding the requirement that 95 percent of New Mexico students participate in statewide assessments. Instead, New Mexico proposed to allow schools and districts to voluntarily elect to administer statewide assessments, thus create a sample of data to identify where students stand academically after a year of non-traditional education. Results from the optional testing would not be used to make important decisions about students, educators, schools, or districts.

On April 21, 2021, the US Department of Education, Office of Elementary and Secondary Education, approved the waiver and indicated the following in the approval letter: "Accountability and school identification requirements in sections 1111(c)(4) and 1111(d)(2)(C)-(D): the requirements that a State measure progress toward long-term goals and measurements of interim progress; meaningfully differentiate, on an annual basis, all public schools, including by adjusting the Academic Achievement indicator based on a participation rate below 95 percent." The waiver approval letter also indicated: The Department encourages States, when posting State assessment results for the 2020-2021 school year, to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. For example, in a situation where participation rates are low and/or uneven across student groups as a result of the pandemic, the results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population. As always, assessment data should also be viewed alongside other important measures of student outcomes and opportunity to learn data to provide a more complete perspective on resources, support, and student success." Since the waiver allowed for the participation rate to be below 95% and the state allowed LEAs flexibility in determining participation in the statewide assessment, it is important to note, the 95% participation rate for students with disabilities was not met and thereby the data in this APR for FFY2020 is incomplete and is not representative of the make-up of the State's population of students with disabilities.

It is anticipated that the proficiency rates will improve in some grades and decline in others, once all students with disabilities are administered the statewide assessments in future years. This can be attributed to the impact the COVID-19 pandemic has had on student learning. To mitigate the impact of the COVID-19 pandemic, the State is continually updating its guidance for schools using Center's for Disease Control (CDC) Guidance and information to allow for students to remain in the classroom to the extent it is safe.

The State will be changing the baseline because OSEP has changed the measurement from allowing all students to be included in one rate, to separate rates for each grades 4, 8 and high school. This indicator was further changed by separating out the proficiency rates for alternate academic achievement standards from the grade level proficiency rates. In addition, the State changed the measurement from the TAMELA to the NMSSA for grades 4 and 8 and to the SAT for grade 11. Grade 11 is the only grade included in the high school assessment rates per the State ESEA plan. The State is electing to use the data from FFY2018 as the baseline for reading and math. 2018 was selected because in reviewing post-pandemic data, this year is the most stable. In addition, the State has decided to set targets that are lower than the targets that were established from FFY 2016–2019. The new baselines and target rates will allow the State to grow while factoring in the impact the COVID-19 pandemic is anticipated to have on student outcomes. Although the baselines and target rates are changing, the State is not lowering expectations and will continue to strive to make improvements.

It is important to note the data presented in this indicator is incomplete, not valid and reliable since the data is not inclusive of all students with disabilities that would have participated in the statewide assessment and only represents a small subset of students that did participate in the assessment and are not representative of the make-up of the State population.

For indicators 3A – 3B, the State has reset baselines and targets using 2020 data. However, this year not all students participated in statewide assessments due to the impact the COVID-19 pandemic had on our State, as well as the waiver received from meeting the 95% participation rate. In addition, 2020, was the first-year new assessments were administered. Therefore, 2020 is not a good year to use as a baseline or for setting targets as the State has no comparison data. Since 2020 data is the only data available, the State had no other alternatives. We are hopeful we will be allowed to adjust baselines and targets based on all student participation and the new assessments.

3B - Prior FFY Required Actions

None

3B - OSEP Response

OSEP cannot determine whether the State revised its baseline for this indicator. The State reported in its narrative, "The State is electing to use the data from FFY2018 as the baseline for reading and math." However, the State reported its baseline year as FFY 2020 in the Historical Data table. OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State's end targets for FFY 2025 reflect improvement over the State's baseline data, given the discrepancy in the baseline data, as noted above. The State must ensure that its FFY 2025 targets reflect improvement over the baseline.

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

3B - Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, 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 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	7.69%
Reading	B	Grade 8	2020	7.55%
Reading	C	Grade HS	2020	35.71%
Math	A	Grade 4	2020	13.21%
Math	B	Grade 8	2020	1.92%
Math	C	Grade HS	2020	29.63%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	7.69%	8.14%	8.59%	9.04%	9.49%	9.94%
Reading	B >=	Grade 8	7.55%	8.00%	8.45%	8.90%	9.35%	9.80%
Reading	C >=	Grade HS	35.71%	36.16%	36.61%	37.06%	37.51%	37.96%
Math	A >=	Grade 4	13.21%	13.62%	14.03%	14.44%	14.85%	15.26%
Math	B >=	Grade 8	1.92%	2.33%	2.74%	3.15%	3.56%	3.97%
Math	C >=	Grade HS	29.63%	30.04%	30.45%	30.86%	31.27%	31.68%

Targets: Description of Stakeholder Input

On March 11, 2021, the State held the second targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 3. Statewide Assessments and 5. Learning Environments and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on assessment and learning. In regard to assessment data, the state applied for and was granted a waiver by the U.S. Department of Education, on the requirement to administer the statewide assessment for school year 2019-2020 due to the pandemic. The stakeholder group discussed the potential impacts this waiver may have on the state's data for upcoming years and learning loss of students with disabilities. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing targets over the next couple of years.

Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. It was recommended for the target rates to show little to no growth over the first few years for indicator 3. The group also recognized the current assessment targets were set high. Lowering the targets will allow for the state to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the state is choosing to close the gap between the target and state data for indicator 3. The targets will be held at low rates of growth for the package period for both indicators 3 and 5. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these indicators.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

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

Date:

03/03/2022

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	52	53	28
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	4	4	10

Data Source:

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

Date:

03/03/2022

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	53	52	27
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	7	1	8

FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	4	52		7.69%	7.69%	N/A	N/A

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B	Grade 8	4	53		7.55%	7.55%	N/A	N/A
C	Grade HS	10	28		35.71%	35.71%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	7	53		13.21%	13.21%	N/A	N/A
B	Grade 8	1	52		1.92%	1.92%	N/A	N/A
C	Grade HS	8	27		29.63%	29.63%	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

Assessment data for students with disabilities can be found on the Special Education Division page under District Data: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment data for students without disabilities can be found on the Accountability website at <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>

Provide additional information about this indicator (optional)

Due to the unprecedented circumstances brought on by the COVID-19 pandemic and the closure of schools, the U.S. Department of Education has granted the New Mexico Public Education Department (PED) a waiver to bypass assessment and accountability requirements under the Elementary and Secondary Education Act of 1965 (ESEA), as amended by the Every Student Succeeds Act (ESSA). Specifically, the waiver addresses the state's inability to administer assessments as required under ESEA section 1111(b)(2) or to comply with the test administration, reporting requirements, and school identification, as would normally be planned due to extensive school closures in the state. This waiver was applicable for the 2019-2020 school year and allowed New Mexico to forgo or cancel statewide testing that would be typically administered; therefore, the State has no data available for FFY2019.

For FFY 2020, school year 2020-2021, the New Mexico Public Education Department submitted a waiver request to the U.S. Department of Education regarding the requirement that 95 percent of New Mexico students participate in statewide assessments. Instead, New Mexico proposed to allow schools and districts to voluntarily elect to administer statewide assessments, thus create a sample of data to identify where students stand academically after a year of non-traditional education. Results from the optional testing would not be used to make important decisions about students, educators, schools, or districts.

On April 21, 2021, the US Department of Education, Office of Elementary and Secondary Education, approved the waiver and indicated the following in the approval letter: "Accountability and school identification requirements in sections 1111(c)(4) and 1111(d)(2)(C)-(D): the requirements that a State measure progress toward long-term goals and measurements of interim progress; meaningfully differentiate, on an annual basis, all public schools,

including by adjusting the Academic Achievement indicator based on a participation rate below 95 percent." The waiver approval letter also indicated: The Department encourages States, when posting State assessment results for the 2020-2021 school year, to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. For example, in a situation where participation rates are low and/or uneven across student groups as a result of the pandemic, the results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population. As always, assessment data should also be viewed alongside other important measures of student outcomes and opportunity to learn data to provide a more complete perspective on resources, support, and student success." Since the waiver allowed for the participation rate to be below 95% and the state allowed LEA's flexibility in determining participation in the statewide assessment, it is important to note, the 95% participation rate for students with disabilities was not met and thereby the data in this APR for FFY2020 is incomplete and is not representative of the make-up of the State's population of students with disabilities.

In the coming years, it is anticipated that the proficiency rates will improve in some grades and decline in others once all students with disabilities eligible to take the alternate assessment are administered the alternate assessments. This can be attributed to the impact the COVID-19 pandemic has had on student learning. To mitigate the impact of the COVID-19 pandemic, the State is continually updating its guidance for schools using Centers for Disease Control (CDC) Guidance and information to allow for students to remain in the classroom to the extent it is safe.

Indicator 3C is new in FFY 2020. Previously, all students were included in one rate, now the rates are separate for each grade 4, 8 and high school. Further, the proficiency rates for alternate academic achievement outcomes were reported with the grade level proficiency rates from the statewide assessment. The State changed the alternate assessment, or the measurement, from the NMAPA to the DLM. For these reasons, the State was required to set new baselines and targets for this indicator. The State has selected 2015 rates for the reading baseline of 6.41 and 2014 rates for math of 5.66. Since this is a new indicator and new measurement State does not have targets that were established from FFY 2019-2019 from which to compare.

3C - Prior FFY Required Actions

None

3C - OSEP Response

OSEP cannot determine whether the State revised its baseline for this indicator. The State reported in its narrative, "The State has selected 2015 rates for the reading baseline of 6.41 and 2014 rates for math of 5.66." However, the State reported its baseline year as FFY 2020 in the Historical Data table. OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State's end targets for FFY 2025 reflect improvement over the State's baseline data, given the discrepancy in the baseline data, as noted above. The State must ensure that its FFY 2025 targets reflect improvement over the baseline.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection. Further, the State reported, "[I]t is important to note . . . the data in this APR for FFY 2020 is incomplete and is not representative of the make-up of the State's population of students with disabilities." OSEP notes that under Indicator 3A the State reported zero (0) children with IEPs participating in the Grade 4 RLA alternate assessment based on alternate academic achievement standards; however, under this indicator, the State reported four (4) children with IEPs scored proficient or above on the Grade 4 RLA alternate assessment based on alternate academic achievement standards.

3C - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	39.82
Reading	B	Grade 8	2020	31.27
Reading	C	Grade HS	2020	39.45
Math	A	Grade 4	2020	11.15
Math	B	Grade 8	2020	10.07
Math	C	Grade HS	2020	28.86

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	39.42	39.42	38.97	38.52	38.07	37.62
Reading	B <=	Grade 8	31.27	31.27	30.82	30.37	29.92	29.47
Reading	C <=	Grade HS	39.45	39.45	39.00	38.55	38.10	37.65
Math	A <=	Grade 4	11.15	11.15	10.74	10.33	9.92	9.51
Math	B <=	Grade 8	10.07	10.07	9.66	9.25	8.84	8.43
Math	C <=	Grade HS	28.86	28.86	28.45	28.04	27.63	27.22

Targets: Description of Stakeholder Input

On March 11, 2021, the State held the second targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 3. Statewide Assessments and 5. Learning Environments and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the state's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on assessment and learning. In regard to assessment data, the state applied for and was granted a waiver by the U.S. Department of Education, on the requirement to administer the statewide assessment for school year 2019-2020 due to the pandemic. The stakeholder group discussed the potential impacts this waiver may have on the state's data for upcoming years and learning loss of students with disabilities. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing targets over the next couple of years.

Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. It was recommended for the target rates to show little to no growth over the first few years for indicator 3. The group also recognized the current assessment targets were set high. Lowering the targets will allow for the state to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the state is choosing to close the gap between the target and state data for indicator 3. The targets will be held at low rates of growth for the package period for both indicators 3 and 5. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these indicators.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

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

Date:

03/03/2022

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	1,748	1,557	6,029
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	280	236	492
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	1,028	640	3,505
d. All students in regular assessment with accommodations scored at or above proficient against grade level	80	25	160
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	41	19	34
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	25	8	71

Data Source:

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

Date:

03/03/2022

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	1,754	1,529	6,025
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	283	239	492
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	231	177	2,219
d. All students in regular assessment with accommodations scored at or above proficient against grade level	8	9	83
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	6	4	23

f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1	1	23
---	---	---	----

FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	23.57%	63.39%		39.42	39.82	N/A	N/A
B	Grade 8	11.44%	42.71%		31.27	31.27	N/A	N/A
C	Grade HS	21.34%	60.79%		39.45	39.45	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	2.47%	13.63%		11.15	11.15	N/A	N/A
B	Grade 8	2.09%	12.16%		10.07	10.07	N/A	N/A
C	Grade HS	9.35%	38.21%		28.86	28.86	N/A	N/A

Provide additional information about this indicator (optional)

Due to the unprecedented circumstances brought on by the COVID-19 pandemic and the closure of schools, the U.S. Department of Education has granted the New Mexico Public Education Department (PED) a waiver to bypass assessment and accountability requirements under the Elementary and Secondary Education Act of 1965 (ESEA), as amended by the Every Student Succeeds Act (ESSA). Specifically, the waiver addresses the state's inability to administer assessments as required under ESEA section 1111(b)(2) or to comply with the test administration, reporting requirements, and school identification, as would normally be planned due to extensive school closures in the state. This waiver was applicable for the 2019-2020 school year and allowed New Mexico to forgo or cancel statewide testing that would be typically administered; therefore, the State has no data available for FFY2019.

For FFY 2020, school year 2020-2021, the New Mexico Public Education Department submitted a waiver request to the U.S. Department of Education regarding the requirement that 95 percent of New Mexico students participate in statewide assessments. Instead, New Mexico proposed to allow schools and districts to voluntarily elect to administer statewide assessments, thus create a sample of data to identify where students stand academically after a year of non-traditional education. Results from the optional testing would not be used to make important decisions about students, educators, schools, or districts.

On April 21, 2021, the US Department of Education, Office of Elementary and Secondary Education, approved the waiver and indicated the following in the approval letter: "Accountability and school identification requirements in sections 1111(c)(4) and 1111(d)(2)(C)-(D): the requirements that a State measure progress toward long-term goals and measurements of interim progress; meaningfully differentiate, on an annual basis, all public schools, including by adjusting the Academic Achievement indicator based on a participation rate below 95 percent." The waiver approval letter also indicated: The Department encourages States, when posting State assessment results for the 2020-2021 school year, to prominently and in clear language provide information about the context of the data, including its limitations as a result of the pandemic. For example, in a situation where participation rates are low and/or uneven across student groups as a result of the pandemic, the results should include clearly worded context that such data are incomplete and, where applicable, are not representative of the make-up of the State, district, or school population. As always, assessment data should also be viewed alongside other important measures of student outcomes and opportunity to learn data to provide a more complete perspective on resources, support, and student success." Since the waiver allowed for the participation rate to be below 95% and the state allowed LEAs flexibility in determining participation in the statewide assessment, it is important to note, the 95% participation rate for students with disabilities was not met and thereby the data in this APR for FFY2020 is incomplete and is not representative of the make-up of the State population of students with disabilities.

In the coming years, it is anticipated that the gap in proficiency rates may increase once all students with disabilities are administered the regular and alternate assessments. This can be attributed to the impact the COVID-19 pandemic has had on student learning. To mitigate the impact of the COVID-19 pandemic, the State is continually updating its guidance for schools using Centers for Disease Control (CDC) Guidance and information to allow for students to remain in the classroom to the extent it is safe.

The State established new baselines because this is a new indicator. In addition, the State changed the measurement from the TAMELA to the NMSSA for grades 4 and 8 and to the SAT for grade 11. Grade 11 is the only grade included in the high school assessment rates per the State ESEA plan. Although the State recognizes that the FFY2020 data is not a complete data set due to the small numbers of students administered the statewide

assessments, the State is electing to utilize FFY2020 data for the baseline. Since there were a number of moving parts this year, such as the establishment of a new indicator, a 95% participation rate waiver granted to the State and new assessments being administered, there was no other year prior year of data with similar circumstances to use as a baseline. The State is committed to closing the gap between outcomes for students with and without disabilities by working on improving wide-ranging problems such as the shortage in teachers, especially special education teachers. New targets for FFY2020 to FFY2025 are required and have been set.

3D - Prior FFY Required Actions

None

3D - OSEP Response

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

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection. Further, the State reported, "Since the waiver allowed for the participation rate to be below 95% and the state allowed LEA's flexibility in determining participation in the statewide assessment, it is important to note, the 95% participation rate for students with disabilities was not met and thereby the data in this APR for FFY2020 is incomplete and is not representative of the make-up of the State's population of students with disabilities."

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

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

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

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

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

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n and/or cell size requirement, if applicable).

If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

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

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

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

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2016	0.81%

FFY	2015	2016	2017	2018	2019
Target <=	1.90%	0.81%	0.81%	0.80%	0.80%
Data	0.68%	0.81%	0.76%	0.00%	0.71%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	0.81%	0.68%	0.55%	0.42%	0.29%	0.16%

Targets: Description of Stakeholder Input

On March 18, 2021, the State held the fourth targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 4a. Suspension and Expulsions and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on suspension and expulsion In school year 2020-2021, eight out of the ten months of school were held virtually. Due to the online learning, it was anticipated the number of suspension and expulsions would decrease since students were not in school buildings but were at home.

Overall, the suspension and expulsion rates in the state have been low prior to the pandemic. However, it was recommended by the stakeholder group that the target rates remain low and show little to no growth over the first few years. It was anticipated that social-emotional issues may arise as result of the pandemic and will have an impact on students as they transition from a year of online learning to in-person learning. Although the state is investing in supporting the social-emotional learning of all students, there may be an adjustment period when the suspension and expulsion rates of students with disabilities increase.

Based on the information shared by stakeholders, the state is choosing to show little to no growth in the targets the first few years of the package period. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for this indicator.

FFY 2020 SPP/APR Data

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

YES

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

5

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1	140	0.71%	0.81%	0.71%	Met target	No Slippage

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

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

State's definition of "significant discrepancy" and methodology

Data on the suspensions and expulsions of children with disabilities was derived from the IDEA Section 618 data submitted by LEAs via the State data collection system and database, STARS, as part of the End of Year (EOY) data collection. The information was submitted in STARS using unique student identification numbers for each student and infraction. The data uploaded in the STARS system was validated by State staff.

This validated data was used to populate the Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2019-20 due in November 2020. Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) was used to determine significant discrepancy.

The State defines significant discrepancy in the rates of suspension and expulsions of greater than 10 days in a school year for students with IEPs (disabilities) among LEAs in the State if the following criteria are met:

- The LEA must have a "cell" size of greater than 10 with suspensions and expulsions of students with disabilities greater than 10 days in a school year; and
- The rate of suspensions/expulsions for students with IEPs is more than 1% higher than the average rate of suspensions and expulsions greater than 10 days among LEAs in the State.

The rates of suspensions and expulsions of greater than 10 days in a school year for students with IEPs are compared among LEAs in the State. If an LEA had a "cell" size at least 11 students with disabilities who were suspended or expelled greater than 10 days and a long-term suspension and expulsion rate for students with IEPs that was more than 1% higher than the State's rate of 0.416%, the LEA was considered to have significant discrepancy in the rates of suspensions and expulsions.

The State will not be reestablishing a new baseline for this indicator because OSEP does not require a baseline change unless there is a change in methodology or data source by either OSEP or the State. Since the State and OSEP did not make any changes to the methodology or data source, the State will not establish a new baseline for this indicator. New targets for FFY2020 to FFY2025 are required and have been established.

Provide additional information about this indicator (optional)

During FFY 2020 (using 2019-20 data), only one LEA in the State was found to have significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of students with IEPs. The State met the target.

Five LEAs were not included in the calculation as a result of the "cell" size requirement. These five LEAs had suspension rates that exceed the state threshold of 1.416% but suspended only one to four students with disabilities, and as such, were excluded from the analysis.

It is possible that the FFY2020 data (which is 2019-2020 data) was impacted by the COVID-19 pandemic since the data included the time period of March 2020 through May 2020 when remote learning occurred. However, the evidence does not reflect this. In the 2018-2019 school year, 155 students with disabilities were suspended for more than 10 days whereas in 2019-20, 239 students with disabilities were suspended for more than 10 days. We anticipated the number in 2019-2020 to be smaller than that in 2018-2019 given that students were in the school buildings for fewer days in 2019-2020 than in 2018-2019.

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

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

The State is currently in the process of reviewing policies, procedures and practices relating to the development and implementation of IEPs. The results of the review will be reported during the April clarification period in April 2022,

The State has subsequently reviewed the policies, procedures and practices relating to the implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards for the one LEA with significant discrepancy. Each applicable section of the LEA's policies and procedures were reviewed by State staff to ensure compliance with federal and state requirements. As each section was reviewed, federal and state requirements were compared to the LEAs policies and procedures. The State found that each section complied with all applicable federal and state requirements and there were not discrepancies or deficiencies noted. Therefore the LEA had no policies, procedures and practices which contributed to the significant discrepancy finding.

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 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

4A - Prior FFY Required Actions

None

4A - OSEP Response

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	0.81%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.68%	0.81%	0.00%	0.00%	0.00%

Targets

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

FFY 2020 SPP/APR Data

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

YES

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

12

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1	0	133	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

Data for Indicator 4B were gathered from the Information Collection 1820-0621 (Report of Children with Disabilities Subject to Disciplinary Removal) submitted to EdFacts in November 2020 (discipline data from the 2019-20 school year). LEAs were required to submit discipline data during the STARS End of Year (EOY), data collection period. The suspension and expulsion data was disaggregated by LEA and race and ethnicity to determine if an LEA had a significant discrepancy, by race and ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEP's.

This first step in the significant discrepancy determination process, is flagging (i.e. identifying) LEAs which meet the criteria. The State has established a minimum "cell" size. In order for a LEA to be flagged for possible significant discrepancy, by race and ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEP's, the LEA must meet the following criteria:

- An "n" size of greater than 10 students suspended or expelled for greater than 10 days in the particular race or ethnicity category in a school year; and
- The rate of suspension/expulsions, by race and ethnicity, for children with IEPs is more than 1% greater than the state rate of suspension/expulsions greater than 10 days in a school year for students with IEPs among LEAs in the State.

Second, in order to determine if the LEA had significant discrepancy by race and ethnicity in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, and to determine if the LEA's policies, procedures, or practices contributed to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, use of positive behavioral interventions and supports, and procedural safeguards, the LEA is required to complete the Indicator 4 self-assessment. The State reviews the self-assessment along with the LEA's policies, procedures and practices, including student data. After the State review, it is determined if the deficient or non-compliant policies, procedures, and practices contributed to the significant discrepancy in the rates of suspension and expulsions by race and ethnicity for children with IEPs. The second step is not completed unless an LEA meets the criteria in the first step.

During FFY 2020 (using 2019-2020 data), only one LEA in the State was found to have significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of students with disabilities.

Twelve LEAs were not included in the calculation as a result of the "cell" size requirement. These five had suspension rates that exceed the state threshold of 1.416% but suspended only one to four students with disabilities, and as such, were excluded from the analysis.

Provide additional information about this indicator (optional)

It is possible that the FFY2020 data (which is 2019-2020 data) was impacted by the COVID-19 pandemic since the data included the time period of March 2020 through May 2020 when remote learning occurred. However, the evidence does not support this. In the 2018-2019 school year, 155 students with disabilities were suspended for more than 10 days whereas in 2019-2020, 239 students with disabilities were suspended for more than 10 days. It might have expected the number in school year 2019-2020 to be smaller than that in 2018-2019 given that students were in the school buildings for fewer days in 2019-2020 than in 2018-2019.

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

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

The state is currently in the process of reviewing policies, procedures and practices relating to the development and implementation of IEPs, The results of the review will be reported during the April clarification period in April 2022,

The State has subsequently reviewed the policies, procedures and practices relating to the implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards for the one LEA with significant discrepancy. Each applicable section of the LEA's policies and procedures were reviewed by State staff to ensure compliance with federal and state requirements. As each section was reviewed, federal and state requirements were compared to the LEAs policies and procedures. The State found that each section complied with all applicable federal and state requirements and there were not discrepancies or deficiencies noted. Therefore the LEA had no policies, procedures and practices which contributed to the significant discrepancy finding.

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 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

4B - Prior FFY Required Actions

None

4B - OSEP Response

4B- Required Actions

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

Instructions

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

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A	2019	Target >=	50.00%	53.00%	53.00%	53.00%	53.00%
A	51.38%	Data	49.80%	49.82%	49.93%	48.95%	51.38%
B	2019	Target <=	19.00%	18.00%	18.00%	18.00%	18.00%
B	17.10%	Data	19.19%	18.62%	18.14%	17.66%	17.10%
C	2019	Target <=	1.90%	0.91%	0.91%	0.91%	0.91%
C	0.39%	Data	0.91%	0.87%	0.79%	0.85%	0.39%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	51.53%	51.68%	51.83%	51.98%	52.13%	52.28%
Target B <=	16.59%	16.08%	15.57%	15.06%	14.55%	14.04%
Target C <=	0.39%	0.38%	0.37%	0.36%	0.35%	0.34%

Targets: Description of Stakeholder Input

On March 11, 2021, the State held the second targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 3. Statewide Assessments and 5. Learning Environments and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on assessment and learning. In regard to assessment data, the state applied for and was granted a waiver by the U.S. Department of Education, on the requirement to administer the statewide assessment for school year 2019-2020 due to the pandemic. The stakeholder group discussed the potential impacts this waiver may have on the state's data for upcoming years and learning loss of students with disabilities. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing targets over the next couple of years.

Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. The changes made by OSEP to indicator 5, to include students with disabilities that are age 5 and in kindergarten in the indicator 5 measurement instead of indicator 6 as previously done was also discussed. Lowering the targets will allow for the State to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the State is selecting to close the gap between the target and state data for indicator 3. The targets will be held at low rates of growth for the package period for both indicators 3 and 5. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these indicators.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	Total number of children with IEPs aged 5 (kindergarten) through 21	50,311
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	26,420
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	8,263
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	198
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	31
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	115

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

NO

FFY 2020 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	26,420	50,311	51.38%	51.53%	52.51%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	8,263	50,311	17.10%	16.59%	16.42%	Met target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	344	50,311	0.39%	0.39%	0.68%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
C	The State saw an 85% increase in the number of students that were homebound or hospitalized. A 21.10% increase in the number of students that were in a separate school and a 96.77% increase in those in a residential facility. The reason for the slippage can be attributed to the COVID-19 pandemic. As a result of the pandemic, students in the state attended school online from August 2020 to April 2021. The increase in homebound or hospitalized is due to the number of medically fragile and those students with other health conditions being placed in homebound settings for health and safety purposes. Placing students in these settings was appropriate to mitigate the uncertainty of the pandemic. The increase in the number of students in residential facilities was a result of no in-person services available

Part	Reasons for slippage, if applicable
	to meet the needs of students. The difficult decision had to be made to place students in these facilities to meet their needs. While state operated schools were not allowed to provide in-person services, private and non public schools were allowed. As needed, LEAs elected to place students in the separate schools to ensure students in need had access to in-person services.

Provide additional information about this indicator (optional)

The State set a new baseline in FFY2019 to adjust for the OSEP measurement change, requiring students age 5 and in Kindergarten be reported in indicator 5 with students ages 6 to 21, instead of in indicator 6 with preschool students ages 3 to 5 as previously required. Thus, new baselines will not be established for indicators 5A, 5B and 5C in FFY2020. New targets are established for FFY2020 to FFY2025 as required for the new SPP/APR package period.

5 - Prior FFY Required Actions

None

5 - OSEP Response

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

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data – 6A, 6B

Part	FFY	2015	2016	2017	2018	2019
A	Target >=	50.00%	52.00%	52.00%	52.00%	52.00%
A	Data	43.86%	41.57%	44.12%	46.13%	52.08%
B	Target <=	28.00%	26.00%	26.00%	26.00%	26.00%
B	Data	42.26%	43.75%	40.49%	25.52%	32.83%

Targets: Description of Stakeholder Input

On March 18, 2021, the State held the third targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 6. Preschool Learning Environments and 7. Preschool Outcomes and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the state's performance to the targets.

The changes made by OSEP to indicator 6, to exclude students with disabilities that are age 5 and in kindergarten from the indicator 6 measurement and instead include those students in indicator 5 was also discussed. It was anticipated that moving the 5-year-old students in kindergarten out of indicator 6 would show a reduction in the number of students receiving services in regular preschool classrooms as the state does not have universal preschool for 3-year-old students, only for 4-year-old students Lowering the targets will allow for the state to close the current large gap between rates and targets and adjust for the indicator 6 change.

The targets will be set using at low rates of growth for the package period for indicator 6. The team will meet again in the spring of 2022 to revisit the baselines and review the data especially for 6C since it is being implemented for the first time in FFY2021 and to make adjustments as necessary for these indicators.

Targets

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

Inclusive Targets

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

Target Range not used

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

Part	Baseline Year	Baseline Data
A	2019	52.08%
B	2019	32.83%
C	2020	25.00%

Inclusive Targets – 6A, 6B

FFY	2020	2021	2022	2023	2024	2025
Target A >=	52.58%	53.08%	54.08%	55.58%	57.58%	60.08%
Target B <=	32.33%	31.83%	30.83%	29.33%	27.33%	24.83%

Inclusive Targets – 6C

FFY	2020	2021	2022	2023	2024	2025
Target C <=	24.50%	24.00%	23.00%	21.50%	19.50%	17.00%

Prepopulated Data

Data Source:

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

Date:

07/07/2021

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	1,314	1,956	205	3,475
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	579	1,142	134	1,855
b1. Number of children attending separate special education class	471	425	35	931
b2. Number of children attending separate school	79	36	2	117
b3. Number of children attending residential facility	1	0	0	1
c1. Number of children receiving special education and related services in the home	0	0	0	0

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

NO

FFY 2020 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2019 Data	FFY 2020 Target	FFY 2020 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	1,855	3,475	52.08%	52.58%	53.38%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	1,049	3,475	32.83%	32.33%	30.19%	Met target	No Slippage
C. Home	0	3,475		24.50%	0.00%	N/A	N/A

Provide additional information about this indicator (optional)

New baselines were set for indicators 6A and 6B in FFY2019 to account for the measurement change and the removal of students that are age five and in Kindergarten from this indicator. In FFY2020, a new baseline was set for indicator 6C as this is a new indicator being implemented in the state starting in FFY2021. The State has elected to set the baseline for Indicator 6C at 25.00% although the FFY 2020 rate is 0%. FFY2021 is the first year a code for services in the home was implemented in the State's reporting system; therefore, services in the home was not an applicable code available to LEAs when reporting FFY2020 data. It is anticipated LEAs will begin to use this code as additional training is made available, especially for three year old students since the State does not have a universal preschool program for students age 3 and as the pandemic continues. New targets have been set for FFY2020 to FFY2025 as required for the new SPP/APR package period.

6 - Prior FFY Required Actions

None

6 - OSEP Response

The State has established the baseline for indicator 6C using data from FFY 2020, and OSEP accepts that baseline.

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

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

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

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A1	2020	Target >=	77.73%	77.73%	77.73%	77.80%	77.80%
A1	69.01%	Data	78.41%	75.95%	78.16%	72.82%	71.78%
A2	2020	Target >=	54.43%	54.43%	54.43%	54.50%	54.50%

A2	41.92%	Data	54.33%	51.10%	49.82%	45.17%	44.34%
B1	2020	Target >=	76.49%	76.49%	76.49%	76.50%	76.50%
B1	69.03%	Data	77.68%	73.70%	75.31%	73.02%	70.81%
B2	2020	Target >=	50.31%	50.31%	50.31%	50.35%	50.35%
B2	37.09%	Data	49.89%	49.54%	45.19%	40.01%	40.30%
C1	2020	Target >=	76.85%	76.85%	76.85%	76.86%	76.86%
C1	68.91%	Data	78.37%	76.84%	78.44%	74.75%	73.80%
C2	2020	Target >=	62.15%	62.33%	62.33%	62.35%	62.35%
C2	49.76%	Data	62.33%	60.28%	58.18%	53.04%	53.78%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A1 >=	69.01%	69.51%	70.01%	71.01%	72.51%	74.51%
Target A2 >=	41.92%	42.42%	42.92%	43.92%	45.42%	47.42%
Target B1 >=	69.03%	69.53%	70.03%	71.03%	72.53%	74.53%
Target B2 >=	37.09%	37.59%	38.09%	39.09%	40.59%	42.59%
Target C1 >=	68.91%	69.41%	69.91%	70.91%	72.41%	74.41%
Target C2 >=	49.76%	50.26%	50.76%	51.76%	53.26%	55.26%

Targets: Description of Stakeholder Input

On March 18, 2021, the State held the third targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 6. Preschool Learning Environments and 7. Preschool Outcomes and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on preschool outcomes and in particular learning loss. The extent of the learning loss would vary as the state made an effort to keep preschools open to allow for working parents to keep working; however, some parents opted for online learning. This decision also impacted the learning environment rates for preschool students with disabilities.

Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. Based on the information shared by stakeholders, the state is choosing to close the gap between the target and state data for indicator 7 by setting new baselines. The targets will be held at low rates of growth for the package period for indicator 7. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for these indicators.

FFY 2020 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

3,397

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	120	3.53%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	745	21.93%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,108	32.62%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	818	24.08%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	606	17.84%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,926	2,791	71.78%	69.01%	69.01%	N/A	N/A
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,424	3,397	44.34%	41.92%	41.92%	N/A	N/A

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	126	3.71%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	766	22.55%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,245	36.65%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	743	21.87%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	517	15.22%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,988	2,880	70.81%	69.03%	69.03%	N/A	N/A
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,260	3,397	40.30%	37.09%	37.09%	N/A	N/A

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	115	3.29%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	680	19.45%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	962	27.51%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	800	22.88%

Outcome C Progress Category	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	940	26.88%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,762	2,557	73.80%	68.91%	68.91%	N/A	N/A
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,740	3,497	53.78%	49.76%	49.76%	N/A	N/A

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The State has four approved instruments from which LEAs can select the instrument they want to use for gathering data for this indicator. The approved instruments are Brigance, Creative Curriculum, Work Sampling, and NM Pre-K Observational Assessment. LEAs may also petition the Special Education Division to request to use a different instrument. The Special Education Division can elect to approve or disapprove the instrument proposed by the LEA. If a non-approved instrument is used by an LEA, the state's database will cause an error notifying the LEA the instrument is not approved.

Students with disabilities, ages 3 to 5, receiving special education and related services must have an entry and exit early childhood assessment completed each year the child is receiving services. The students are assessed in three content areas: Behavior, Social Emotional and Language Acquisition. Students enrolled in an early childhood program for more than 30 days from the end of the school year, are required to have an early childhood entry assessment completed. The early childhood entry assessment is required to be administered within 30 days from the child's program start date, in the current school year. Early childhood exit assessments are administered at least six months after the entry assessment was administered. An exit assessment is required if the student was enrolled in the program for at least six months.

LEAs utilize the Childhood Outcomes Summary Form (COSF) calculator to identify a Progress Achieved Code which best identifies each child's level of performance. The data from the entry and exit assessments are then reported in the STARS system. The entry and exit data can be reported during any of the four State reporting periods, 40, 80, 120 and End of Year; however, the State requires the data to be reported in STARS at the earliest reporting period after the assessment was administered.

Provide additional information about this indicator (optional)

Although the State and OSEP are not changing the measurement or data source, the State is proposing to set new baselines and targets that are lower than the targets that were established from FFY 2016–2019, due to the impact of the COVID-19 pandemic. The learning of preschool students with disabilities has been impacted by the COVID-19 pandemic as reflected in the 2019 data. Therefore, the baseline and target rate changes will allow for the State to adjust rates, and close the gap between the targets and current student outcome rates. Current student outcome rates are no longer relevant or realistic due to the impact the pandemic has had on outcomes for preschool students with disabilities. In the state, the proficiency rates for students without disabilities in the areas of positive social emotional skills, acquisition and use of skills including language and communication and use of appropriate behaviors to meet needs are at approximately 75.00%; therefore, some of the current baselines exceed the performance expectations of students without disabilities. While it is possible for students with disabilities to outperform their non-disabled peers, it is not realistic at this time due to the impact the pandemic has had on student learning. Although the baselines and target rates are changing, the State is not lowering expectations and will continue to strive to make improvements.

Online learning as a result of the COVID-19 pandemic was not ideal for preschool students with disabilities as the data reflects. Overall, there was a decline in the outcome rates which can be attributed to learning loss or the inability to develop skills from an online platform. To mitigate the impact of

the COVID-19 pandemic, the State is continually updating its guidance for schools using Centers for Disease Control (CDC) guidance and information to allow for students to remain in the classroom to the extent it is safe.

7 - Prior FFY Required Actions

None

7 - OSEP Response

The State has revised the baselines for this indicator, using data from FFY 2020, and OSEP accepts those revisions.

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

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

On April 1, 2021, the State held the fifth targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 8. Parent Involvement and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the state's performance to the targets.

In school year 2020-2021, eight out of the ten months of school were held virtually. Due to the online learning, it was anticipated the number of parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities may have decreased due to the pandemic. Since in-person gatherings were not an option, meetings and other interactions had to be completed via online meeting platforms such as Zoom. This was potentially an issue for parents who did not have access to the internet or had a preference for in-person meetings.

It was recommended by the stakeholder group that the target rates remain low and show little to no growth over the first few years. Based on the stakeholder recommendations, the state is electing to show little to no growth in the targets the first few years of the package period. The team will meet again in the spring of 2022 to revisit the baselines and review the data to make adjustments as necessary for this indicator.

Historical Data

Baseline Year	Baseline Data
2010	80.20%

FFY	2015	2016	2017	2018	2019
Target >=	83.00%	84.00%	84.00%	84.00%	84.00%
Data	86.17%	82.45%	84.21%	81.83%	85.90%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	80.84%	81.48%	82.12%	82.76%	83.40%	84.04%

FFY 2020 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3,413	4,059	85.90%	80.84%	84.08%	Met target	No Slippage

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

Parents of a representative sample of students with disabilities, including preschool students with disabilities, are given an opportunity to complete the State's parent survey. Parents of students at all grade levels, including preschool, received and responded to the survey.

In FFY 2020, the survey was distributed to a stratified, representative number of 15,654 parents of children receiving special education services, including parents of preschool children. A total of 4,085 surveys were returned for a response rate of 26%. Out of the 4,085 parents who responded to the overall survey, 4,059 specifically answered the question reporting how the schools facilitated parent involvement as a means of improving services and results for children with disabilities. Preschool children are identified as a target group in the survey. Data are analyzed specific to grade level. Preschool parents represented 6.36% of the total respondents, with 260 parents responding. Results are weighted by LEA to make sure that the overall state parent involvement percentage is an accurate reflection of the experiences of parents of students with disabilities age 3 to 21.

The number of parents to whom the surveys were distributed.

15,654

Percentage of respondent parents

25.93%

Response Rate

FFY	2019	2020
Response Rate	6.33%	25.93%

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

The response rate increased from 6% in 2019-2020 to 26% in 2020-2021. The Special Education Division of the New Mexico Public Education Department implemented two new procedures to increase the response rate. First, a secure website was created for districts to log in and provide updated mail, email, and cell phone numbers of parents with students with disabilities. Second, email and text blasts were sent to parents in the sample. Parents had the opportunity to complete the survey electronically via their cell phone or computer. Parents that did not respond to the electronic survey were mailed out a paper survey as in years past.

The parent survey is available in the Navajo and Spanish languages for those that may need these versions in order to respond. A hotline will be available for parents who are Spanish speaking and have questions or need support in completing the survey. In the future we will work on the same for Navajo speakers. Data will be stratified prior to the sample being selected to ensure that each race/ethnic group is represented appropriately in the sample. When surveys are ready to be sent out, the Parent Information Centers, Parents Reaching Out (PRO) and Education for Parents of Indian Children with Special Needs (EPICS) will be notified and will be asked to encourage parents to respond to the surveys. The Native American Disabilities Law Center will be contacted to do the same. The State is also considering developing an app for parents to use to respond. Another consideration is possibly aligning survey administration with IEP meetings which will require additional coordination with LEAs.

The Special Education Division will continue to explore using multiple administration methods to increase the response rate including the possibility of

moving from a sample to surveying all parents and separating preschool from school-age parent surveys to obtain feedback to better inform programming for all parents.

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.

Nonresponse bias measures the differences in opinions between respondents and non-respondents in meaningful ways, such as the positivity of responses. A few points can be examined to determine if nonresponse bias exists. One point is the overall response rate. The higher the response rate, the less likely nonresponse bias will occur. The response rate is 26%, which is quite high in comparison to previous years.

Second, the representativeness of the responses can be examined. As is described in more detail in the following section, no significant differences by grade were found. Although some significant differences were found in response rates by race/ethnicity and by primary disability, the results are still representative of the statewide demographics.

Third, we can compare the responses of parents who responded early in the process to those who responded later in the process. The idea being that perhaps those who do not immediately respond and needed multiple prompts to respond are different in some meaningful way than those who respond immediately. These results showed no statistically significant differences between parents who responded earlier and parents who responded later. Therefore, we conclude that nonresponse bias is not present.

In analyzing the data from FFY2020, the State did not determine there was any nonresponse bias identified in which any race/ethnicity was excluded due to any bias. To promote responses from a broad cross section of parents of children with disabilities, the State has done the following or is considering doing the following:

1. The current parent survey is available in the Navajo and Spanish languages for those that may need these versions in order to respond and determine if versions in additional languages need to be added.
2. A hotline will be available for parents who are Spanish speaking and have questions or need support in completing the survey. In the future we will work on the same for Navajo speakers.
3. Data will be stratified prior to the sample being selected to ensure that each race/ethnic group is represented appropriately in the sample.
4. When surveys are ready to be sent out, the Parent Information Centers, Parents Reaching Out (PRO) and Education for Parents of Indian Children with Special Needs (EPICS) will be notified and will be asked to encourage parents to respond to the surveys. The Native American Disabilities Law Center will be contacted to do the same.
5. Considerations for developing an app for parents to use to respond,
6. Possibly aligning survey administration with IEP meetings which will require additional coordination with LEAs.
7. Considerations for moving from a sample to census to ensure any bias which may be related to sampling would be eliminated.
8. Considerations for changing the current survey which contains 25 questions to the 1 required question so that parents are not overwhelmed. Also, changing from the likert rating scale which could cause confusion to a yes and no question.

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

The State used statistical significance testing of response rate to determine if one group was over- or under-represented. Note that our survey sample was such that if all disaggregated groups have the same response rate, then by definition, the disaggregated groups are representative of the population. For example, if all racial/ethnic groups had a 30% response rate, then the population of the respondents would mirror the actual population in terms of its racial/ethnic make-up. On the other hand, if one racial/ethnic group has a 30% response rate for example and another a 20% response rate, then the population of the respondents would not mirror the actual population in terms of its racial/ethnic make-up. No significant differences were found by grade. Significant differences were found in response rates by disability and race/ethnicity. In terms of race/ethnicity, parents of White students were more likely to respond (response rate=30%) than parents of Hispanic students (response rate=25%). (To show how this corresponds to the population demographics of students with disabilities, 64% of the population is Hispanic and 21% is white; for the respondent demographics, 59% is Hispanic and 25% is white. Thus, response rate is a reliable indicator of the representativeness of the population. The same conclusion is reached) In terms of disability, parents of students with Specific Learning Disabilities (response rate=23%) were less likely to respond than parents of students with Autism (response rate=31%), Other Health Impairments (response rate=29%), Speech or Language Impairment (response rate=29%), or a Developmental Delay (response rate=28%).

There were no significant differences in the parent involvement percentage itself between these groups of parents by race/ethnicity. For example, there were no significant differences in the parent involvement rate between parents of Hispanic students and parents of White students. There was a significant difference in the parent involvement rates between parents of students with a Specific Learning Disability and parents of students with a Speech or Language Impairment. However, parents from a wide range of districts from across the state responded to the survey. Furthermore, results are weighted by district and school to ensure that the parent survey results reflect the population of parents in terms of geographic distribution. Thus, we are confident that the overall results are representative of the State despite the differences in response rates.

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

NO

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

The following are the strategies that the State will use to ensure that in the future, the response data are representative of the demographics of students with disabilities in the state:

1. The current parent survey is available in the Navajo and Spanish languages for those that may need these versions in order to respond and determine if versions in additional languages need to be added.
2. A hotline will be available for parents who are Spanish speaking and have questions or need support in completing the survey. In the future we will work on the same for Navajo speakers.
3. Data will be stratified prior to the sample being selected to ensure that each race/ethnic group is represented appropriately in the sample.
4. When surveys are ready to be sent out, the Parent Information Centers, Parents Reaching Out (PRO) and Education for Parents of Indian Children with Special Needs (EPICS) will be notified and will be asked to encourage parents to respond to the surveys. The Native American Disabilities Law Center will be contacted to do the same.
5. Considerations for developing an app for parents to use to respond,
6. Possibly aligning survey administration with IEP meetings which will require additional coordination with LEAs.
7. Considerations for moving from a sample to census to ensure any bias which may be related to sampling would be eliminated.

8. Considerations for changing the current survey which contains 25 questions to the 1 required question so that parents are not overwhelmed. Also, changing from the likert rating scale which could cause confusion to a yes and no question.

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

Statistical significance testing of response rate was used to determine representativeness with a threshold of $p < 0.05$.

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.

The sampling plan was previously approved by OSEP was implemented. Sampling is completed at the LEA and school level. A stratified, random sample of students with disabilities is selected from each school within each LEA. When calculating state-level results, responses are weighted by the student with disability population size (e.g., a LEA that has four times the number of students with disabilities as another LEA will receive four times the weight in computing overall state results.) Since the sampling plan is based on a representative sample from each and every LEA, and the proper weighting is done in the analysis, the State is assured that the Indicator 8 results are reliable and valid.

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

Provide additional information about this indicator (optional)

Although the State rate declined between FFY2019 to FFY2020, the response rate improved from 6% in FFY2019 to 26% in FFY2020. This can be attributed to the continuous improvement strategies the State has developed and revisits on a continuous basis to improve outcomes for students with disabilities.

The State will not be setting a new baseline for this indicator because OSEP does not require a baseline change unless there is a change in methodology or data source by either OSEP or the State. Since the State and OSEP did not make any changes to the methodology or data source, the State will not establish a new baseline for this indicator. New targets for FFY2020 to FFY2025 are required and have been established. The State does understand the targets are set lower than targets from previous years however, this is intentional to allow for the impacts of the COVID-19 pandemic to take affect on our data for the next few years. Also, the State is considering improvement efforts including the possibility of moving from sampling to administering the parent survey to all parents of students with disabilities.

8 - Prior FFY Required Actions

None

8 - OSEP Response

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

8 - Required Actions

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

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

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

Targets

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

FFY 2020 SPP/APR Data

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

YES

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

27

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	0	120	0.00%	0%	0.00%	N/A	N/A

Were all races and ethnicities included in the review?

YES

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

In order for an LEA to be considered as having disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification, the following criteria must be met:

- A "cell" size of greater than 10 students or more in the racial and ethnic groups; and
- Risk Ratio (RR) and Alternate Risk Ratio (ARR) of 3.0 or above (over-representation) for students aged 5 in Kindergarten – 21; and
- Deficient policies, procedures, and/or practices.

One year of data is used in the calculation.

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.

No LEAs were identified as demonstrating possible disproportionate representation of racial and ethnic groups in special education and related services. If an LEA(s) were identified, the LEA(s) would be notified in writing of the disproportionate representation and be required to complete the Indicator 9 self-assessment protocol. The purpose of the self-assessment is to identify if the LEA(s) has deficient policies, procedures, and practices. The State would examine the self-assessment to determine if the policies, procedures, and practices are deficient and contributed to the inappropriate identification.

In addition, the State would send a list of students to the LEA(s) who may have been inappropriately identified in the "possible disproportionate representation" finding. The LEA(s) is then required to submit the following documents for a review by the State: Student Assistance Team (SAT) paperwork for each flagged student, reason for referral, length of time in SAT, interventions implemented, reason student was sent for testing/evaluation, diagnostic report, and/or Review of Existing Evaluation Data (REED). The information is reviewed to determine what portion(s) of the LEA's policies, procedures, and practices need to be updated.

Upon conclusion of this process, the State determines whether the disproportionate representation was the result of inappropriate identification.

Provide additional information about this indicator (optional)

Out of 147 LEAs, 27 LEAs were not included in the calculation because the LEAs did not meet the minimum "cell" size of 11. In other words, the LEA did not have greater than 10 students in any of the seven racial/ethnic categories. 120 LEAs met the State's minimum "cell" size. In FFY 2020, zero LEAs were considered to have disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification. The State met the target.

Twenty-seven LEAs, which includes the 6 State Supported Schools (SSSs), did not meet the "cell" size requirement. The six (6) SSSs are not included in the Indicator 9 calculation because they never meet the "cell" size requirement due to the nature of the population they serve. These populations include those with low-incidence disabilities of deaf/hard of hearing and blind/visually impaired. The other populations of SSSs are those students that are incarcerated in the juvenile justice system or adult prisons, as well as those being treated in mental health facilities.

Correction of Findings of Noncompliance Identified in FFY 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

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

9 - Prior FFY Required Actions

None

9 - OSEP Response

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

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

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

Targets

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

FFY 2020 SPP/APR Data

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

YES

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

52

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3	0	95	0.00%	0%	0.00%	N/A	N/A

Were all races and ethnicities included in the review?

YES

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

An LEA is considered to have disproportionate representation of racial and ethnic groups in a specific disability category that was the result of inappropriate identification if the following criteria are met:

- A "cell" size of greater than 10 students or more in the racial and ethnic groups and the specific disability category; and
 - A risk ratio (RR) and alternate risk ratio (ARR) of 3.0 or above (over representation) for students aged 5 in Kindergarten - 21; and
 - Deficient policies, procedures, and/or practices.
- One year of data is used in the calculation.

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.

Using the criteria established above, the State identified three LEAs with disproportionate representation in specific disability categories out of the 95 LEAs who met the minimum "cell" size requirement. The LEA(s) were notified in writing of the disproportionate representation.

The three LEAs identified were then required to complete the Indicator 10 self-assessment protocol. The purpose of the self-assessment is to determine if the LEAs have deficient policies, procedures, and practices. The State is currently in the process of examining the self-assessment completed by the LEAs and determining if the policies, procedures, and practices contributed to the inappropriate identification. A number will be entered in the "Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification" section during the clarification period in April 2022.

The State has subsequently examined the self-assessments completed by the 3 LEAs with disproportionate representation of racial/ethnic groups in specific disability categories. In addition, the policies, procedures and practices for the 3 LEAs was also reviewed. The State has determined the policies, procedures, and practices did not contribute to the inappropriate identification of students for any LEA. Therefore, no LEAs had disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification.

Provide additional information about this indicator (optional)

Out of 147 LEAs, 52 LEAs were excluded from the calculation because the LEAs did not meet the minimum "cell" size requirement. In other words, the LEA did not have greater than 10 students in any of the seven racial/ethnic categories. 95 LEAs met the State's minimum "n" size. In FFY 2020, zero LEAs were found to have disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. The State met the target.

Correction of Findings of Noncompliance Identified in FFY 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

10 - Prior FFY Required Actions

None

10 - OSEP Response

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

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

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

Targets must be 100%.

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

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

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	80.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.40%	99.06%	99.66%	99.64%	99.67%

Targets

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

FFY 2020 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
5,374	5,122	99.67%	100%	95.31%	Did not meet target	Slippage

Provide reasons for slippage

The COVID-19 pandemic had an impact on the rates for indicator 11. For the majority of the school year, August 2020 to April 2021, students were attending classes online or a hybrid as the State determined that was the way to go about keeping students safe from the COVID-19 virus. This posed many challenges which included gathering data and conducting evaluations for students suspected as having a disability through video-conferencing platforms. In addition, not all families had access to reliable internet sources, which added to the already volatile situation, LEAs noted in their data reporting to the State, that 44% of the delays resulting in the slippage were due to parents failing or refusing to produce the child for evaluation as parents were hesitant to consent for in-person evaluations over fears of contracting the virus or did not have access to reliable internet sources.

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

252

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.

252 students were included in (a) but not included in (b). The range of days beyond the timeline when the evaluation was completed was 1 to 1021. The reasons provided for the delays were, 44% due to the parent failing or refusing to produce the child for evaluation, 40% due to evaluation scheduling issues, 8% the 60 day timeline expired during the weekend, holiday or school closure, 4% of students moved out of the educational jurisdiction and 4% had no service provider(s) available to complete the evaluation.

It is important to note, while the 1021 days appears to be a failure to correct non-compliance within one year, it is not. The STARS data system is a self-reported data system where LEAs enter their own data. In this instance, the LEA did not enter this particular student's information into the STARS system until the evaluation was completed, which unfortunately for the student was 1021 days after the parent signed the consent for evaluation. We are currently working to mitigate issues such as this to ensure LEAs are reporting data as it occurs and the STARS system can accept the data.

Indicate the evaluation timeline used:

The State used the 60 day timeframe within which the evaluation must be conducted

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 State collects the data for Indicator 11 through the State database, the Student Teacher Accountability Reporting (STARS) System, four times each school year. State statute defines when the collection periods are, which are the 40th, 80th, 120th and End of Year reporting periods. LEAs upload their data into the STARS system each reporting period, the STARS system contains business rules which check the dates for the signed parental consent for evaluation to the date when evaluations were completed to ensure the process happened within 60 days. State staff run reports in the STARS system to ensure the LEAs have properly entered data and no errors remain. This process is completed each of the four reporting periods.

Provide additional information about this indicator (optional)

The COVID 19 pandemic had an impact on Indicator 11 as LEAs reported numerous causes in delays with the main cause being in-person evaluations were not feasible. To mitigate the impact on data collection, the State allowed for the use of electronic signatures and the use of on-line meeting platforms to collect data for eligibility determinations. Guidance was also developed and made available to LEAs to help navigate the evaluation process during the pandemic.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	7	3	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

The State verified that the source of noncompliance is correctly implementing the regulatory requirements through a follow-up review process, that the 7 LEAs demonstrated no further non-compliance within the OSEP required timeline of 12 months and were correctly implementing the specific regulatory requirements (achieved 100% compliance) based on the following review of updated data. This determination was made using a three-step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA process requires LEAs to review their own policies, practices and procedures to ensure compliance and identify any issues within the policies, practices and procedures which are causing the non-compliance to occur. Each of the 7 LEAs submitted a completed RCA to the state and had varying contributing factors for the non-compliance from lack of staff to a need for training.

Second, the state reviewed each of the 7 RCAs submitted by the LEAs along with the policies, practices and procedures. A Corrective Action Plan

(CAP) was developed for each of the 7 LEAs to address the areas the LEA and state identified, whether regulatory or non-regulatory, that are contributing to the non-compliance. The CAP included action steps, timelines for completion of each action step and the documentation required to verify each LEA completed the required action step(s) for the identified issues. The LEAs were required to submit documentation evidencing all action steps were complete, the state reviewed the documentation submitted for each action step and verified each item as corrected. Once all action steps of the CAP were completed and the state was assured the LEA was correctly implementing regulatory requirements, the CAP was closed by the state.

Third, subsequent data submitted by the LEAs into the State's database, STARS, was reviewed by the state. At the time the data was reviewed, each of the 7 LEAs had a score of 100% for Indicator 11. Once the data was verified, the state determined each LEA met the above conditions for each of the three steps necessary to ensure the regulatory requirements are being implemented correctly, and thereby each of the 7 LEAs were correctly implementing the regulatory requirements.

The 3 LEAs which remain noncompliant have corrected the noncompliance at the student level but have not met Prong 2 requirements, and thus have not satisfied the correction of noncompliance requirements.

Since the submission of the SPP/APR on February 1, 2022, the State has verified that the source of noncompliance for the 3 LEAs initially indicated in the findings not yet verified category, are now correctly implementing the regulatory requirements. The State has moved the 3 LEAs from the "Findings Not Yet Verified as Corrected" column to the "Findings of Noncompliance Subsequently Corrected" column above. The State verified this correction as follows:

First, the State verified through a follow-up review process, that the 3 LEAs demonstrated no further non-compliance and were correctly implementing the specific regulatory requirements (achieved 100% compliance) based on the following review of updated data. This determination was made using a three-step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA process requires LEAs to review their own policies, practices and procedures to ensure compliance and identify any issues within the policies, practices and procedures which are causing the non-compliance to occur. Each of the 3 LEAs submitted a completed RCA to the state and had varying contributing factors for the non-compliance from the impact of the COVID-19 pandemic to a need for training.

Second, State staff reviewed each of the 3 RCAs submitted by the LEAs along with the policies, practices and procedures. A Corrective Action Plan (CAP) was developed for each of the 3 LEAs to address the areas the LEA and state identified, whether regulatory or non-regulatory, that are contributing to the non-compliance. The CAP included action steps, timelines for completion of each action step and the documentation required to verify each LEA completed the required action step(s) for the identified issues. The LEAs were required to submit documentation evidencing all action steps were complete, the State reviewed the documentation submitted for each action step and verified each item as corrected. Once all action steps of the CAP were completed and the State was assured the LEA was correctly implementing regulatory requirements, the CAP was closed by the State.

Third, subsequent data submitted by the LEAs into the State's database, STARS, was reviewed by State staff. At the time the data was reviewed, each of the 3 LEAs had a score of 100% for Indicator 11. Once the data was verified, the State determined each LEA met the above conditions for each of the three steps necessary to ensure the regulatory requirements are being implemented correctly, and thereby each of the 3 LEAs are subsequently correctly implementing the regulatory requirements.

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

The State verified that each individual case of non-compliance was corrected. First, the State reviewed the indicator 11 Summary Report generated by the STARS system to obtain a list of students that did not have an evaluation completed by the 60 day timeline.

Second, the State reviewed the Indicator 11 Summary Report to determine if an evaluation date was entered for each student identified in the first step, even if the date was after the 60 day timeline. If the evaluation date was in the STARS system, the individual case of non-compliance was considered corrected. If the evaluation date was not in the STARS system, the State contacted the LEA and requested evaluation and parent consent for evaluation documentation to determine the status of the evaluation. The State monitored the STARS system until each evaluation was completed and/or documentation was provided to confirm each student received an evaluation. All students in the 7 LEAs identified in the first step had an evaluation completed within one year as verified through the STARS system or a documentation review, thus it was determined each individual case of non-compliance was corrected.

Since the submission of the SPP/APR on February 1, 2022, the State has verified that each individual case of noncompliance was corrected by the 3 LEAs initially indicated in the findings not yet verified category above. The State has moved the 3 LEAs from the "Findings Not Yet Verified as Corrected" column to the "Findings of Noncompliance Subsequently Corrected" column above. The State has subsequently verified individual case of noncompliance correction as follows:

First, the State reviewed the indicator 11 Summary Report generated by the STARS system to obtain a list of students that did not have an evaluation completed by the 60 day timeline.

Second, the State reviewed the Indicator 11 Summary Report to determine if an evaluation date was entered for each student identified in the first step, even if the date was after the 60 day timeline. If the evaluation date was in the STARS system, the individual case of non-compliance was considered corrected. If the evaluation date was not in the STARS system, the State contacted the LEA and requested evaluation and parent consent for evaluation documentation to determine the status of the evaluation. The State monitored the STARS system until each evaluation was completed and/or documentation was provided to confirm each student received an evaluation. All students in the 3 LEAs identified in the first step had an evaluation completed within one year as verified through the STARS system or a documentation review, thus it was determined each individual case of non-compliance was corrected by the 3 LEAs.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

11 - Prior FFY Required Actions

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

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 SPP/APR

11 - OSEP Response

11 - Required Actions

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

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

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

Targets must be 100%.

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

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

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

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	94.40%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	96.73%	96.06%	99.48%	83.90%	97.41%

Targets

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

FFY 2020 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	998
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	28

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	756
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.	16
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	129
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.	

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	756	825	97.41%	100%	91.64%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The COVID-19 pandemic had an impact on the rates for indicator 12. For the majority of the school year, August 2020 to April 2021, students were attending classes online as the State determined that was the safest way to keep students safe from the COVID-19 virus. This posed many challenges which included gathering data and conducting evaluations for students referred from Part C services to Part B using video-conferencing platforms. In addition, not all families had access to reliable internet sources which added to the already volatile situation. In addition, LEAs noted in their data reporting to the state that 57% of the referrals to part c were made with less than 90 days before the child's third birthday, which also created delays in the transition process.

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

69

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.

69 students were included in (a) but not included in b, c, d, or e. The range of days beyond the third birthday when eligibility was determined and the IEP developed was 1 to 317. The reasons provided for the delays were: 57% of the referrals to part c were made with less than 90 days before the child's third birthday, 29% due to evaluation scheduling issues, and 14% parents requested a delay in the having the IEP meeting.

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 state collects the data for Indicator 12 through the state database, called the Student Teacher Accountability Reporting (STARS) System, four times each school year. State statute defines collection periods and are referred to as the 40th, 80th, 120th and End of Year reporting periods and LEAs upload their data into the STARS system during these periods. STARS contains business rules that check the dates for the students third birthday and compares it to the date the child was found eligible for Part B and has an IEP developed and implemented, to ensure the requirement is met. State staff then run reports in the STARS system to ensure the LEAs have properly entered data and no errors remain. This process is completed at each of the four reporting periods.

Provide additional information about this indicator (optional)

The COVID-19 pandemic had an impact on Indicator 12 as LEAs reported numerous causes in delays such as in-person evaluations were not feasible. For instance, Tribal communities were on a complete lock-down and thus students in those communities could not be evaluated. Barriers also existed in attempting to obtain signed parental consent especially when parents did not have access to internet services which is an issue state-wide. To mitigate the impact on data collection, the State allowed for the use of electronic signatures and the use of on-line meeting platforms to collect data for eligibility determinations. Guidance was also developed and made available to LEAs to help navigate the evaluation and IEP processes during the pandemic.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	6	1	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

The State verified that the source of noncompliance is correctly implementing the regulatory requirements through a follow-up review process, that the 6 LEAs demonstrated no further non-compliance within the OSEP required timeline of 12 months and were correctly implementing the specific regulatory requirements (achieved 100% compliance) based on the following review of updated data. This determination was made using a three-step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA process requires LEAs to review their own policies, practices and procedures to

ensure compliance and identify any issues within the policies, practices and procedures which are causing the non-compliance to occur. Each of the 6 LEAs submitted a completed RCA to the state and had varying contributing factors for the non-compliance from the need to strengthen monitoring of data points associated with indicator 12 to a need for training.

Second, the state reviewed each of the 6 RCAs submitted by the LEAs along with the policies, practices and procedures. A Corrective Action Plan (CAP) was developed for each of the 6 LEAs to address the areas the LEA and state identified, whether regulatory or non-regulatory, that are contributing to the non-compliance. The CAP included action steps, timelines for completion of each action step and the documentation required to verify each LEA completed the required action step(s) for the identified issues. The LEAs were required to submit documentation evidencing all action steps were complete, the state reviewed the documentation submitted for each action step and verified each item as corrected. Once all action steps of the CAP were completed and the state was assured the LEA was correctly implementing regulatory requirements, the CAP was closed by the state.

Third, subsequent data submitted by the LEAs into the State's database, STARS, was reviewed by the state. At the time the data was reviewed, each of the 6 LEAs had a score of 100% for Indicator 12. Once the data was verified, the state determined each LEA met the above conditions for each of the three steps necessary to ensure the regulatory requirements are being implemented correctly, and thereby each of the 6 LEAs were correctly implementing the regulatory requirements.

The 1 LEA which remains noncompliant has corrected their noncompliance at the student level but have not met Prong 2 requirements, and thus have not satisfied the correction of noncompliance requirements.

Since the submission of the SPP/APR on February 1, 2022, the State has verified that the source of noncompliance for the 1 LEA initially indicated in the findings not yet verified category, are now correctly implementing the regulatory requirements. The State has moved the 1 LEA from the "Findings Not Yet Verified as Corrected" column to the "Findings of Noncompliance Subsequently Corrected" column above. The State verified this correction as follows:

First, the LEA completed a Root Cause Analysis (RCA). The RCA process required the LEA to review their own policies, practices and procedures to ensure compliance and identify any issues within the policies, practices and procedures which are causing the non-compliance to occur. The LEA submitted a completed RCA to the State and the main contributing factor for the non-compliance was a need for staff training.

Second, State staff reviewed the RCA submitted by the LEA along with the policies, practices and procedures. A Corrective Action Plan (CAP) was developed to address the areas the LEA and State identified, whether regulatory or non-regulatory, that are contributing to the non-compliance. The CAP included action steps, timelines for completion of each action step and the documentation required to verify the LEA completed the required action step(s) for the identified issues. The LEA was required to submit documentation evidencing all action steps were complete, the State reviewed the documentation submitted for each action step and verified each item as corrected. Once all action steps of the CAP were completed and the State was assured the LEA was correctly implementing regulatory requirements, the CAP was closed by the State.

Third, subsequent data submitted by the LEAs into the State's database, STARS, was reviewed by the State. At the time the data was reviewed, the LEA had a score of 100% for Indicator 12. Once the data was verified, the State determined the LEA met the above conditions for each of the three steps necessary to ensure the regulatory requirements are being implemented correctly, and thereby the LEA was correctly implementing the regulatory requirements.

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

The State verified that each individual case of non-compliance was corrected. First, the State reviewed the indicator 12 Summary Report generated by the STARS system to obtain a list of students that did not have an IEP developed and implemented by the each student's third birthday.

Second, the State reviewed the Indicator 12 Summary Report to determine if an IEP date was entered for each student identified in the first step, even if the date was after the student's third birthday. If the IEP date was in the STARS system, the individual case of non-compliance was considered as corrected. If the IEP date was not in the STARS system, the State contacted the LEA and requested the IEP. The state monitored the STARS system until each IEP was completed and/or documentation was provided to confirm an IEP was developed and implemented. All students in the 6 LEAs identified in the first step had an IEP completed and implemented within one year as verified through the STARS system or a documentation review, thus it was determined each individual case of non-compliance was corrected.

Since the submission of the SPP/APR on February 1, 2022, the State has verified that each individual case of noncompliance was corrected by the LEA initially indicated in the findings not yet verified category above. The State has moved the 1 LEA from the "Findings Not Yet Verified as Corrected" column to the "Findings of Noncompliance Subsequently Corrected" column above. The State has subsequently verified individual case of noncompliance correction as follows:

The State verified that each individual case of non-compliance was corrected. First, the State reviewed the indicator 12 Summary Report generated by the STARS system to obtain a list of students that did not have an IEP developed and implemented by the each student's third birthday.

Second, the state reviewed the Indicator 12 Summary Report to determine if an IEP date was entered for each student identified in the first step, even if the date was after the student's third birthday. If the IEP date was in the STARS system, the individual case of non-compliance was considered as corrected. If the IEP date was not in the STARS system, the State contacted the LEA and requested the IEP. The state monitored the STARS system until each IEP was completed and/or documentation was provided to confirm an IEP was developed and implemented. All students in the LEAs identified in the first step had an IEP completed and implemented within one year as verified through the STARS system or a documentation review, thus it was determined each individual case of non-compliance was corrected.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

12 - Prior FFY Required Actions

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

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 SPP/APR

12 - OSEP Response

12 - Required Actions

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

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

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

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	98.45%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	87.35%	93.08%	95.87%	96.33%	97.63%

Targets

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

FFY 2020 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1,510	1,519	97.63%	100%	99.41%	Did not meet target	No Slippage

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 is collected at the State level for each LEA with students age sixteen and above. A sample is drawn from the LEAs' 40 day student data reported in STARS, the State's data system. LEAs are required to submit IEPs to the State for the sample drawn. The State has a secure Special Education Monitoring site where LEAs upload the IEPs. The State reviews the IEPs to determine if each of the required eight components for compliance are documented in each student's IEP. IEPs that are compliant and those that are non-compliant are identified through this process.

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?	NO

If no, please explain

The state's policies and procedures require that students, starting at age fourteen meet the requirements of this indicator. However, the state has chosen to exclude the data for students that are ages fourteen and fifteen from the data reported in this APR and thereby are not included in the baseline. The State elects to keep the federal and state data separate but the requirements are implemented in the same manner.

Provide additional information about this indicator (optional)

Since 2015, the State has been making incremental improvements each year with the requirements of this indicator. Overall, the rate has improved a total of 12.06% between 2015 and 2020. This rate increase represents the efforts the State has made to develop a strong secondary transition program for students with disabilities. The improvements were accomplished by developing a strong training program and establishing processes for compliance with this indicator.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	4	1	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

The State verified that the source of noncompliance is correctly implementing the regulatory requirements through a follow-up, that the 4 LEAs demonstrated no further non-compliance within the OSEP required timeline of 12 months and were correctly implementing the specific regulatory requirements (achieved 100% compliance) based on the following review of updated data. Each LEA completed a Root Cause Analysis (RCA). The RCA requires LEAs to review their policies, practices and procedures to ensure compliance and identify any issues with their own policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State. Second, the State reviewed each LEA's RCA along with the policies, practices and procedures. The State worked with each LEA to correct any issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify each LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, subsequent data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA must have a score of 100% for Indicator13 at the time of the data review. The 4 LEAs met the conditions for each of the three steps and are considered to be correctly implementing all regulatory requirements.

The 1 LEA which remains noncompliant has corrected their noncompliance at the student level but have not meet Prong 2 requirements, and thus have not satisfied the correction of noncompliance requirements.

Since the submission of the SPP/APR on February 1, 2022, the State has verified that the source of noncompliance for the 1 LEA initially indicated in the findings not yet verified category, are now correctly implementing the regulatory requirements. The State has moved the 1 LEA from the "Findings Not Yet Verified as Corrected" column to the "Findings of Noncompliance Subsequently Corrected" column above. The State verified this correction as follows:

The State verified that the source of noncompliance is correctly implementing the regulatory requirements through a follow-up with the LEA to ensure it is demonstrating no further non-compliance with the OSEP required timeline of 12 months; and are correctly implementing the specific regulatory requirements (achieved 100% compliance) based on the following review of updated data. The LEA completed a Root Cause Analysis (RCA). The RCA requires the LEA to review their policies, practices and procedures to ensure compliance and identify any issues with the policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State.

Second, the State reviewed the LEA's RCA along with the policies, practices and procedures. The State worked with the LEA to correct any issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify the LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed.

Third, subsequent data submitted by the LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA must have a score of 100% for Indicator13 at the time of the data review. The 1 LEA met the conditions for each of the three steps and is considered to be correctly implementing all regulatory requirements.

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

The State verified that each individual case of noncompliance was corrected. The State used a two-step process for verifying that each individual case of noncompliance was corrected. First, the State reviewed the Indicator 13 Summary Report generated by the STARS system, to obtain a list of students that did not have each of the eight components of Indicator 13 completed. Second, the State reviewed the Indicator 13 Summary Report to determine if

each component required is present on each IEP. If the completion date for each required component is in the STARS system, the individual case of non-compliance is considered as corrected. If the date for each required component is not in the STARS system, the State contacted the LEA and requested the status of the transition IEP. The State monitors the STARS system until each required component is completed. Step 2 is completed when all students identified as having non-compliant transition IEPs have each of the 8 components included in their IEPs. Each IEP for the 4 LEAs contained all 8 components and therefore each individual case of non-compliance was determined to be corrected within the OSEP required timeline.

Since the submission of the SPP/APR on February 1, 2022, the State has verified that each individual case of noncompliance was corrected by the 1 LEA initially indicated in the findings not yet verified category above. The State has moved the 1 LEA from the "Findings Not Yet Verified as Corrected" column to the "Findings of Noncompliance Subsequently Corrected" column above. The State has subsequently verified individual case of noncompliance correction as follows:

The State verified that each individual case of noncompliance was corrected. The State used a two-step process for verifying that each individual case of noncompliance was corrected. First, the State reviewed the Indicator 13 Summary Report generated by the STARS system, to obtain a list of students that did not have each of the eight components of Indicator 13 completed.

Second, the State reviewed the Indicator 13 Summary Report to determine if each component required is present on each IEP. If the completion date for each required component is in the STARS system, the individual case of non-compliance is considered as corrected. If the date for each required component is not in the STARS system, the State contacted the LEA and requested the status of the transition IEP. The State monitors the STARS system until each required component is completed. Step 2 is completed when all students identified as having non-compliant transition IEPs have each of the 8 components included in their IEPs. Each IEP for the LEA contained all 8 components and therefore each individual case of non-compliance was determined to be corrected within the OSEP required timeline.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

13 - Prior FFY Required Actions

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

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 SPP/APR

13 - OSEP Response

13 - Required Actions

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

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

Data Source

State selected data source.

Measurement

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

Instructions

Sampling of youth who had IEPs and are no longer in secondary school is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See [General Instructions](#) on page 2 for additional instructions on sampling.)

Collect data by September 2021 on students who left school during 2019-2020, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2019-2020 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. Definitions

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

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

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

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

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

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

II. Data Reporting

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

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

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

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

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

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

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

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

III. Reporting on the Measures/Indicators

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

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

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

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

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

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

Beginning with the FFY 2021 SPP/APR, due Feb. 1, 2023, when reporting the extent to which the demographics of respondents are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, States must include race/ethnicity in its analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2020	Target >=	49.00%	49.00%	49.00%	49.00%	49.00%
A	30.28%	Data	42.85%	41.13%	40.01%	36.80%	35.61%
B	2020	Target >=	76.00%	76.00%	76.00%	76.00%	76.00%
B	69.53%	Data	75.34%	76.39%	75.47%	73.08%	74.81%
C	2020	Target >=	80.00%	80.00%	80.00%	80.00%	80.00%
C	76.91%	Data	81.37%	80.94%	82.82%	77.76%	79.42%

FFY 2020 Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	30.28%	30.78%	61.56%	62.56%	63.06%	65.06%
Target B >=	69.53%	80.00%	81.00%	82.50%	84.50%	87.00%
Target C >=	76.91%	77.41%	77.91%	78.91%	80.41%	82.41%

Targets: Description of Stakeholder Input

On March 4, 2021, the State held the first targeted stakeholder meeting of the six-meeting series. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicators 1. Graduation, 2. Dropout and 14. Post School Outcomes and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the state’s performance to the targets.

The group considered the impact the COVID-19 pandemic would have on state graduation, dropout and post-school outcome rates. In regard to post-school outcomes, an important issue considered was students with disabilities may choose to not enter the work force due to the health risks of the pandemic. Also, colleges and universities may be holding classes online which may pose a challenge for students with disabilities thus more students may choose to not enter college or a university, until there is a return to in-person classes. Stakeholders agreed that the potential effects and the future impact of the pandemic be considered in establishing targets over the next couple of years.

Overall, there was some debate about not making the rates overly ambitious due to the pandemic while expecting some growth to occur. It was recommended for the target rates to show little to no growth over the first few years. Lowering the targets will allow for the State to close the current large gap between rates and targets.

Based on the information shared by stakeholders, the State is electing to close the gap between the target and state data and holding the targets low for the package period. The team will meet again in the spring of 2022 to revisit the targets and review the data to make adjustments as necessary for these three indicators.

FFY 2020 SPP/APR Data

Total number of targeted youth in the sample or census	2,631
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,572
Response Rate	59.75%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	476
2. Number of respondent youth who competitively employed within one year of leaving high school	617
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)	37
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).	79

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Enrolled in higher education (1)	476	1,572	35.61%	30.28%	30.28%	N/A	N/A
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,093	1,572	74.81%	69.53%	69.53%	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)	1,209	1,572	79.42%	76.91%	76.91%	N/A	N/A

Please select the reporting option your State is using:

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

Response Rate

FFY	2019	2020
Response Rate	59.03%	59.75%

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

This year's survey included a direct online response option which can be attributed to the increase in the response rate compared to the previous year. This was a pilot year for the online survey, which will be available to all LEAs as a reporting option for the FFY2021 survey. Although all LEAs were alerted and invited to use the online survey, only three chose to use it in this reporting period. The great majority selected to survey students by phone and entered the data on a database.

The roll-out of the survey proved to be difficult this year due to the restraints of the COVID-19 pandemic. It is anticipated that the direct online survey will have a large impact on addressing under-representation in the coming reporting year as it will not be an option for use but a requirement. First, students will be offered the online survey. Second, students that do not complete the online survey will be contacted by LEA staff and asked to complete the survey over the phone with the staff person. This will ensure that we are following-up and allowing all students the opportunity to participate. Prior to the end of the school year, we will ask LEA staff to confirm student contact information. Starting in FFY 2021, the State began collecting data on student's plans for after high to use as another data point to determine if students are doing what the originally planned to do before they left high school and to determine any barriers between their plans and the outcome. In addition a training by the State for LEAs will be conducted to ensure the staff understand the process for the survey completion including the definition of competitive employment. The State is also considering changing the data collection window to ensure that staff are on contract are available to complete the tasks associated with this indicator and will review the survey to ensure that it is still meeting our needs.

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.

Response rate were analyzed by race/ethnicity and disability category. During the data analysis, it was noted that students with the emotional disturbance exceptionality have a low response rate. Despite efforts made to improve responses, this issue persists in this year's survey. The disparity in response has however decreased slightly from previous years. Analysis has revealed this group of students are difficult to reach due to high number of students who drop-out in comparison to students with other exceptionalities where the main exit reason is graduation.

In the analysis of response rates, it was also noted that three additional categories are noted to have a discrepancy in response rates. First, Hispanic student response rates were 6.8% lower than the state data. The disparity is likely due to a large district with a high percentage of Hispanic students that did not report in time to include in the analysis. Second, Native American response rates were 6% higher than state data likely due to the efficiency of data collection in three large districts with the highest rates of Native American students. Third, the response rate for students with the specific learning disability exceptionality, was 4.1 percentage points higher than state data. This is possibly due to a higher percentage of students in this category that could be reached on their personal phones to conduct the survey.

LEAs that are late in reporting or that did not report information for all students that exited are notified during the reporting window. The State is confident that in the future aggressive marketing to LEAs and the full implementation of the online survey will improve response rates, ensure representative responses and will diminish the impact of the issues founding during the response rate analysis.

Below are the steps that have been taken or will be 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:

1. Students will be offered the online survey.
2. Students that do not complete the online survey will be contacted by LEA staff and asked to complete the survey over the phone with the staff person. This will ensure that we are following-up and allowing all students the opportunity to participate.
3. Prior to the end of the school year, we will ask LEA staff to confirm student contact information.
4. Starting in FFY 2021, the State began collecting data on student's plans for after high to use as another data point to determine if students are doing what the originally planned to do before they left high school and to determine any barriers between their plans and the outcome,
5. A training by the State for LEAs will be conducted to ensure the staff understand the process for the survey completion including the definition of competitive employment.
6. The State is also considering changing the data collection window to ensure that staff are on contract and are available to complete the tasks associated with this indicator.
7. Review the survey to ensure that it is still meeting our needs and that it is not difficult to understand or have too many components.

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.

All categories except those noted in the previous section demonstrated consistency between the demographics of the youth that completed the post-school outcomes survey and the demographic data in the state's STARS database. This indicates a representative sample was partially reflected in the majority of responses received.

The percentages in the underrepresented categories were small and it is anticipated that the issues will be successfully addressed in the next APR.

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.

Below are the steps that have been taken or will be 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:

1. Students will be offered the online survey.
2. Students that do not complete the online survey will be contacted by LEA staff and asked to complete the survey over the phone with the staff person. This will ensure that we are following-up and allowing all students the opportunity to participate.
3. Prior to the end of the school year, we will ask LEA staff to confirm student contact information.
4. Starting in FFY 2021, the State began collecting data on student's plans for after high to use as another data point to determine if students are doing what the originally planned to do before they left high school and to determine any barriers between their plans and the outcome,
5. A training by the State for LEAs will be conducted to ensure the staff understand the process for the survey completion including the definition of competitive employment.

6. The State is also considering changing the data collection window to ensure that staff are on contract and are available to complete the tasks associated with this indicator.
7. Review the survey to ensure that it is still meeting our needs and that it is not difficult to understand or have too many components.
8. Ensure the survey is available in other languages, i.e., Spanish and English.
9. Prior to the student leaving, remind the students they will be contacted in a year.

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

The metric used to determine representativeness was +/- 3% discrepancy in the proportion of responders compared to target group.

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

Provide additional information about this indicator (optional)

The State is proposing new baselines for indicators 14A, 14B and 14C although a change in methodology or data source by either OSEP or the State was not made. To adjust for the impact the pandemic has had on post-school outcome rates and how the data has been trending for students with disabilities, the State is proposing the establishment of a new baselines, Without this reset, it will take the State several years to make enough gains to close the gaps between the targets and baselines, Currently, the State is making improvements with this indicator which will bring about improved outcomes for students with disabilities and thus improved rates, Finally, the State has numerous plans for improving as noted in the Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented section which will have an impact on the rates for this indicator which further support the baseline change.

14 - Prior FFY Required Actions

None

14 - OSEP Response

The State has revised the baselines for this indicator, using data from FFY 2020, and OSEP accepts those revisions.

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

14 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

15 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1 Number of resolution sessions	0
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1(a) Number resolution sessions resolved through settlement agreements	0

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

On April 8, 2021, the state held the final targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 15. Resolution Sessions and Indicator 16 Mediations and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the state's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on resolution session and In school year 2020-2021, eight out of the ten months of school were held virtually. Due to the online learning, it was anticipated the number of resolution sessions and mediations would increase as LEAs and parents work to resolve issues which may arise due to the pandemic.

It was recommended by the stakeholder group that the team meet again in the spring of 2022 to revisit the ranges and review the data to make adjustments as necessary for these indicators.

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2015	2016	2017	2018	2019
Target >=	55.00% - 70.00%	55.00% - 70.00%	55.00% - 70.00%	55.00% - 70.00%	55.00%-70.00%
Data	100.00%	100.00%		100.00%	100.00%

Targets

FFY	2020 (low)	2020 (high)	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	55.00%	70.00%	55.00%	70.00%	55.00%	70.00%	55.00%	70.00%	55.00%	70.00%	55.00%	70.00%

FFY 2020 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2019 Data	FFY 2020 Target (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
0	0	100.00%	55.00%	70.00%		N/A	N/A

Provide additional information about this indicator (optional)

The State will not be setting a new baseline for this indicator because OSEP does not require a baseline change unless there is a change in methodology or data source by either OSEP or the state. The State and OSEP did not make any changes to the methodology or data source; therefore, the State will not establish a new baseline. Targets for FFY2020 to FFY2025 are required and have been established but have not changed from previous years.

15 - Prior FFY Required Actions

None

15 - OSEP Response

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

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	24
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	9
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	8

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

On April 8, 2021, the State held the final targeted stakeholder meeting of the series of six targeted stakeholder meetings held. The meeting was held via Zoom due to the COVID-19 pandemic; meeting information including the Zoom links were made available on the Special Education Division website. Parents, parent advocacy groups and interested stakeholders were encouraged to participate. This group focused on Indicator 15. Resolution Sessions and Indicator 16 Mediations and engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress for these specific indicators. Historical data from the past six years was reviewed and compared the State's performance to the targets.

The group considered the impact the COVID-19 pandemic would have on resolution session and In school year 2020-2021, eight out of the ten months of school were held virtually. Due to the online learning, it was anticipated the number of resolution sessions and mediations would increase as LEAs and parents work to resolve issues which may arise due to the pandemic.

It was recommended by the stakeholder group that the team meet again in the spring of 2022 to revisit the ranges and review the data to make adjustments as necessary for these indicators.

Historical Data

Baseline Year	Baseline Data
2005	61.30%

FFY	2015	2016	2017	2018	2019
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00%-85.00%
Data	72.50%	78.05%	68.29%	71.43%	69.57%

Targets

FFY	2020 (low)	2020 (high)	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%

FFY 2020 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2019 Data	FFY 2020 Target (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
9	8	24	69.57%	70.00%	80.00%	70.83%	Met target	No Slippage

Provide additional information about this indicator (optional)

The State will not be setting a new baseline for this indicator because OSEP does not require a baseline change unless there is a change in methodology or data source by either OSEP or the state. The State and OSEP did not make any changes to the methodology or data source; therefore, the State will not establish a new baseline.

In 2005, when the current target was last set, the baseline was 61.30. The target set was 75-85%. Since that time, the percentage of mediations that resolve in mediated agreements has increased. Between 2016 to 2020, that percentage has ranged from 68.29 % to 78.05 % with the most recent year (2020) being 70.83%. Experience has shown that due to variables, including the nature of the issues in dispute and the positions of the parties and their representatives, a more realistic target for cases that resolve in mediation is a target range of 70 - 80%, this is the reason the State has decided to establish FFY 2020–2025 targets that are lower than the targets that were established from FFY 2016–2019. This new range will continue to allow for PED to continue to improve its mediation system and strive to consistently reach the target range.

In FFY 2020 the State had a rise in systemic complaints related to the impact the pandemic has had on students with disabilities. In at least 4 of these systemic complaints, the issues concerned provision of FAPE to students with disabilities as impacted by the pandemic. Systemic cases were not mediated by the complainants, who were not parents. To mitigate the impact of the pandemic, the State provided continued supports and guidance to LEAs on meeting the IDEA B requirements during the pandemic. The State also a Parent Liaison available within the Special Education Division to support parents in navigating the dispute resolution systems.

16 - Prior FFY Required Actions

None

16 - OSEP Response

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

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2, 2022, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., Feb 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

17 - Indicator Data

Section A: Data Analysis

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

New Mexico's State Identified Measurable Result (SiMR) is: Increase the reading proficiency of students with disabilities in second grade, as measured by statewide-standardized reading assessments.

Currently, New Mexico's statewide-standardized reading assessment is Istation's Indicators of Progress (ISIP) which is a formative computer adaptive assessment that reflects the reading ability level of each student and measures growth over time. Istation is administered three times per year: beginning of year (BOY), middle of year (MOY), and end of year (EOY).

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.

The New Mexico State Systemic Improvement Plan (SSIP) went through a process of many system analysis activities to change the State Identified Measurable Result (SiMR). First, two data sets were gathered; specifically, the 2018-2019 End of Year (EOY) and 2019-2020 Beginning of Year and Middle of Year (BOY and MOY). Next, the previous SiMR from the former Reading Achievement Math and School Culture (RAMS) program was reviewed. There were significant challenges with the former RAMS program SiMR: 1) the SiMR had not been revised based on data, and 2) the SiMR had not been adjusted when the Istation assessment moved from three levels of proficiency to five levels of proficiency. As a team, we identified two factors: time and the effects of COVID in developing a new SiMR. One factor was time; we had to project our progress over five years. Another factor was weighing our SiMR growth against the context of the COVID-19 pandemic and the complex effects on teaching and learning. The next step involved revising the SiMR based on all the previous mentioned steps. The New Mexico Special Education SiMR for Indicator 17 will be implemented for the 2021-2022 school year. Lastly, data will be reviewed and analyzed to determine adjustments as needed for each year's percentage proficiency of the SiMR.

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

First, official Accountability data from EOY Istation of SY 2018-2019 was reviewed. Next, Istation official data from school year (SY) 2019-2020, specifically BOY and MOY, second grade special education students, by district from New Mexico's Public Education Department (NMPED) Accountability department was analyzed. Lastly, unofficial Istation data collected from a Regional Education Cooperative (REC) from school year 2020-2021 was reviewed.

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

The Excellence from Coaching In Literacy for Intensive Preparation in Special Education (ECLIPSE) Special Education team went through an internal decision making process to change the SiMR. First, the team recognized that the former RAMS program SiMR needed to be changed; former RAMS program did not focus on students with disabilities (SWDs). Additionally, the former RAMS program did not adjust the SiMR when Istation moved from three levels of proficiency to five levels of proficiency. The ECLIPSE program (Indicator 17) was established in the Special Education Division in May 2020. The SiMR needed to be adjusted since the ECLIPSE program had undergone significant development in the Special Education Division. (These changes are addressed in subsequent sections.) Next, the internal team discussed the stakeholder comments from the three stakeholder events (described below). Then data was analyzed from the EOY Istation of SY 2018-2019. Also, data was analyzed from the BOY and MOY Istation of SY 2019-2020; data showed 12% proficiency of second grade SWDs at BOY and 12.4% proficiency of second grade SWDs at the MOY time period. Overall, there was a .4% growth from the BOY to the MOY. Additionally, school year 2020-2021 unofficial Istation data from the REC was reviewed; the unofficial data showed an EOY proficiency at 16.5%. The next step involved a discussion around the COVID-19 pandemic impacts on the data for the upcoming school years. Our final step was to establish percent proficiency targets for each of the upcoming years. Due to the COVID-19 impact on our data, we were conservative in determining our SiMR progress targets.

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

Three stakeholder events were held to gain feedback regarding changing the SiMR. First, Individuals with Disabilities Education Act (IDEA) Panel members, a diverse group of parents, advocates, and educators provided SiMR feedback. The IDEA Panel members reviewed BOY and MOY 19-20 Istation data, based on this data recommendations were made. Second, at the ECLIPSE all stakeholder meeting, special education directors, principals, and teachers responded to a survey following the stakeholder meeting. Third, SiMR feedback was solicited at a parent/family literacy night. Parents responded to a survey at the end of the literacy night.

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

YES

Provide a description of the subset of the population from the indicator.

The subset of the population for indicator 17 is: Second grade students with disabilities at the forty ECLIPSE schools.

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 New Mexico Special Education (Indicator 17) ECLIPSE program has undergone significant development since it was moved from Title 1 in May 2020. Specifically, the theory of action has been refined to reflect the ECLIPSE program in the Special Education Division. The updates to the theory of

action include: 1) The vision for the ECLIPSE program is: All students with disabilities in New Mexico are engaged in high quality curriculum and instruction that leads to the development of lifelong literacy skills 2) In our fourth belief statement, the wording has been updated to include instructional coaching. It now states: Effective instructional coaching and professional development can change teaching behaviors and student outcomes 3) There are two updates to Inputs-Phase 1 Exploration. a) we added: Collaborating for Outstanding Readiness in Education New Mexico State University (CORE NMSU) Instructional Coaches b) to the stakeholders we added: Principals and Special Education Directors. In the Activities-Phase II Planning, there are two updates: a) the wording is now- targeted assistance b) instructional coaching 4) There are two updates to Outputs-Phase III Deployment: a) changes in educator mindsets to a growth mindset b) more resources to support student improvement. There is one update to Impacts-Phase IV: Refinement a) academic gains for students with disabilities. Additionally, the ECLIPSE team updated the logic model to coincide with the theory of action refinements. For example, logic model updates included: wording changed to targeted assistance, the former program name was removed, and the focus of the former program was removed.

Please provide a link to the current theory of action.

<https://webnew.ped.state.nm.us/bureaus/special-education/eclipse/>

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

NO

If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.

The Theory of Action and Logic Model have been updated for the February 2022 submission, Federal Fiscal Year (FFY 2020). An update to the Theory of Action was required since the former RAMS program (Title 1 administered) moved to the Special Education Division in May 2020. The ECLIPSE program (Special Education administered) indicator 17 program has undergone significant changes to address improving students with disabilities outcomes.

As stated in the FFY 2019 SSIP submission, the IDEA Panel made recommendations for moving the former RAMS program (Title 1) administered to the Special Education Division. The move of the Indicator 17 program to the Special Education Division was completed in May 2020. As stated in the FFY 2019 submission, the move to special education will focus on students with disabilities outcomes and their growth toward reading proficiency as aligned to the revised SIMR. Therefore, the revised SIMR for the FFY 2020 submission: Increase the reading proficiency of students with disabilities in second grade, as measured by statewide standardized reading assessments.

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
2019	12.40%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target>= =	16.50%	16.50%	17.00%	17.60%	18.60%	20.10%

FFY 2020 SPP/APR Data

2nd grade SWD students in ECLIPSE schools proficient	total 2nd grade SWD students in ECLIPSE schools	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
36	218		16.50%	16.51%	Met target	N/A

Provide the data source for the FFY 2020 data.

Only unofficial FFY 2020 data was available due to the impact of the COVID-19 pandemic. Our REC partners collected unofficial (not through New Mexico Public Education Department Accountability) Istation BOY and EOY data for the 2020-2021 school year (SY). Many students were allowed to take their Istation assessments BOY and EOY in their home environments with the possibility of assistance; since, most of the 20-21 SY students received their instruction via online platforms. The reliability and validity of this unofficial data is an issue. Further, not all ECLIPSE schools administered Istation due to the pandemic and being in online environments most of the school year.

Statewide New Mexico allowed schools and districts to opt-in to administer end-of-year standardized tests, creating a sample of data to identify where students stood academically after a year of non-traditional education. Results from optional testing would not be used to make important decisions about students, educators, schools, or districts, thus reducing the stakes -- and stress -- for students and educators. School districts were asked to participate voluntarily in assessments so there would be a representative sample showing student performance.

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

In non-pandemic years, official Istation data would be obtained from the New Mexico Public Education Accountability department. Specifically, BOY and EOY Istation data would be analyzed. Data from the BOY and EOY time periods would be analyzed for each school in the ECLIPSE program. The overall analysis toward the SIMR targets for each school would include the growth or decrease in proficiency of literacy performance for students with

disabilities in K-3 on the Istation assessment (or other approved assessment). Specifically, second graders with disabilities at the forty ECLIPSE schools would also be analyzed. Then, an average percent proficiency for the forty schools would be determined. The average percent of proficiency for the entire ECLIPSE program would then help us to determine if a specific target had been met toward the SiMR.

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

NO

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

NO

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

YES

If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.

Because of the COVID-19 pandemic, New Mexico students were in online learning environments from August 2020-early April 2021. In early April 2021, the secretary of education for the state requested that all students return to in-person classrooms. As a result of this late in the year return to the classroom, the State allowed LEAs to elect to opt-in or opt-out from administering end-of-year standardized assessments. The data collected would be used to create a sample of data, i.e. a benchmark, to identify where students stood academically after a year of non-traditional education. In a memorandum from the State to LEAs dated February 9, 2021, the State assured LEAs that results from the benchmark academic achievement optional assessments administered, would not be used by the State to make important decisions about students, educators, or LEAs.

LEA's voluntary participation in formative assessments created a representative sample that provided a glimpse of student performance. The ECLIPSE K-3 students with disabilities participation rate was 35%. 65% of eligible students did not take the Istation end of year formative assessment in 2021. The sample of 239 students out of 682 eligible students is representative of the ECLIPSE program's student population of participating schools. Participating schools were of varying sizes, throughout the state. Typically, this measure would be statistically unreliable, as a sample size of 95% would be required for a standardized or formative assessment. The term valid and reliable previously reported by the State was interpreted by OSEP as a failure, while the intent of the language was to communicate that the data did not meet the definition for statistically valid and reliable data due to the limited participation as a consequence of the COVID-19 pandemic.

The State's mitigation efforts for the impact of COVID-19 on the data collection was to obtain formative assessment data from the Regional Education Cooperative (REC). The REC works directly with LEAs and uses this data to drive support efforts. The REC provided the State with a detailed spreadsheet identifying each program participating school's data. The assessment data was received directly from schools and was provided to the State in a timely manner. This allowed State ECLIPSE program staff to analyze the data and to guide program efforts and activities.

Section B: Implementation, Analysis and Evaluation

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

<https://webnew.ped.state.nm.us/bureaus/special-education/eclipse/>

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

YES

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

The ECLIPSE (Indicator 17) program of the Special Education Division (SED) has undergone significant development since May 2020. The former RAMS program (administered by Title 1) was merged and redeveloped in the Special Education Division (SED). The former RAMS program had an evaluation plan titled: Coherent Improvement Strategies Evaluation Plan. The major headings of the former RAMS evaluation plan were addressing: ongoing professional development, onsite coaching services, school mini grants, and school site visits. The ECLIPSE program of the SED has an evaluation plan titled: Implementation-Evaluation Plan. The ECLIPSE evaluation plan is a more specific and detailed plan focusing on all key deliverable activities of the indicator 17 program to support the SiMR and students with disabilities. The major headings of the ECLIPSE Implementation-Evaluation plan include: planning/operational activities, data analysis, school support services, and stakeholder engagement.

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

Since the former RAMS was moved to the SED in May 2020, the entire Indicator 17 program has been reimaged and developed into a program solely focused on supporting literacy outcomes for K-3 students with disabilities. This transition is based on coordinating the program focus with a statewide literacy initiative based on Structured Literacy instructional methods. The ECLIPSE team and the SED staff leverage their special education teaching experience and special education knowledge to provide a state systemic improvement plan that is not only comprehensive but also achievable. The ECLIPSE team's Implementation-Evaluation plan engages all stakeholders in the ECLIPSE program.

Additional changes resulted from the development of a strategic plan based on an internal program evaluation. Beginning in February 2021, the SED team began to evaluate the program. We used a variety of analytical tools [such as Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis, fishbone diagrams and interrelationship diagrams] to evaluate the efficacy of the program and identify improvement changes. Using the fishbone diagram, we identified four major categories for improvement: data analysis, curriculum and instruction PD, stakeholder engagement, and communication.

Within the category of data analysis, we identified issues at the student and program levels. For example, at the student level, we had no data from Istation test scores due to COVID. Moreover, using one source of school data limited our ability to triangulate the data with other qualitative and quantitative data, including summative and formative student assessments. In addition, during COVID, we had limited contact with school participants. For example, we were unable to visit schools to conduct site visits. Instead, we relied on our contracted support specialists to relay qualitative data about the progress they witnessed during their virtual visits. However, while some problems were COVID-related, others were partially due to the transition to the SED in May 2020. For example, we reviewed the site visit tool that was developed and used when the program was housed in the Title 1 division. While we saw that it was comprehensive, we found it complicated. Feedback from participants suggested schools felt the tool painted an inaccurate picture of teaching and learning at schools, and contracted school evaluators found the tool difficult to use. At a programmatic level, we found few metrics that were being used to monitor the overall health and direction of the program. For example, while there was a plethora of data contained in coaching logs, invoices, and technical assistance logs, those resources had not been analyzed. The data within them included valuable information about how contractors were supporting participating schools, and were critical in informing programmatic decisions. Thus, analyzing existing data

sources and linking them to program indicators became a priority.

Another area of concern lay within curriculum and instruction. The previous iteration of the program had a broad scope of improvement goals for behavior, school culture, literacy, and math. Data from stakeholder surveys suggested participants were confused about the purpose of the program due to the breadth of intervention areas. In addition, teachers and administrators expressed frustration that various NMPED programs were overlapping, yet had disparate requirements. Finally, literacy specialists on our SED team voiced concerns with instructional methodologies that were being supported by contracted coaches. Namely, coaches were reinforcing strategies founded in balanced literacy methods, contradicting the statewide initiative to adopt Structured Literacy (SL). As part of the initiative, all K-2 teachers were receiving professional development in Language Essentials for Teachers of Reading and Spelling professional development (LETRS PD), which is grounded in Structured Literacy (SL). Our contracted coaches, however, were not reinforcing the skills and concepts teachers were learning in their LETRS training. This was partially due to the fact that the majority of coaches had not received the LETRS training.

Data analysis also suggested that stakeholder engagement was an area of concern. As previously discussed, stakeholders were confused about the purpose of the program. In addition, we identified misaligned perceptions of the program's intentions between various groups of stakeholders. While the SED team envisioned a program that was supportive, many of the contractors, who had worked with previous iterations of the program, saw their roles as evaluative. School staff felt the purpose of the program was punitive. A fishbone analysis of the data suggested a lack of trust and limited collaboration between school staff, contractors, and the SED team.

Finally, communication emerged as a root cause of the many of the issues we uncovered. Again, the lack of communication was a by-product of COVID and the transition to SED. Protocols needed to be developed and implemented, roles and responsibilities needed to be defined, and collaborative relationships needed to be built. All of these actions were dependent upon transparent communication between the SED team and stakeholders.

Based on the results of our program evaluation, we developed a strategic plan with short-term, intermediate, and long-term goals. Goals are aligned with the infrastructure categories mentioned previously: planning/operational activities, data analysis, targeted assistance, school support services, and stakeholder engagement. Due to the timing of the internal evaluation (February – summer 2021), the majority of the improvement changes were not implemented in this reporting period. We will further examine the strategic plan goals and actions in "next steps."

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

As previously discussed, the major categories of the infrastructure improvement strategy include planning/operational activities, data analysis, targeted assistance, school support services, and stakeholder engagement. Due to limitations imposed by pandemic conditions, the majority of activities were conducted virtually. During this reporting period, systems and protocols were developed to support a return to in-person activities once pandemic safety concerns have receded.

1. **Planning/Operations Activities:** From May 2020 – December 2020, the ECLIPSE SED team focused on facilitating the transition from Title 1 to SED. This transition included the transfer of a key staff member from Title 1 to SED. This transfer was essential in maintaining program operations, as the staff member had extensive knowledge of the previous RAMS operations. That period was also a time in which the rest of the SED team learned about operations. Once they had learned about how the program operated, they could begin to identify problem areas and develop improvement strategies. For example, one area of improvement was the need to hire additional team members. In January 2021, a curriculum specialist with expertise in literacy development and data analysis was hired to support the ECLIPSE team. Once the additional team member was hired, the SED team conducted the program evaluation (described in the previous section) to build a strategic plan.
2. **Data analysis** was conducted at a school level and at a programmatic level.
 - o At the school level, the Regional Education Cooperative (REC) provided each ECLIPSE with data based on student Istation scores that had been collected prior to the pandemic. REC also collected and analyzed BOY and EOY formative data from participating schools.
 - o At the programmatic level, data was collected and analyzed with a variety of technical tools, including Excel and Tableau. Based on the results of programmatic data analysis, a strategic plan was developed.
3. **Support for schools** was provided via a variety of services.
 - o Specific targeted assistance was provided by the REC to schools based on individual school requests. Topics of assistance included behavior management, differentiation strategies, data literacy, IEPs, and instructional strategies.
 - o Professional Development: Teacher professional development (PD) was provided via six webinars, titles included: Collaborating for Student Success for Students on IEP's, Together is Better, Actively Engaging Students, Maximizing Student Learning, In-Sync teaching, and Daily Opportunities for Academic Interventions. All webinars focused on many aspects of teaching students with disabilities.
 - o In addition, needs based school allocation focused on PD for special education teachers and materials/supplies targeting students with disabilities (SWDs). Fund allocation reports were reviewed monthly to determine spending.
 - o Instructional Coaching: ECLIPSE contracted with Collaborating for Outstanding Readiness in Education, New Mexico State University (CORE NMSU) to provide 20 instructional coaches to support literacy instruction. Coaching logs were revised to better align with improvement criteria. In addition, methods for sharing coaching logs were upgraded, resulting in improvements in streamlining the invoicing system & in analyzing data to identify coaching topics. These changes increased efficiency in accounting systems & improved responsiveness to teachers' coaching needs.
4. **Stakeholder Engagement:** Stakeholder engagement focuses on family engagement, school team participant engagement, community engagement, and contracted support specialists engagement (i.e. coaches).
 - o Parent/Family Engagement: ECLIPSE support specialists provided ongoing literacy training for parents/families and schools on effective family literacy engagement. REC provided hands-on literacy family engagement training at each ECLIPSE school.
 - o School Level: School Implementation Partner (SIP) to work directly with CORE coaches and REC support specialists. In most cases, SIPs are K-3 special education teachers. SIPs attended virtual gatherings with CORE coaches and directors.
 - o Community Level: Select community representatives gathered as members of the IDEA B panel four times during the reporting period. During these meetings, the ECLIPSE team gave presentations focused on strategic planning based on data analysis. Committee members provided feedback following the presentations. Their feedback was considered in the ongoing strategic planning.
 - o Contractors: Engagement with contracted specialists occurred in a number of ways including regular meetings, emails, and phone/text conversations.
 - o Collaborative Conversations: To support the transition to SED, regular meetings were held internally and with stakeholders. We implemented internal processes to facilitate collaboration, such as using google docs to co-develop protocols.

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.

1. Planning/operational activities: An intermediate outcome included the development of the strategic plan. This step was foundational to ensure program success because it encompassed all areas of the systemic framework, including governance, data, finance, staffing, accountability/monitoring, quality standards, professional development and technical assistance. Another significant short-term outcome was transferring a PED staff member from Title 1 to SED to ensure program continuity during the transition. The intermediate outcome of developing an ECLIPSE team, including hiring an additional staff member, was the development of the strategic plan.

2. Data Analysis:

o On a school level, data analysis conducted by the REC supported data and accountability/monitoring of the systems framework. Short-term outcomes were that the REC supported ECLIPSE schools by assisting them in analyzing data. Schools used that data to make appropriate instructional decisions on school levels, classroom levels and individual students levels. These decisions impact progress towards achieving the SIMR. An intermediate outcome of data analysis is that school teams develop their own data literacy, moving towards long-term goals of sustainability of their systems improvement efforts.

o On a programmatic level, data analysis had short-term and intermediate outcomes that impacted the internal processes and the development of the strategic plan. For example, one short-term outcome was that data from coaching logs suggested CORE NMSU logs needed to be modified to yield more accurate data about coaching topics. An intermediate outcome was analysis of a variety of data sources (stakeholder surveys, interviews, notes from meetings) identified a need to be more explicit about the program vision, mission, values, and goals.

3. Support for Schools:

o Targeted Assistance: Targeted assistance provided by the REC supported the data and technical assistance areas of the systems framework. Data from coaching logs, technical assistance logs, teacher and administrator surveys, and teacher interviews indicated that short-term outcomes of targeted assistance impacted classroom and school level instructional decisions. For example, several schools requested targeted assistance with differentiation strategies. REC specialists provided support to teams of teachers, and teachers implemented the strategies. Follow-up interviews with teachers revealed they felt the targeted assistance helped them differentiate instruction with all students, but particularly with students with disabilities in the general education environment. This supported progress towards the SIMR. Again, once an ECLIPSE school received targeted assistance over time, the goal for the school was to move to a long-term goal of sustainability of their systems improvement efforts.

o Professional Development: Teacher PD was related to professional development and data in the broad systems framework. Similarly, to targeted assistance, short-term outcomes included a deeper level of teacher knowledge, and supported the intermediate outcome of the implementation of learned strategies. CORE NMSU and the ECLIPSE SED team wanted to ensure that special education teachers were receiving needed professional development to support teachers' improvement of practice, which can support a schools achievement of the SIMR. Post PD surveys were utilized to provide feedback to CORE NMSU as well as the ECLIPSE program. Overall, feedback was favorable, & teachers indicated they benefited from the PD. As all special education teachers of a school achieve the ECLIPSE program PD goals, then a school will move toward sustainability.

o The needs based school allocation directly impacted special education teachers and their students with disabilities. The ECLIPSE program placed needed materials/supplies in the hands of special education teachers to support students in structured literacy. The needs based allocation also supported teachers in receiving PD which in turn helps students. Accountability/monitoring, data, finance, and professional development are all part of the systems framework of needs based school allocations.

o Instructional Coaching: Online instructional coaching supported special education teachers with implementing new strategies and allowed for reflection of personal teaching practice to improve outcomes for students with disabilities in literacy. Online instructional coaching was also related to professional development and data in the systems framework. Data collected from teacher interviews, coaching logs, and stakeholder surveys suggested that a short-term outcome was teachers felt supported during a particularly difficult school year. An intermediate outcome included more effective implementation of learned strategies. For example, some coaching sessions focused on teaching remotely with technology devices such as Swivl cameras and iPad. Coaching logs revealed that teachers needed several coaching sessions to learn how to operate the devices. The intended outcome of instructional coaching is to change adult behaviors to better support the needs of students with disabilities which in turn can lead to a schools achievement of the SIMR as well as sustainability of the system within the school. Updating the coaching logs and streamlining the invoicing system was a part of accountability/monitoring in the systems framework. Accountability/monitoring is a requirement of the ECLIPSE program and is also part of federal reporting to OSEP necessary in the sustainability of systems improvement efforts.

4. Stakeholder Engagement

o Parent/Family Engagement: Ongoing literacy training for parents/families and schools is related to data and accountability/monitoring in the systems framework. Once a parent has attended a literacy event, the REC provided hands-on supplies so the family could support their child's literacy at home. The home environment in addition to the school environment is necessary in supporting a child's literacy achievement. This infrastructure improvement strategy supports the achievement of the SIMR at the ECLIPSE school. Post-event feedback surveys indicated families felt better prepared to support students at home.

o School Level: A short-term outcome of SIP gathering was increased social-emotional health of participating teachers. Post-event feedback surveys from SIP gatherings indicated SIPs appreciated the support and collaborative opportunities of the SIP gatherings. For example, many shared that they were feeling isolated (from other special educators) during COVID. SIP gatherings gave them the opportunity to speak with other special educators across the state, share strategies, and provide much-needed emotional support. The short-term impact of social-emotional well-being leads to a long-term sustainability goal. Teacher retention, particularly in special education, is a critical component of sustainability.

o Community Level: IDEA B committee members provided verbal feedback to the ECLIPSE team following presentations. Their feedback was considered in the ongoing strategic planning, including the revision of the SIMR. A short-term outcome was a draft of the SIMR. However, when the team shared the drafted SIMR with other stakeholders, their feedback was that the SIMR was too robust and not achievable, given the circumstances of COVID. An intermediate outcome of the discussion surrounding the SIMR was the opportunity to engage with other stakeholders in the SIMR revision. These discussions led to the development of a more realistic and attainable goals

o Contractors: The verbal and written interactions between the SED ECLIPSE team and contractors revealed that emphasis needed to be placed on engaging more effectively with contractors to ensure that all service providers were consistent in program philosophies and messaging. This topic became a short-term improvement plan for "next steps."

Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)

YES

Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

Collaborative Conversations. Data from a variety of sources (including surveys, interviews, observations, and meeting notes) suggested that a stronger emphasis needed to be placed on collaboration to build trust and relationships with stakeholders. As such, beginning in spring 2021, we began to focus

on changing the tone of meetings to be more collaborative. A short-term outcome of this strategy resulted in a clearer understanding of the problems rooted in poor communication. That knowledge supported intermediate goals that are described in "next steps." Stronger communication is essential in ensuring sustainability in program success.

Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.

We plan to continue our strategic plan, as outlined in the following steps. We are maintaining a flexible mindset (dependent upon COVID conditions) about whether we will conduct meetings and/or offer support services in-person or remotely.

Planning/Operational Activities:

Evaluator (August/September 2021): We will hire a program evaluator to address improvement strategies. We anticipate short-term & intermediate outcomes will include maintaining timelines, improving data collection & analysis, and identifying areas of development. Long-term, we anticipate working with evaluators will increase sustainability and improve progress towards the SIMR.

Roles & Responsibilities (Fall 2021): A weakness is poorly defined roles and responsibilities of contractors resulting in conflict between contractors and confusion within school teams. We will collaborate with contractors to define roles and responsibilities, leading to increased productivity.

Development of School Participation Steps (Fall/Winter 2022): Another area of need is clearly defined expectations for schools. Participating school teams want to know when they will "complete" participation. We will develop steps for schools, including the development of a school plan, implementation of Structured Literacy, data analysis, and implementation of Individual Education Plans (IEPS). Schools will submit demonstrations of accomplished goals via written documents, data portfolios, and team reflection activities. To support school teams with understanding the process, we will create guidance manuals and tool kits. We plan to expand the role of REC to support schools with the process. We anticipate these steps will provide schools with greater "voice and choice" in how they accomplish goals, resulting in increased buy-in and participation.

Communications & Marketing (Fall 2021)

Values, Vision, Mission, Goal (Summer 2021): Stakeholders had limited understanding of the program's purpose. We will work with stakeholders to develop clearly defined values, vision, mission and goals. We anticipate these statements will alleviate misconceptions and result in greater trust and collaboration.

Program Identity Branding (Summer 2021): ECLIPSE lacks a program identity. We will develop a program logo. We anticipate creating a brand will increase identification of program materials, resulting in higher readership and participation.

Newsletter & Website (Fall 2021): We will create a newsletter and a web page to advertise important events, feature stories of success, and provide links to resources. We anticipate increased stakeholder participation.

Expansion (Summer 2021): We plan to include 37 schools from Albuquerque Public Schools (APS), the state's largest district. We had planned that expansion during this reporting cycle, but were hampered by COVID. Expansion plans have been incorporated into "next steps."

Data Analysis

Site visits (Winter 2022): Once we resume post-COVID school visits, we will lead teams to assess and monitor the implementation of evidence-based practices (EBPs). We will update the Implementation Fidelity Tool to reflect a focus on literacy, data driven decision-making, and collaboration aligning to a Root Cause Analysis tool (in development). The anticipated outcome is targeted assistance and feedback to better meet the needs of participating school teams.

Tableau (Winter 2022): We will use Tableau, a data visualization application, to create school dashboards. We will work with program evaluators to review and revise key performance indicators to measure progress.

Usability Study (Winter 2022): We will collaborate with a small cohort of schools using root cause analysis (RCA) methodology. We anticipate obtaining data about how well the RCA protocol works, and adjust as needed based on stakeholder feedback.

Data-Based Targeted Assistance/PD (Fall 2021): Data analysis will support decisions about targeted assistance. For example, if student Istation data indicates a need for changes in instruction, support specialists will provide PD and targeted assistance. We anticipate modeling data-driven decision making will support school staff with practicing data-driven instruction.

School Support Services

Professional Development (PD):

Teacher PD (Fall 2021): We will continue to provide PD targeting teacher use of EBPs. We anticipate focusing on literacy instruction, behavior support and social emotional learning, and collaboration. The expected outcome is teachers will implement EBPs with fidelity and more effectively meet needs of SWDs.

Administrator PD (Fall 2021): We plan to resume leadership PD targeting administrative support for EBPs, particularly in the areas of observations, coaching, and feedback cycles. Our NMPED partner, Priority Schools Bureau, will provide this leadership training for school administrators. We expect school leaders will more effectively support teachers with implementing evidence-based practices.

Allocations (Fall 2021): We will continue needs-based allocations to schools as identified to support improvement strategies. Allocations will provide access to resources teachers, administrators, and schools need to support student learning.

Targeted Assistance (Fall 2021): We will continue targeted assistance. Based on revised roles and responsibilities, CORE NMSU will provide targeted assistance at the classroom level, and the REC will provide school level support. The organizations will collaborate to ensure school staff receive support without being confused about whom to contact. Topics will address teacher /school needs, and will align with statewide mandates, such as Structured Literacy initiatives. The anticipated outcome is improved instructional strategies that impact student learning.

Instructional Coaching (Fall 2021): Coaches will continue direct, targeted support to teachers. They will collaborate with teachers to identify needs, provide feedback, and support the implementation of EBPs. The anticipated outcome is improved instructional strategies that impact student learning.

Stakeholder Engagement

Parent/Family Engagement (Fall 2021): We will provide ongoing literacy training for parents/families with a greater emphasis on Structured Literacy. The anticipated outcome is that families of SWDs will develop strategies for supporting SWDs at home and increase student learning opportunities and achievement.

APS ECLIPSE Team (Summer 2021): We will collaborate with APS to refine ECLIPSE to meet their organizational structure. For example, they may not need all levels of support (i.e. REC targeted assistance) other ECLIPSE schools do. They have an infrastructure in which many of those support services exist, but may not be fully utilized. We anticipate collaborating with APS will increase participation.

Community (Fall 2021): We will continue meeting with community representatives in the IDEA B panel. We plan to revise the meeting format so stakeholders have a note-taking template to share feedback. We anticipate this revision will provide us with feedback in an organized format.

Contractors (Summer 2021): We will hold monthly meetings with individual contractor groups and monthly meetings with all groups together. We anticipate meeting with all contractors will support alignment and reduce confusion about roles and responsibilities.

Collaborative Conversations (Summer 2021): To reinforce newly adopted philosophies, we will begin every meeting with a review of the mission, vision, values, and goals. We anticipate this will reinforce the collaborative nature of interactions, resulting in stronger relationships and increased trust.

PED Partnerships (Fall 2021): To reduce overlapping and redundant requirements we share with other state programs, we will begin collaborating with agency teams, including those which manage Structured Literacy initiatives and Multi Layered Systems of Support (MLSS).

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

For the FFY 2020 SSIP reporting period, the New Mexico ECLIPSE (Indicator 17) program continued its implementation of evidenced-based practices. Three evidence-based practices were not included due to the COVID-19 pandemic and limited resources: (Observation feedback cycles, Tier 2, and

School Culture: Behavior). Due to the COVID-19, pandemic and students with disabilities being educated via online applications, SED identified three EBPs that provided a framework for improvement throughout the state's public education system. These include: 1) Data Driven Instruction; 2) Tier 1 Instruction, Intervention, and Standards; 3) School Culture: Family Engagement. New Mexico is now focusing on statewide structured literacy initiatives following evidence from the science of reading.

Provide a summary of each evidence-based practices.

Each of the following evidence-based practices support the SIMR because they lead to changes in adult behavior that support students with disabilities improvement in reading achievement.

Data Driven Instruction: REC provided online and or in person data driven instruction to school principals and special education teachers. Some ECLIPSE schools were able to complete formative assessments during the school year. REC analyzed that data and provided data driven instruction training. CORE NMSU provided instructional coaching to ECLIPSE special education teachers; anecdotal assessment data was analyzed and next steps were determined.

Tier 1 Instruction, Intervention, and Standards: All SWDs were provided tier 1 core instruction aligned to the Common Core State Standards. Students received intervention strategies to support their learning.

School Culture: Family Engagement: REC provided online and or in person parent/family literacy events focused on SWDs. Parents/families were provided a tote bag with hands-on literacy materials (for example: whiteboard, index cards) to support their child's reading at home.

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.

Data Driven Instruction: Data driven instruction means teachers use data to make instructional decisions based on individual student performance and the trends and patterns they identify at a classroom and school level. When done effectively, school staff will change instructional practices based on student needs. Specifically, ECLIPSE focuses on analyzing student performance on Istation components. For example, if Istation data consistently indicates a weakness in kindergarten phonemic awareness, ECLIPSE specialists support school staff with changing instruction to target that skill.

Making instructional decisions based on student data increases student outcomes by providing them with the instruction they need.

Tier I Instruction, Intervention, and Standards: The SED ECLIPSE team operates under the premise that SWDs are general education students first. Our intention is to strengthen Tier I instruction so all students receive high quality, evidence-based instruction to the greatest extent possible. ECLIPSE provides school teams with support to implement evidence-based practices with all students at all levels in all environments using universal design for learning. For example, ECLIPSE supports teachers with differentiated instruction, flexible grouping, behavior support strategies, classroom organization, and student data discussions.

School Culture: Family Engagement: ECLIPSE supports schools with increasing family engagement. The parent/family literacy events train parents in hands-on fun literacy activities to support their child's reading at home. This increases parent/caregiver knowledge and skills about literacy development, which in turn, supports child outcomes and progress towards the SIMR.

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

We used data obtained from participant surveys, verbal feedback gained during empathy interviews, coaching and targeted assistance logs, REC and coaching invoices, ongoing observations, meeting notes, anecdotal records, and formative student reading assessments. The ECLIPSE program team used a variety of analysis tools such as: fishbone diagrams and interrelationship diagrams to evaluate the efficacy of the program and to identify change initiatives. Data was analyzed to monitor program efficacy and modifications were made in response to individual school and teacher needs. For example, if observations and coaching logs noted staff needed additional training in early literacy instruction, steps were taken to provide that training. ECLIPSE identified the need to streamline the response to data analysis and has modified internal processes to better address fidelity of implementation. For example, CORE NMSU instructional coaches were able to use needs based allocation to directly request supports such as instructional materials based on their observations of teacher needs. This will decrease delays in obtaining resources and improve responsive change based on data.

Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.

We are looking at a variety of measures to reinforce our use of selected EBPs.

Data Driven Instruction: Data collected from coaching logs, IEP reviews, and interviews/surveys have indicated continued support is needed in data analysis to drive instruction.

Tier I Instruction, Intervention, and Standards: Data collected from coaching logs and interviews/surveys have indicated support is needed in Tier III and across all levels. In addition, greater support is needed with the implementation of Structured Literacy. Thus, we are changing this EBP.

School Culture: Family Engagement: Data collected from interviews/surveys with parents and teachers indicate there is a continued need to focus on family engagement. Parents and teachers indicate the literacy events are very valuable and recommend continued focus on family engagement.

Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.

Based on the program analysis conducted in spring 2021, and changes in statewide initiatives, we plan to expand EBPs to include Data Driven Instruction; Leadership Observation, Coaching, and Feedback Cycles; School Culture: Teacher Collaboration; School Culture: Teacher Collaboration; and Structured Literacy PD and Implementation.

Data Driven Instruction – We plan to continue to focus on data analysis to support instructional decisions. As schools return to typical cycles of student assessment, we plan to resume analysis of Istation data to inform instructional decisions.

Leadership Observation, Coaching, and Feedback Cycles – We will add this EBP as a support to school and district administrators. School administrators are receiving administrative PD (from the PED's literacy division) on Structured Literacy. Providing administrators with PD on how to observe, coach, and provide feedback to teachers on how they are implementing Structured Literacy practices will reinforce teachers' learned strategies. We anticipate this will result in greater adoption of EBPs, and impact student reading proficiency.

School Culture: Family/Community Engagement – We will continue literacy events, but link the results of data to topics of literacy events. For example, if Istation data consistently suggests students need support in comprehension, family literacy events will support parents with building comprehension at home. We anticipate this will impact student reading proficiency and progress towards the SIMR.

School Culture: Teacher Collaboration – We plan to have some schools form SIP teams consisting of a general education and special education teacher who share SWD. CORE NMSU will support these teams by collaborating to better serve their shared students. We anticipate this will impact student reading proficiency and progress towards the SIMR.

Structured Literacy PD and Implementation - We plan to have CORE NMSU coaches and REC support specialists reinforce skills teachers are learning through LETRS training. We will provide coaches and support specialists' additional training in Structured Literacy so they can better support the implementation of EBPs. We anticipate this will impact student reading proficiency and progress towards the SIMR.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The Excellence from Coaching in Literacy for Intensive Preparation in Special Education (ECLIPSE) Indicator 17 program has solicited broad stakeholder input in the development and implementation of New Mexico's State Systemic Improvement Plan (SSIP). The ECLIPSE program has engaged stakeholders in several key improvement efforts:

- 1) At the community level, ECLIPSE program coordinators presented data and program updates to the state IDEA Panel (members include: parents, advocates, state staff, and educators) during the 2020-21 school year. IDEA Panel members participated and were engaged in the ECLIPSE program presentations. An ECLIPSE IDEA Panel committee met as a small group to discuss the program at the conclusion of the day. The ECLIPSE IDEA Panel committee provided SIMR feedback using the SMART goal process along with the Istation data.
- 2) One ECLIPSE stakeholder meeting was held during 2020-2021 via the Zoom online platform. Stakeholders included the ECLIPSE staff, Regional Education Cooperative Executive Directors (REC'S), Special Education Directors, ECLIPSE Principals, ECLIPSE Special Education Teachers, CORE NMSU Director, and Regional Education Cooperative Contractors. Stakeholders were provided with ECLIPSE program details for the school year and stakeholders provided verbal feedback about the ECLIPSE program at the conclusion of the meeting.
- 3) Parent engagement stakeholder meetings were held via online platforms to provide direct explicit literacy training to parents via hands-on activities at each ECLIPSE school. Once trained, parents could engage their students' in fun literacy activities at home. Regional Education Cooperative (REC) contractors dropped off tote bags with the hands-on literacy materials to each school prior to the online parent training. Parent survey data following the training indicated favorable results; parents were pleased with the literacy tools that could be utilized at home with their child. Since the training was online, many parents along with their child/ren attended the interactive family literacy event.
- 4) All stakeholder groups participated in SIMR feedback meetings and feedback surveys. The external and internal ECLIPSE stakeholder groups provided needed input on the SIMR. This feedback has helped the ECLIPSE team to coalesce our five year SIMR plans for improvement of literacy outcomes for students with disabilities.
- 5) An online end of year survey was sent to all ECLIPSE stakeholders as the 2020-2021 school year ended. The feedback from this survey supported the development of an ECLIPSE strategic plan focused on short term goals, intermediate goals, and longer term goals.
- 6) At the school level, School Implementation Partners (SIP's) worked directly with Collaborating for Outstanding Readiness in Education (CORE) New Mexico State University (NMSU) coaches and REC support specialists. In most cases, SIP's are K-3 special education teachers. SIP's attended virtual gatherings with CORE coaches and directors.

7) Engagement with contracted specialists occurred in a number of ways including regular meetings, emails, and phone/text conversations. Collaborative conversations supported the transition to the Special Education Division with the implementation of internal processes to facilitate collaboration, such as using Google docs to co-develop protocols.

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

The ECLIPSE program engaged stakeholders in key improvement efforts with the following strategies:

- 1) ECLIPSE program coordinators presented data and program updates to the state IDEA Panel (members include: parents, advocates, state staff, and educators) during the 2020-21 school year. IDEA Panel members participated and were engaged in the ECLIPSE program presentations. An ECLIPSE IDEA Panel committee met as a small group to discuss the program at the conclusion of the day. The ECLIPSE IDEA Panel committee provided SIMR feedback using the specific-measurable-attainable-relevant-time based (SMART) goal process along with the Istation data.
- 2) One ECLIPSE stakeholder meeting was held during 2020-2021 via the Zoom online platform. Stakeholders included the ECLIPSE staff, Regional Education Cooperative Executive Directors (REC'S), Special Education Directors, ECLIPSE Principals, ECLIPSE Special Education Teachers, CORE NMSU Director, and Regional Education Cooperative Contractors. Stakeholders were provided with ECLIPSE program details for the school year and stakeholders provided verbal feedback about the ECLIPSE program at the conclusion of the meeting.
- 3) Parent engagement stakeholder meetings were held via online platforms to provide direct explicit literacy training to parents via hands-on activities. Once trained, parents could engage their students' in fun literacy activities at home. Regional Education Cooperative (REC) contractors dropped off tote bags with the hands-on literacy materials to each school prior to the online parent training. Parent survey data following the training indicated favorable results; parents were pleased with the literacy tools that could be utilized at home with their child. Since the training was online, many parents along with their child/ren attended the interactive family literacy event.
- 4) All stakeholder groups participated in SIMR feedback meetings and feedback surveys. The external and internal ECLIPSE stakeholder groups provided needed input on the SIMR. This feedback has helped the ECLIPSE team to coalesce our five-year SIMR plans for improvement of literacy outcomes for students with disabilities.
- 5) An online end of year survey was sent to all ECLIPSE stakeholders as the 2020-2021 school year ended. The feedback from this survey supported the development of an ECLIPSE strategic plan focused on short-term goals, intermediate goals, and longer-term goals.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

The end of year online survey of the 2020-2021 school year for all ECLIPSE stakeholders, provided a wealth of data for the ECLIPSE team to analyze. The online survey data analysis will assist the ECLIPSE team in making data driven decisions using implementation science processes to move the ECLIPSE (Indicator 17) program forward in meeting the literacy outcomes of K-3 students with disabilities. For example, all stakeholders were asked to rate their overall understanding of the purpose of the ECLIPSE program. The data showed that most administrators and special education teachers had only a fair understanding of the program's purpose. At parent stakeholder meetings, many parents suggested several areas of growth for improving services for SWDs, such as: toolkits, training, and frequent parent feedback. Therefore, for the 2021-2022 school year ECLIPSE program mission, vision, values, and goals will be established and communicated to all stakeholders. An ECLIPSE Informational packet detailing the program will also be distributed to all stakeholders. ECLIPSE newsletters will be emailed focusing on all stakeholder communications

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.

In the next fiscal year, we plan to increase participation in family literacy activities. Engaging families in literacy events supports progress towards the SIMR because families learn about how to reinforce EBPs their students are being taught at school. During COVID, we learned families like having the option of whether to attend events in person or remotely. We will continue to offer both options, particularly in response to COVID outbreaks throughout

school communities. To measure participation in the events, we will continue to track the number of attendees at each event, and obtain their feedback following the events. We have set a target of increasing participation in family literacy events by 2%.

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

In FFY 2021, we will continue to provide family literacy events. As REC support specialists are able to get back into schools (beginning September 2021), schools will have a choice about whether to have events remotely or in person. To measure participation in the events, we will continue to track the number of attendees at each event, and obtain their feedback following the events. We have set a target of increasing participation in family literacy events by 2%.

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

Throughout the state, we are seeing decreasing numbers of special education teachers and available substitute teachers. The teacher shortage is having a profound effect on schools and the ability of teachers to deliver specialized instruction to SWDs. To address these barriers, the state has requested increases in teacher salaries. A bill is currently going through legislation. In addition, the state has engaged with stakeholders (teachers, LEAs, parents, community members) to address these issues and to continue to build trust and collaboration.

Provide additional information about this indicator (optional).

We recognize the importance of family engagement in student academic achievement, so supporting this activity is a priority. We plan to talk to our REC partners about additional ways to increase family engagement.

17 - Prior FFY Required Actions

None

17 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection. Further, the State reported that its data "did not meet the definition for statistically valid and reliable data due to the limited participation as a consequence of the COVID-19 pandemic." Therefore, OSEP could not determine whether the State met its target.

17 - Required Actions

Certification

Instructions

Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

Certify

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

Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Deborah Dominguez-Clark

Title:

Director of Special Education for New Mexico

Email:

deborah.clark@comcast.net

Phone:

505-819-1337

Submitted on:

04/28/22 8:16:37 PM