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

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

**For reporting on   
FFY 2021**

**Arkansas**

U.S. Department of Education seal

**PART B DUE February 1, 2023**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

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

In the 2021-2022 school year, Arkansas’ educational system was comprised of 258 school districts and open enrollment charter schools, three state agencies (Arkansas School for the Blind, Arkansas School for the Deaf and Division of Youth Services), 15 education cooperatives, and two state agencies not within the Arkansas Department of Education’s Division of Elementary and Secondary (DESE) purview, for a total of 278 programs.   
  
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**Number of Districts in your State/Territory during reporting year**

278

**General Supervision System:**

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

The DESE’s Office of Special Education (OSE) is composed of the following sections:   
  
The Director’s Office of the OSE works in collaboration with local school districts to provide special education services for children with disabilities (ages 3 to 21) in an effort to ensure that all children with disabilities in Arkansas receive a Free Appropriate Public Education (FAPE) as outlined in the Individuals with Disabilities Education Act (IDEA). The OSE is committed to improving educational results for students with disabilities through statewide leadership and support to educators, students, families, and other stakeholders. The OSE works in partnership with stakeholders to design and implement an effective system of general supervision to fulfill state and federal regulations and improve outcomes for students with disabilities.   
  
The Dispute Resolution Section (DRS) is responsible for managing the due process hearing system and the complaint investigation system, as outlined under Arkansas Special Education and Related Services: Procedural Requirements and Program Standards. The DRS also provides oversight of the Arkansas Special Education Mediation Project (ASEMP) administered by the UALR Bowen School of Law Mediation Clinic. The DRS works with parents and districts to resolve conflicts at the lowest appropriate level.  
  
The Monitoring and Program Effectiveness (MPE) and Non-Traditional Programs sections monitor special education programs for compliance with state and federal regulations and provide technical assistance for program improvement. The focus of the MPE section is improving educational results for students with disabilities and ensuring that all LEAs and other public agencies meet the Individuals with Disabilities Education Act (IDEA) program requirements.  
  
The Curriculum and Assessment staff works with the other DESE units and LEAs to ensure that students identified as needing special education and related services have access to the general curriculum and are included in statewide and district-wide assessments.   
  
The State Program Development Section of the OSE assists public agencies such as schools, institutions of higher education, state and private agencies, parents, and the general public in the development of programs and training to improve services for students with disabilities.   
  
The State Personnel Development Grant (SPDG) works to expand Arkansas’ job-embedded professional learning system, including a Response to Intervention (RTI) model using evidence-based personnel development to implement a multi-tiered system of support for behavior and academics, with a focus on literacy.  
  
The Funding and Finance Section participates in general supervision by ensuring the appropriate use of IDEA funds as well as state and local funds specifically budgeted for special education. This section provides support for LEAs in developing all grant applications and budgets pertaining to IDEA federal, state and local funds. Furthermore, the OSE has implemented a risk-based system of fiscal monitoring that utilizes a standard protocol to establish risk. Districts are monitored by the MPE section and Funding and Finance section simultaneously.   
  
The Arkansas IDEA Data & Research Office provides data management, analysis, technical assistance, and research for the enhancement of the DESE’s general supervision mandate. Working in partnership with OSE and other divisions within the agency, the Office ensures standardized data collection procedures for federal reporting, state and district level data analysis, and public dissemination of program effectiveness data, including the Annual Performance Report.  
  
The OSE's components function as a general supervision system in the following ways: The MPE section monitors LEAs for procedural compliance on regulatory issues and provides targeted technical assistance to support LEA efforts in improving results for students with disabilities and their families. Staff work collaboratively with other sections within the OSE and DESE in carrying out the MPE section’s overall supervision of the provision of special education and related services. These partnerships allow the MPE Area Supervisors to identify monitoring and technical assistance needs, and assist LEAs in developing and implementing specialized staff in-service and personnel development.   
   
The State Program Development Section partners with Curriculum and Assessment, Dispute Resolution, MPE, the SSIP and SPDG staff, along with other divisions within the agency, to assist LEAs, institutions of higher education, and state and private agencies in the development of programs and trainings to improve services for students with disabilities.   
  
Working in partnership with the OSE and other divisions, the IDEA Data & Research Office ensures standardized data collection procedures for federal reporting, state and district level data analysis, and public dissemination of program effectiveness data including school district and early childhood program profiles and the Annual Performance Report.  
   
The finance section works with data management and special education consultants who verify services and results of programs for students with disabilities, ensuring they are correlated to the expenditure requirements. The annual application for Part B funds requires that each district submit written assurances along with their annual application and budget application.  
  
Collectively, the OSE works to correct noncompliance and improve performance. When an LEA/ESC or other public agency has a finding of noncompliance, a compliance action plan (CAP) is written to address the deficiency with specified timelines for correction and submission of evidence for review. As part of the monitoring process, the OSE may impose needed corrective strategies on a public agency, and require that specific documentation be submitted to demonstrate implementation of corrective actions. Individual LEAs may be required to conduct a self-review of policies, procedures, and practices to address identified deficiencies, with the corresponding timelines for review, to gauge the effectiveness of their implementation of corrective actions. The OSE staff monitoring the public agency’s effectiveness will require revisions to the plan if the efforts appear to be ineffective. Prior to determining that the public agency has substantially corrected the noncompliance, additional on-site follow up and/or review of more recent data will occur to verify correction of noncompliance. Public agencies must submit a written assurance and/or evidence that the deficiencies within a CAP have been corrected as directed. When written assurance is provided, evidence that documents the public agency’s progress in correcting the noted deficiencies must be available at the public agency for review by the OSE staff. Upon the receipt of all requested evidence cited in a CAP and verification by the OSE staff of full correction, the OSE will notify the public agency of its compliance status.  
   
The correction of noncompliance, from a hearing decision or complaint, in a timely manner is determined after a review of documentation submitted by the public agency along with other monitoring activities. DRS staff reviews the evidence provided by public agencies to demonstrate compliance with corrective actions as required in a hearing decision or complaint investigation report. If the evidence submitted is insufficient to meet the required corrective action, the DRS staff works with the public agency to achieve compliance. If necessary, the OSE may send one or more staff on-site to verify that a public agency is complying with the corrective action(s). A public agency under a corrective action directive from a hearing decision or complaint investigation report is required to provide periodic updates to DRS staff addressing the status of compliance with corrective actions until noncompliance is corrected.

**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 provides professional development and technical assistance to LEAs around compliance and performance indicators through a variety of mechanisms based on established needs. The MPE section provides targeted technical assistance (TA) for compliance and program improvement based on a variety of risk factors including monitoring findings, desk audits, APR Determinations, Indicator Data, referrals from the other units within the agency, and other information. The Dispute Resolution section provides TA to districts when noncompliance is identified through complaints or hearings.  
  
The IDEA Data & Research unit provides professional development to LEAs focusing on data reporting, data use, and building data literacy capacity. Other various consultant groups provide technical assistance around student-specific issues and program improvement in an effort to build capacity within the LEA. In alignment with the State Systemic Improvement Plan (SSIP) these consultants are involved in a multi-year shift towards capacity building and job-embedded professional learning. Much of the technical assistance work focuses the principles of implementation and improvement science to enact sustainable evidence-based practices to meet the needs of students with disabilities.   
  
An online referral system, Central Intake and Referral/Consultant Unified Intervention Team (CIRCUIT), continues to be used to meet technical assistance requests around specific needs, and consultants are assigned based on the referral type. A central entity receives referrals and the case is assigned to a consultant group. Evidence-based, high-leverage practices are used in the provision of technical assistance, and each TA provider participates in ongoing approved professional learning to improve their knowledge, skills, and coaching capacity. When student-specific requests are initiated, technical assistance efforts to support LEAs are delivered with an intentional focus on growing the capacity of the LEA to meet the needs of that student and future students with similar needs. Memorandums of Understanding (MOUs) outline required skills and functions of each consultant group. Technical Assistance activities are logged in monthly activity reports and reviewed by the administrative team in the OSE. Special Education Consultant Teams that are deployed through CIRCUIT include the following:  
  
Arkansas Transition Services (ATS): ATS serves all 75 counties in Arkansas in an effort to improve transition outcomes for students with disabilities. The mission of ATS is to effectively assist students with disabilities, educators, parents, agency personnel, and community members in preparing students to transition from school to adult life and reach positive post-school outcomes. ATS staff provide technical assistance, trainings, and consultations to special education teachers and other relevant staff, as well as to various agency personnel.   
  
Arkansas Behavior Support Specialists (BSS): The work of the BSS focuses on the development of district and school-level behavior teams trained in legally defensible Functional Behavior Assessments (FBA) and development of Behavior Intervention Plans (BIP). Regional training and onsite coaching is provided to LEAs through two multi-year projects called AR THRIVE and BX3. In addition, the BSS provide regional, district, school, and individual training and assistance. These services may include assistance with behavior plan development and programming, essential principles of behavior, behavior data collection, and essential behavior strategies. The AR THRIVE Leadership Academy is an intensive, hands on, multi-day training for school leaders to increase capacity to support MTSS for positive behavior and mental health supports. The goal is to equip building administrators to lead behavior and mental health MTSS at the school level.  
  
Educational Services for the Visually Impaired (ESVI): The ESVI consultants provide recommendations for adaptations and/or modifications to enhance student opportunities for learning, assessment, and instruction. ESVI provides consultation in the use of recommended low vision devices and direct instruction in mobility devices, recommendations for large print or Braille books and for assistive equipment and materials. Assistance with and interpretation of required Functional Vision Assessments and Learning Media Assessments is also a service of ESVI.  
  
Brain Injury (BI) Services: BI Services include consulting with LEAs on intervention strategies that assist in managing student behavior, enhancing academic achievement of low performing students, assessment and identification of students potentially in need of special education services, and the provision of staff development to faculty and administrators regarding BI. Brain injury services focus on the integration of interdisciplinary supports needed for students with brain injuries.  
  
Children and Youth with Sensory Impairments (CAYSI): CAYSI is a federally funded program serving individuals from birth to age 21 who are deaf-blind or who are at risk for deaf-blindness. CAYSI consultants provide training, technical assistance, and information to families, educators, and others who work with these individuals. CAYSI supports the philosophy of inclusion of the individual with deaf-blindness in educational, vocational, recreational and community environments.   
  
Easterseals Outreach Program and Technology Services (ESOPTS): ESOPTS provides support to build the capacity of districts and special education school teams to implement evidence-based instructional and therapeutic methods to positively impact student outcomes. Services are provided to assist staff with providing curriculum, support, supplementary aides, and services for students with complex learning needs (significant and/or multiple developmental needs). ESOPTS also provides services for educational Autism Spectrum Disorder (ASD) identification and augmentative/alternative communication, psycho-educational assessments, assistive technology loan equipment, student-centered planning, and addressing specific needs of individual students or an entire classroom. Two ESOPTS projects are capacity-building projects. Project Prepare focuses on the development of district and building-level teams that identify and drive change around quality indicators for special education and related services. Project Equip incorporates principles of implementation science to build district-wide assistive technology (AT) teams to install and sustain evidence-based practices for AT consideration, assessment, and implementation.  
  
Educational Audiology Resources for Schools (EARS): EARS services include managing hearing screening programs to assist with amplification and other classroom technical assistance, and making recommendations for accommodations/modifications for students with auditory processing disorders, cochlear implants, etc. A full range of evaluation services are available including audiological assessments, counseling/guidance for parents, and hearing conservation education. Speech pathology services include specialized assessments, classroom observations, assistance with writing appropriate goals, as well as modeling therapy with individual students. Additionally, a Teacher of the Deaf Consultant works alongside the EARS Team to build the capacity of LEAs to build efficacy in service provision to students who are deaf/hard of hearing.  
  
Related Services Coordinators: The Related Service Coordinators (RSCs) work to build LEA capacity with educational speech-language pathologists, occupational therapists, and physical therapists. The RSCs promote the provision of inclusive related services in order to improve educational outcomes and ensure FAPE. Support for RS Assistants is also provided.  
  
SSIP Coordinator: The SSIP coordinator works with all TA mechanisms to facilitate coherence within the State's support system in alignment with IDEA and ESSA.

**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 provides professional development and professional learning to LEAs around compliance and performance indicators through a variety of mechanisms based on established needs. Each section of the OSE and its funded consulting groups provide professional development around systemic implementation of Universal Design for Learning (UDL), collaboration between general/special educators and related services, high-leverage and evidence-based practices, specific issues, and program improvement in order to build capacity within each LEA.  
  
The consultant teams include:  
IDEA Data & Research provided professional development opportunities to LEAs focusing on data reporting, data use, and building data literacy capacity.  
  
Arkansas Transition Services (ATS) serves all 75 counties in an effort to improve transition outcomes for students with disabilities. ATS staff provide technical assistance, training, and consultations to special education teachers and other relevant staff, as well as to various agency personnel.  
  
The State Personnel Development Grant works with districts and education service cooperatives to support training and coaching with job-embedded professional learning on UDL, HLPs, and RTI for academics and behavior. In alignment with DESE's Division of Educator Effectiveness and the SSIP, the SPDG team is focused on transforming professional learning for educators in Arkansas, including the attainment of micro-credentials.  
  
The Arkansas Behavior Support Specialists (BSS) provide regional, district, school, and individual student training and support. BSS services include assistance with behavior plan development and programming, essential principles of behavior, behavior data collection, and assistance with classroom/ building/district level program development to meet the social/behavioral needs of students with disabilities. The BSS also serve as key trainers and coaches for the AR THRIVE initiative which is focused on building the capacity of school-level leaders in the areas of behavior and mental health.  
  
The Arkansas Co-Teaching Project assists districts in improving the least restrictive environment (LRE) and is focused on ensuring students are accessing and progressing in the general education curriculum. The co-teaching project partners with Johns Hopkins University’s Center for Technology in Education (JHU CTE) to implement a year-long blended Boundless Learning Co-Teaching (BLC) professional development package in Arkansas.  
  
The Education Services for the Visually Impaired (ESVI) consultants provide recommendations for adaptations to enhance student opportunities for learning, assessment, and instruction; consultation in the use of recommended low vision devices and adaptive mobility devices and canes; recommendations for large print or Braille books and for assistive equipment and materials; and assistance as needed with required Functional Vision Assessments and Learning Media Assessments.  
  
Brain Injury (BI) Services include consulting with LEAs on intervention strategies that assist in managing student behavior, enhancing academic achievement of low performing students, and assessment and identification of students potentially in need of special education services, and the provision of staff development to school faculty and administrators regarding BI. Additionally, Brain Injury Services support LEAs with intervention efforts through a tiered approach to concussion management with emphasis on Return to Learn protocols.  
  
Speech-Language services include consultation and technical assistance on a variety of communication, regulatory, and service delivery issues; professional education information in the form of training, self-study materials, and announcements; and a resource and equipment loan program which includes professional texts, assessment tools, self-study materials, and auditory trainers. Additionally, LEAs may seek approval for a program to use Speech-Language Pathology Support Personnel (assistants and aides) who can perform tasks as prescribed, directed and supervised by master’s level speech-language pathologists using a written proposal process.  
  
Children and Youth with Sensory Impairments (CAYSI) is a federally funded program serving individuals from birth to age 21 who are deaf/blind or who are at risk for deaf/blindness. CAYSI consultants provide training, technical assistance, and information to families, educators, and others who work with these individuals. CAYSI supports the philosophy of inclusion of the individual with deaf/blindness in educational, vocational, recreational and community environments.  
  
Easterseals Outreach Program and Technology Services (ESOPTS) provides support to build the capacity of districts and special education school teams to implement evidence-based instructional and therapeutic methods to positively impact student outcomes. ESOPTS also provides services for Autism Spectrum Disorder (ASD) identification and augmentative/ alternative communication, psycho-educational assessments, AT loan equipment, student centered planning, and addressing specific needs of individual students or an entire classroom. Professional development is offered in a variety of formats, including online and onsite.  
  
Educational Audiology Resources for Schools (EARS) services include managing hearing screening programs to assist with amplification and other classroom technical assistance and making recommendations for accommodations/modifications for students with auditory processing disorders, cochlear implants, etc. A full range of evaluation services are available including audiological assessments, counseling/guidance for parents, and hearing conservation education. The EARS program offers an online channel that LEAs may access for information on best practices for working with children with hearing loss. A Teacher of the Deaf consultant works in conjunction with the EARS team to ensure that high leverage assessment and instructional practices are promoted for students who are deaf/hard of hearing.  
  
The OSE works collaboratively with educational interpreters, the districts who employ them, and the University of Arkansas at Little Rock’s Interpreter Education Program. The OSE provides targeted technical assistance workshops for interpreters to assist them in reaching the qualification standard outlined in the Arkansas Standards for Educational Interpreters and Transliterators, 4th edition. The OSE supports educational interpreters working in Arkansas public schools by providing opportunities for them to take the Educational Interpreter Performance Assessment at no cost in order to obtain the minimum required standards.  
  
University of Arkansas at Little Rock, Bowen School of Law Mediation Project has trained professional mediators to assist parties in finding effective solutions for conflicts around the provision of educational services for children with disabilities. Mediators can facilitate IEP Meetings to guide the process and assist members of the IEP team in communicating effectively to develop an acceptable IEP.  
  
The OSE continues to be involved in interagency collaborations to enhance the provision of special education services for children with disabilities.  
  
The OSE works closely with the DESE Student Assessment Unit and the DESE Curriculum and Instruction Unit to ensure all students have access to and progress in the general education curriculum with meaningful participation in statewide assessments.  
  
The OSE works closely with regional educational service cooperative (ESC) content specialists to promote access to quality, tier one instruction with supports as needed.   
  
Medicaid in the Schools (MITS) services include training and technical assistance to support LEAs in tele-practice, electronic billing and program management, policy and program development, initiation/development of new revenue streams, and collection/management/and analysis of data.

**Broad Stakeholder Input:**

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

In Spring 2021, Arkansas began developing a plan of action to establish a representative broad stakeholder group from across the state to compliment the work of the Special Education Advisory Council. Invitations were sent to 46 individuals of which many have dual roles. Only one person declined the invitation. This select stakeholder group represented the five regions of the state, multiple race/ethnicities and included both males and females. Further the representation was comprised of 12 parents, 4 related service providers, 8 early childhood providers, 2 early childhood coordinators, 12 district special education supervisors, 7 general/special education teachers, 4 personnel from state agencies, and 4 superintendents/principals. This stakeholder group, as well as advisory members, DESE OSE staff and TA providers, participated in a series of webinars on indicator target setting and improvement activities. Each session was split into breakout rooms so the groups were small enough to encourage discussion.   
  
The work with this core group continued throughout the 2021-22 school year. Following the submission of the new targets for the FFY 2020-2025 SPP/APR cycle, the OSE has continued to collaborate closely with numerous partners through various initiatives in order to obtain authentic engagement and reciprocal exchange of information regarding the targets and implementation of activities.   
  
To increase the capacity of diverse groups of parents from across the state OSE partnered with The Center for Exceptional Families (TCFEF), Arkansas’ Parent Training and Information (PTI) center. TCFEF maintains a diverse database of families of students with disabilities from across the state, and engages with them via social media, virtual and in-person meetings, and through email. The OSE partnered with TCFEF during the target setting for the FFY 2020-2025 SPP/APR cycle and maintains ongoing collaboration to solicit stakeholder feedback regarding indicator target updates and implementation of activities.   
  
One particular activity was a series of 5 workshops facilitated by TCFEF held in each of the five regions of the state that focused on the High Leverage Practice of Collaborating with Families to Support Student Learning and Secure Needed Services. Using the TCFEF statewide listserv, diverse families were invited to provide feedback after watching a video with stories pertaining to special education in Arkansas. The 15 fifteen families represented Caucasian, Hispanic, African American, and Pacific Islander backgrounds. Reflections from this feedback assisted DESE-OSE in determining training materials for the ALL In Initiative and the intensified focus on high leverage practices.  
   
Additionally, the State Personnel Development Grant has an intentional focus on family engagement work. Two statewide sessions were facilitated by SPDG and TCFEF to seek input and feedback from families on the development of trainings on the topic of Response to Intervention (RTI). Advertisement of these opportunities occurred through DESE’s Office of Family and Community Engagement and with the regional educational cooperatives. Twenty-five families from all five regions the state participated, representing diverse races and ethnicities. Efforts were made to further diversify this feedback by age. Parents and grandparents of students with disabilities were represented in each session.  
  
  
Our State Special Education Advisory Council is an integral group of stakeholders who provide input on target setting and improvement activities with meetings being held quarterly in January, April, July, and October. Each meeting provides a forum for solicitation of feedback regarding SPP/APR targets and the SSIP Theory of Action. The Advisory Council representation includes: Parents (10), Adult Corrections, Advocates (2), AR Rehabilitation Services (2), Career & Technical Education (2), Center for Exceptional Families (PTI), Foster Care, Higher Education, Juvenile Corrections, LEA Special Education Supervisors, McKinney-Vento Administrator, Teachers (4), Private School, and Public Charter Schools. During these meetings, the council members and public participants are provided updates on the previously held stakeholder input sessions, compliance indicators, dispute resolution indicators, and the SSIP. Meeting agendas and section reports for each meeting are available at the following website: https://dese.ade.arkansas.gov/Offices/special-education/advisory-council.  
  
Another is the Arkansas Association of Educational Administrators (AAEA). The AAEA is an agency of diverse school leaders that promotes quality public education for all children in Arkansas. The OSE maintains a close partnership with AAEA, and particularly the constituent groups of Beginning Administrators (BA) and Special Education Administrators (AASEA). These partnerships provide avenues for broad stakeholder input on all targets in the SPP/APR, and any need for subsequent revisions to the targets. The BA subgroup has had increasing input over the past year through the OSE and AAEA's Advancing Inclusive Principal Leadership (AIPL) initiative. More information on the AIPL initiative and the alignment work to Indicator 17 can be found at the following websites: https://ccssoinclusiveprincipalsguide.org/policy-to-practice/case-study-arkansas/ & https://sites.google.com/view/inclusive-practices/home?authuser=0  
  
Further, statewide training opportunities were conducted for two state initiatives. Held across the state in the 15 educational cooperatives and centrally, each of these provided LEA staff and administrators the opportunity to learn about the initiatives and provide feedback. A description of the initiatives is provided below.  
  
The Inclusive Practices Project has an intentional focus on inclusive practices, ensuring students who are IEP eligible, as well as other groups of struggling learners, have meaningful access to core instruction and established systems of intervention. Participating schools participate in a collaborative evaluation process that gathers data regarding student achievement, teacher practices, and effective professional development. This project is directly aligning with several key indicators, but is especially integral to supporting Indicator 5 (LRE) and Indicator 17 (SSIP). Schools supported by this initiative are factored into the Arkansas State-identified Measurable Result (SiMR). These LEAs form a key constituency group for ongoing input on targets and revisions. More information about this project can be found at this website: https://dese.ade.arkansas.gov/Offices/special-projects/inclusive-practices-project  
  
The ALL IN Initiative of the DESE-OSE promotes equitable access to core instruction to foster greater opportunities for students to reach college, career, and life goals. A new Inclusive Practices website was unveiled during this reporting cycle and houses important information for stakeholders in the areas of Least Restrictive Environment (LRE), Universal Design for Learning (UDL). High-Leverage Practices (HLPs), Inclusive Principal Leadership, Inclusive Related Services, Parent Resources, Flexible Service Delivery, Scheduling, IEP Documentation and Videos for Implementation Support. Additional information on this initiative can be found on the following website https://sites.google.com/view/inclusive-practices/home. As part of the ALL IN Initiative, the Learning for All statewide trainings were unveiled in this reporting period and were presented across the entire state in every educational service cooperative to over 3000 participants. Learning for All emphasizes two key considerations for achieving inclusive education: Universal Design for Learning and Executive Functioning.

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

NO

**Number of Parent Members:**

83

**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.**

Arkansas established a representative broad stakeholder group from across the state to provide feedback on all targets for the SPP/APR in the spring of 2021. This select stakeholder group represented the five regions of the state, multiple race/ethnicities and included both males and females. Stakeholder representation was composed of 12 parents, 4 related service providers, 8 early childhood providers, 2 early childhood coordinators, 12 district special education supervisors, 7 general/special education teachers, 4 personnel from state agencies, and 4 superintendents/principals. This select stakeholder group, as well as state advisory members, DESE-OSE staff and TA providers, participated in a series of webinars on indicator target setting and improvement activities. Following the completion of the feedback sessions for target setting, the OSE maintained the following mechanisms to solicit continued stakeholder feedback in the summer and fall of 2021, and the spring of 2022 including:  
  
State Advisory Council:  
The State Special Education Advisory Council held meetings in July and October 2021, and January 2022 that continued to focus on the new targets and discussion of improvement strategies. The Advisory Council representation includes: Parents (10), Adult Corrections, Advocates (2), AR Rehabilitation Services (2), Career & Technical Education (2), Center for Exceptional Families (PTI), Foster Care, Higher Education, Juvenile Corrections, LEA Special Education Supervisors, McKinney-Vento Administrator, Teachers (4), Private School, and Public Charter Schools. During these meetings, the council members and any public participants were provided updates on the previously held stakeholder input sessions, compliance indicators were discussed, dispute resolution indicators, and the SSIP. Additionally, information was provided on how the local APR profiles would be affected by the new measurements, especially Indicators 1 & 2. Advisory topics were: 1) July 2021: overview of stakeholder engagement meetings and input on baseline and target setting for Indicators 1, 2, 3, 4, 5, 6, and 17. 2) October 2021: discussed the effect of the new graduation and drop out measurements on the local APRs; Indicator 3: Assessment was presented with the 2021 assessment data; compliance indicators, and Indicator 17. 3) January 2022: presentation of the APR with the targets set for the next six years and any feedback which could lead to changes for the final submission.  
  
The Center for Exceptional Families (TCFEF)  
The OSE partnered with TCFEF during the target setting for the FFY 2020-2025 SPP/APR cycle and maintains ongoing collaboration to solicit stakeholder feedback regarding indicator target updates and the SSIP. TCFEF maintains a large database of families of students with disabilities, and engages with them via social media, virtual and in-person meetings and through email. In December of 2021, TCFEF, the IDEA Data and Research Manager, and the SSIP Coordinator facilitated a statewide virtual event for families to provide feedback on the setting targets, data analysis, and improvement strategies. For families who could not attend the live virtual session, a link to a recording of this event was sent to TCFEF's broad network of families to review and provide input at their convenience. TCFEF is a contracted partner of the State Personnel Development Grant which is directly aligned to the SSIP Theory of Action. A TCFEF representative serves on the State Personnel Development Grant (SPDG) Core Management team and functions as the Family and Community Liaison. This representative was present in numerous target setting meetings regarding the indicators, and provides ongoing support to the OSE in reforming and improving systems for personnel preparation and professional learning. Additional information can be found on the TCFEF and SPDG webpages at http://thecenterforexceptionalfamilies.org & https://www.arspdg.org/parents-family/. In partnership with the SSIP, TCFEF hosted five workshops during this reporting cycle for Arkansas parents/caregivers focused on gathering their perceptions of special education in Arkansas through the lens of lived experiences. The workshop dates were 5/20/21, 8/6/21, 10/15/21, 1/11/22, and 3/10/22. Participants were shown a video that was created by TCFEF that highlights diverse perspectives and reflections of 15 Arkansas families navigating special education in Arkansas. Feedback was then requested on ways to improve education, including the established baselines and targets. Emphasis of these meetings centered around Indicators 1, 4, 5, 8, and 17 and highlighted HLP 3: Collaborating with Families to Support Student Learning and Secure Needed Services. Average attendance at each workshop was 12, with a total attendance of 59 across the five workshops. TCFEF also presented the video for families at the ASPA conference with 150 participants.   
  
Statewide Conferences  
Opportunities for stakeholder feedback occurred at several state conferences. The ADE Summit in the summer of 2022 provided opportunities for stakeholder input on key improvement strategies included in the SSIP. State and national experts presented on aspects of UDL, HLPs, and the PLC Process. In addition, a session focused on the transformation of Arkansas' professional development system that is heavily supported by the SPDG. A combined session supported by DESE Educator Effectiveness and the SPDG focused on job-embedded professional learning and micro-credentials for UDL and HLPs This session is in direct alignment with the coherent improvement strategies outlined in the SSIP Theory of Action and solicited feedback on the perceived benefits and potential use of micro-credentials.   
  
The Arkansas School-Based Therapy Conference was held in the summer of 2022 with 310 participants, and the Arkansas Collaborative Consultants (OSE's technical assistance providers) Fall Convening was held in the summer of 2022 with 88 participants. At both meetings, components of the Indicator 17: SSIP improvement strategies were discussed and feedback solicited on the messaging, inclusion of initiatives and overall direction of the SSIP. Feedback was provided on the SSIP Theory of Action, and as a result, Universal Design for Learning and executive functioning were highlighted as increasing areas of focus. DESE-OSE partnered with WestEd to facilitate a full-day training on aspects of UDL capacity building. While most participants at these conferences were educators, 20 attendees are also parents of students with disabilities.   
  
Inclusive Practices Project and ALL IN Initiative  
The current state initiatives involved with inclusive practices and outlined in the SSIP theory of action are being scaled to include greater numbers of educators, administrators and families across Arkansas. Through the Inclusive Practices Project, LEAs have partnered with families to collaborate around data-driven decisions that occur with scheduling, placement, and access to core instruction through tiered system of supports. The conversations center around special education as a service, and not a place and highlight the importance of Indicators 1, 2, 5 and 17. The OSE partnered with the Arkansas Teacher of the Year (ATOY), who is a special educator and a champion for inclusive practices. The ATOY published an article in the state's largest newspaper seeking feedback from, and educating families about, the need for more inclusive education in Arkansas. This article, and numerous other parent resources are housed on the DESE-OSE Inclusive Practices Website: https://sites.google.com/view/inclusive-practices/home

**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.**

As part of the OSE's ALL IN Initiative, a statewide training called No Limits was presented at every regional educational service cooperative to over 5,000 participants across Arkansas including educators, families, and administrators. This training supported all schools, with additional focus on schools identified as needing additional targeted support (ATS) under Arkansas' ESSA Plan. In the late spring and summer of 2022, two trainings pertaining to The How of Inclusive Education were presented to every regional educational service cooperative focusing on Universal Design for Learning and Executive Functioning.  
  
The Advancing Inclusive Principal Leadership (AIPL) Initiative, with support from CCSSO, builds the capacity of administrators to work with diverse educators and families to improve leader efficacy with inclusive practices. The OSE partners with Arkansas Association of Educational Administrators to train all beginning administrators in inclusive practices and considerations for working with families of students with disabilities.   
  
The Arkansas Collaborative Consultants (ACC) provide schools, educators, parents, and students with specific services and resources with the mission of creating and sustaining a coordinated system of support for families and local school districts to maximize outcomes for all students, especially students with disabilities. The vision for the ACC is a collaborative and responsive system of supports that meets the diverse needs of local school districts. The ACC reaches all areas of the state, with direct alignment to each regional education cooperative. Each consultant group assists with the development and implementation of general, targeted and intensive supports for educators and parents through activities that include websites with parent resources containing the latest research-based information. The ACC uses a coherence and value-creation framework to strategically and intentionally support the SSIP and other Part B Indicators. The ACC has purposefully embedded UDL and High Leverage Practices, including HLP 3 (Collaborating with Families to Support Student Learning and Secure Needed Services) into professional learning opportunities and supports families with the following implementation activities:  
  
The Arkansas Public School Resource Center (APSRC) Special Education Consultant supports charter schools and families by hosting special education trainings and assisting with IEP development, paperwork, the law and due process, and inclusive practices.  
  
The Arkansas Behavior Support Specialists (ARBSS) build local district capacity by providing educators and families with support and services needed to implement evidenced-based behavioral practices that meet the needs of all students. The ARBSS provide tiered support to the OSE and LEAs by leading professional learning in the AR Thrive Initiative for Tier 1 and Tier 2 Positive Behavior Supports, and through a capacity building project for Tier 3 supports called BX3. The ARBSS also provide direct support to students, families and LEAs through the Centralized Intake and Referral/Consultant Unified Evaluation Team (CIRCUIT) system. More information on the ARBSS can be found at www.arbss.org.  
  
The Accessible Educational Materials Consultant assists families with providing rapidly accessible video demonstrations of current and emerging technologies available for students in conjunction with more in-depth training (both virtual and in-person) upon requests from students, families, teachers and other facilitators.  
  
Arkansas Transition Services (ATS) serves all counties in Arkansas in an effort to improve secondary transition outcomes for students with disabilities. ATS is committed to effectively assisting students with disabilities, educators, parents, agency personnel and community members in preparing students to transition from school to adult life and reach positive post-school outcomes. Activities supported by ATS include school transition fairs, CIRCLES (Communicating Interagency Relationships and Collaborative Linkages for Exceptional Students) and parent involvement in person-centered planning for transition. ATS also supports College Bound Arkansas with sessions for families to get more information on options for their students at the post-secondary level. For more information about ATS activities, please visit this website: https://arkansastransition.com/index.php/tools-and-resources/parents-family-members.  
  
The Children and Youth with Sensory Impairment (CAYSI) program provides tiered supports to families and educators of students who are deaf-blind. CAYSI also facilitates annual Family Future Planning Days for families of students who are deaf-blind and between the ages of 14 and 21. Biannually, CAYSI provides SPARKLE statewide family trainings on deaf-blindness and collaborates with the National Center for Deaf-Blindness (NCDB) in the NCDB Family Engagement Coordinator Peer Learning Group.  
  
The Centralized Intake and Referral/Consultant Unified Evaluation Team (CIRCUIT) system can be requested by parents, guardians, or district school administrators (i.e., special education supervisors, principals, and superintendents). Through CIRCUIT, State Special Education Consultants are available to assist with the identification and interventions needed for students with sensory, intellectual and multiple disabilities, disruptive and/or self-injurious behavior, autism spectrum disorders, brain injuries, or other disability-related needs.  
  
The Early Childhood Special Education (ECSE) section is responsible for ensuring that a Free Appropriate Public Education (FAPE) is available and provided to all children with disabilities ages 3-5 in Arkansas. The ECSE section monitors special education programs for compliance with state and federal regulations and provides technical assistance for program improvement. The primary focus of the ECSE section is improving educational results for children with disabilities and ensuring that all Local Educational Agencies (LEAs) meet the Individuals with Disabilities Education Act (IDEA) program requirements.  
  
Educational Audiology and Speech Pathology Resources for Schools (EARS) and the state's Deaf Education Specialist provide free sign language classes for families of students are deaf/hard of hearing. In addition, student-specific support regarding assistive hearing technology, communication and academics are provided through a tiered system.  
  
Easterseals Outreach Program and Technology Services (ESOPTS) facilitates feature-matching processes for families to make informed decisions regarding the acquisition and services for assistive technology. In addition, ESOPTS operates a free assistive technology loan program for LEAs to access and trial potential technologies prior to purchase to assist students.  
  
The Educational Services for the Visually Impaired (ESVI) consultants provide recommendations for adaptations and/or modifications to enhance student opportunities for learning, assessment, and instruction. ESVI provides consultation in the use of recommended low vision devices and direct instruction in mobility devices, recommendations for large print or Braille books and for assistive equipment and materials.   
  
The State Personnel Development Grant (SPDG) partners with The Center For Exceptional Families to develop modules and resources for educators and parents around RTI for behavior and academics. In collaboration with SPDG, the TCFEF parent mentor offers an RTI for Families training focused on the essential components of Response to Intervention and embeds resources for families, community members, and educators. In addition, SPDG collaborates with the Office for Innovation of Education at the University of Arkansas to create family and community engagement focus groups to gather stakeholder feedback on ways in which parents can advocate for their child's needs.

**Soliciting Public Input:**

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

The mechanisms for soliciting public input included the establishment of a core stakeholder group, state advisory council meetings, statewide conferences, PTI lead webinar specifically for parents, and in-person meetings and webinar specific to SSIP schools. Other than the two state conferences, most sessions were held virtually. Invitations were sent out in early March 2021 and the first sessions began in April with the State Advisory Council. Sessions in 2021 were held in April, May, June, July, August, October and January 2022. During these target setting sessions, Data sheets were provided to participants for virtual and on-site meetings. Notetakers were in each breakout room capturing the discussion and feedback. On-site the feedback form handed out to participants and returned to the presenter to compile the feedback. In addition, some meetings included a google form which would be filled out during the session or after. More information about the stakeholder sessions is provided under the Broad Stakeholder Input section.  
  
During the meetings participants conducted an analysis of year to year changes and the different methodologies which could be applied. There were discussions about current and future state initiatives and how those initiatives could affect the data and student outcomes. One example of the discussions is the implementation of the alternate pathway to graduation for students who participate in the alternate assessment in high school. The first cohort of students eligible to graduate under the pathway standards will occur in the 2022-23 school year. This initiative, while positive for the most significantly cognitively impaired students, it does count against the State's graduation percentage for Indicator 1. Another Initiative stakeholder discussed was the State's implementation of RISE and Science of Reading which will not only have a positive effect on student outcomes but also the APR indicator 3.   
  
Additional opportunities for stakeholder input and discussion on the State's progress occurs quarterly at the Advisory Council meeting, monthly LEA calls, and during various conferences such as the ADE Summit and the Special Education LEA Academy. Over the past two summers DESE-OSE provided training and feedback opportunities to LEAs across the State on the inclusion Initiative ALL IN. Many scenarios have been developed to illustrate how class and service schedules can be implemented to ensure ALL students have access to the general curriculum. The ALL IN initiative will directly affect multiple APR indicators as student access to the general curriculum increases.   
  
The inclusion of DESE and LEA special education staff in the implementation of state initiative’s such as THRIVE, ALL IN, and Professional Learning Communities (PLC) directly affect student access to quality core instruction. With greater access to rigorous instruction with peers with and without disabilities, outcomes and the results of these activities should be evident in the future.

**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.**

Stakeholder meetings in relation to target setting, data analysis and the development of improvement strategies for the FFY2020-2025 SPP/APR are posted on the special education public reporting web page.  
The website is: https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting

**Reporting to the Public**

**How and where the State reported to the public on the FFY 2020 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2020 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State’s SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.**

https://sites.ed.gov/idea/spp-apr-letters  
  
https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting

## Intro - Prior FFY 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.

**Response to actions required in FFY 2020 SPP/APR**

The OSE accessed technical assistance from numerous OSEP-funded technical assistance centers, other national groups, and outside consultants to improve general supervision to local programs with the ultimate goal of building local capacity to increase results for students with disabilities.  
  
National Center for Systemic Improvement (NCSI): Arkansas has worked with NCSI for the on-going implementation of the State Systemic Improvement Plan (SSIP) and other priority efforts. Arkansas is currently a member of the Cross-State Learning collaboratives including the SEA Leadership (SEAL) Collaborative, Results Based Accountability and Support (RBAS), Improving Low-Performing School Systems (LPSS), the SSIP Open Door Series, Universal Design for Learning Deep Dive Series, and Evidence-Based Practices (EBP) Collaborative.  
  
State Implementation Scaling-up Evidence-based Practices Center (SISEP): The SISEP staff are national advisors for the State Personnel Development Grant (SPDG). Specific technical assistance activities included facilitating the administration of the State Capacity Assessment for the Arkansas Division of Elementary and Secondary Education with a focus on RTI and inclusionary practices.   
  
American Institute of Research (AIR): Arkansas entered into a contract with AIR in December 2014 to support the implementation of a state Response to Intervention (RTI) model. The State’s partnership with AIR has continued through a contract with the State Personnel Development Grant (SPDG) awarded in October of 2020. AIR provides professional development and technical assistance on the development of micro-credentials for Universal Design for Learning and High-Leverage Practices. AIR’s approach to technical assistance and training in Arkansas is grounded in evidence-based practices of professional development and implementation science on scaling up evidence-based practices statewide. Technical assistance provided is three pronged: training, coaching, and statewide support for implementation.   
  
National Positive Behavior Interventions and Supports Center (PBIS): Arkansas contracted with the Arkansas State University (A-State) Center of Community Engagement to provide PBIS support across the state. Through the partnership with A-State, Arkansas has connected with the state contact from the National PBIS Center. These partnerships are allowing Arkansas to build PBIS capacity at the state, regional, district, and school levels, and support sustainability efforts with LEAs that have received intensive support from the OSE and SPDG.  
  
National Technical Assistance Center on Transition (NTACT): Arkansas has worked with NTACT for numerous projects over the years and has accessed technical assistance in the areas of dropout prevention, post-school outcomes, and secondary transition. Arkansas applied and was selected as a focus intensive state in 2020. As a focus state, the Arkansas Core Team includes staff from OSE, Arkansas Transition Services, Arkansas Rehabilitation Services, Career and Technical Education, post-secondary education, and Arkansas Division of Services for the Blind. The Core Team attends the Capacity Building Institute (CBI) annually. NTACT has supported our work with Local District Leadership Teams and the implementation of CIRCLES. There are currently 6 LEAs implementing Circles and Arkansas hopes to increase it to 30.   
  
IDEA Data Center (IDC): Arkansas has a long history of working with IDC and its predecessors. IDC has assisted with SPP/APR preparation, the Significant Disproportionality Institute, and facilitating Arkansas’ data process documentation. The Data Manager also serves as a reviewer for IDC TA tools.   
  
National Center for Educational Outcomes (NCEO): Arkansas is participating with the NCEO 1% Cap community of practice (CoP) and attends in-person and virtual meetings.  
  
Center for IDEA Fiscal Reporting (CIFR): CIFR has supported Arkansas in their documentation and creation of the fiscal procedural manual. Arkansas has participated in CIFR webinars and reviewed the state maintenance of financial support (SMFS) tools and resources along with maintenance of effort (MOE) tools and resources made available through CIFR.   
  
National Center Deaf-Blindness (NCDB): The Arkansas Deaf Blind Grant (known as CAYSI: Children and Youth with Sensory Impairments and Additional Disabilities) has been working with NCDB on the six national project focus areas: early identification, family engagement, interveners and quality personnel, literacy, the national child count, and transition.   
  
Early Childhood Technical Assistance Center (ECTA): The OSE Early Childhood Special Education team has used consultants from ECTA to help provide support for improving inclusive practices in Early Childhood Special Education. ECTA also provides support through Communities of Practice for Inclusion and Early Childhood Outcomes.  
  
CCSSO - State Collaborative on Assessment and Student Standards (SCASS), Advancing Inclusive Principal Leadership (AIPL) Initiative and the Education Information Management Advisory Collaborative (EIMAC).

## Intro - OSEP Response

The State's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2022 determination letter informed the State that it 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. The State provided the required information.

## Intro - Required Actions

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

## 1 - Indicator Data

**Historical Data[[1]](#footnote-2)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2018 | 87.56% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 85.00% | 85.10% | 85.91% | 86.72% | 88.00% |
| Data | 84.29% | 83.80% | 84.61% | 82.6%[[2]](#footnote-3) | 90.86% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 88.00% | 88.00% | 88.00% | 88.00% | 88.00% |

**Targets: Description of Stakeholder Input**

Arkansas selected the 2017-18 618 exiting data for the baseline year.   
  
Through various stakeholder input sessions, the stakeholders wanted an average of the three years prior to 2019-20 because of the effects from the pandemic. School year 2017-18 best represented the three year average. Discussions were held around using a standard deviation, moving average, annual percentage point change or selecting a flat rate similar to what the state had under NCLB. The final decision was to set a flat rate of 88% as the target for all years.  
  
In the 2022-23 school year, Arkansas will see it's first cohort of students graduate on the alternate diploma. We recognize that this group will be small and have already accounted for them when targets were set. Therefore, our stakeholders along with the State do not anticipate a change in targets in the future.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 3,601 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) |  |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 66 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 5 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 340 |

**FFY 2021 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma** | **Number of all youth with IEPs who exited special education (ages 14-21)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,601 | 4,012 | 90.86% | 88.00% | 89.76% | Met target | No Slippage |

**Graduation Conditions**

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

Students graduating from an Arkansas Public School or Public Charter School must meet or exceed the following state minimum 22 graduation credit requirements as adopted by the Arkansas State Board of Education.  
  
English Language Arts - 4 credits   
\*\* English 9 -12  
Mathematics - 4 credits   
\*\* Algebra I; Geometry; ADE Approved Mathematics; ADE Approved Mathematics or Computer Science Flex   
Science - 3 credits  
\*\* ADE approved biology; ADE approved physical science; ADE approved third science or Computer Science Flex  
Social Studies - 3 credits   
\*\*US History; World History; Civics; Economics and Personal Finance  
Oral Communication - 1/2 credit  
Physical Education - 1/2 credit  
Health & Safety - 1/2 credit  
Fine Arts - 1/2 credit  
Career Focus or Additional Content – 6 credits  
   
Additional Graduation Requirements  
\*\* Students must complete a digital course for credit – A.C.A. § 6-16-1406  
\*\* Students must earn a credit in a course that includes personal & family finance in grades 9-12 – A.C.A. § 6-16-135  
\*\* Students must pass the Arkansas Civics’ Exam – A.C.A. § 6-16-149  
\*\* Students must complete hands-on CPR training – A.C.A. § 6-16-143

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

NO

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

Arkansas fully re-opened schools in August 2020. Districts submitted plans which layout their process for mitigating the pandemic and the switching to virtual when needed. Most districts provided a virtual, blended, and on-site option for families. While COVID had an impact throughout the 2020-21 school year, it does not appear there was much of one in relation to graduation.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

Data Source

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

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

Measurement

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

Instructions

*Sampling is not allowed.*

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

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

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

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

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

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

## 2 - Indicator Data

**Historical Data[[3]](#footnote-4)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2018 | 10.69% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 2.29% | 2.14% | 1.98% | 1.82% | 10.00% |
| Data | 1.60% | 1.88% | 1.62% | 1.65% | 7.28% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 10.00% | 10.00% | 10.00% | 10.00% | 10.00% |

**Targets: Description of Stakeholder Input**

Arkansas selected the 2017-18 618 exiting data for the baseline year.  
  
Through various stakeholder input sessions, the stakeholders wanted to align the drop out baseline year with graduation. Target setting discussions were held around using a standard deviation, moving average, annual percentage point change or selecting a flat rate. The final decision was to set a flat rate of 10% as the target for all years. Ten percent is the average rate for the past few years prior to the pandemic. In addition, by setting the drop out targets to 10% and the graduation target to 88%, this allows Arkansas to account for the future alternate pathway graduates in the remaining 2% along with those students reaching maximum age and graduating with a certificate. The first cohort of pathway graduates will occur in 2022-23 school year.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 3,601 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) |  |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 66 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 5 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 340 |

**FFY 2021 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to dropping out** | **Number of all youth with IEPs who exited special education (ages 14-21)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 340 | 4,012 | 7.28% | 10.00% | 8.47% | Met target | No Slippage |

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

Students are considered a drop out if the district has no documentation (request for records) indicating that the student enrolled in another Arkansas school district, moved to another state or out of country, or enrolled in a private school. A student may also be considered a drop out if they are absent for more than ten school days without notice. If documentation is received, such as a request for records, the withdrawal code can be updated in the student management system. Students who leave prior to graduation to pursue the General Educational Development test leading to a General Equivalency Diploma (GED) are also considered drop outs.

**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)**

Arkansas fully re-opened schools in August 2020. Districts submitted plans which layout their process for mitigating the pandemic and the switching to virtual when needed. Most districts provided a virtual, blended, and on-site option for families. While COVID had an impact throughout the 2020-21 school year, it does not appear there was much of one in relation to drop outs.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 97.85% |
| Reading | B | Grade 8 | 2020 | 95.28% |
| Reading | C | Grade HS | 2020 | 93.00% |
| Math | A | Grade 4 | 2020 | 98.04% |
| Math | B | Grade 8 | 2020 | 95.75% |
| Math | C | Grade HS | 2020 | 93.85% |

**Targets**

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

**Targets: Description of Stakeholder Input**During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to maintain the 95% participation requirement of ESEA for all grade levels and subject matters across the years of the SPP.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 5,716 | 5,159 | 9,645 |
| b. Children with IEPs in regular assessment with no accommodations | 5,327 | 4,720 | 8,692 |
| c. Children with IEPs in regular assessment with accommodations | 6 | 12 | 20 |
| d. Children with IEPs in alternate assessment against alternate standards | 335 | 322 | 613 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 5,715 | 5,164 | 9,655 |
| b. Children with IEPs in regular assessment with no accommodations | 5,328 | 4,727 | 8,701 |
| c. Children with IEPs in regular assessment with accommodations | 9 | 38 | 75 |
| d. Children with IEPs in alternate assessment against alternate standards | 336 | 322 | 613 |

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

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 5,668 | 5,716 | 97.85% | 95.00% | 99.16% | Met target | No Slippage |
| **B** | Grade 8 | 5,054 | 5,159 | 95.28% | 95.00% | 97.96% | Met target | No Slippage |
| **C** | Grade HS | 9,325 | 9,645 | 93.00% | 95.00% | 96.68% | Met target | No Slippage |

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 5,673 | 5,715 | 98.04% | 95.00% | 99.27% | Met target | No Slippage |
| **B** | Grade 8 | 5,087 | 5,164 | 95.75% | 95.00% | 98.51% | Met target | No Slippage |
| **C** | Grade HS | 9,389 | 9,655 | 93.85% | 95.00% | 97.24% | Met target | No Slippage |

**Regulatory Information**

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

**Public Reporting Information**

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

Arkansas's publicly available assessment data can be found at https://myschoolinfo.arkansas.gov  
and  
https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting   
(scroll to bottom of page)

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

Arkansas's online testing platform provide ALL students with accommodation choices. Therefore, the accommodations specific to special education beyond the ALL accommodations has resulted with fewer number of students with disabilities (SWD) having personal need profiles indicating specific special education accommodations.

## 3A - Prior FFY Required Actions

None

## 3A - OSEP Response

## 3A - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3B - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 6.68% |
| Reading | B | Grade 8 | 2020 | 4.46% |
| Reading | C | Grade HS | 2020 | 3.56% |
| Math | A | Grade 4 | 2020 | 14.23% |
| Math | B | Grade 8 | 2020 | 3.54% |
| Math | C | Grade HS | 2020 | 2.58% |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 6.91% | 7.13% | 7.36% | 7.59% | 7.81% |
| Reading | B >= | Grade 8 | 4.73% | 5.01% | 5.27% | 5.55% | 5.83% |
| Reading | C >= | Grade HS | 3.71% | 3.85% | 3.99% | 4.14% | 4.29% |
| Math | A >= | Grade 4 | 14.57% | 14.90% | 15.24% | 15.57% | 15.91% |
| Math | B >= | Grade 8 | 3.83% | 4.11% | 4.40% | 4.69% | 4.98% |
| Math | C >= | Grade HS | 2.71% | 2.83% | 2.96% | 3.08% | 3.21% |

**Targets: Description of Stakeholder Input**

During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to establish the baseline using the data from school year 2020-21. Additionally, stakeholder feedback recommended increasing the targets for each grade and subject by one standard deviation by FFY 2025. Standard deviations were calculated for each grade and subject using current and historical data. The standard deviation(s) were proportionately applied to establish the year to year increases from baseline for each grade level and subject matter.  
  
Possible change of targets and baseline may occur after the implementation of a new regular assessment in 2023-24 school year.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 5,333 | 4,732 | 8,712 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 466 | 256 | 352 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | x[[4]](#footnote-5) | x4 | x4 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 5,337 | 4,765 | 8,776 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 717 | 199 | 191 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | x4 | x4 | x4 |

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | x4 | 5,333 | x4 | 6.91% | x4 | Met target | No Slippage |
| **B** | Grade 8 | x4 | 4,732 | x4 | 4.73% | x4 | Met target | No Slippage |
| **C** | Grade HS | x4 | 8,712 | x4 | 3.71% | x4 | Met target | No Slippage |

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | x[[5]](#footnote-6) | 5,337 | x5 | 14.57% | x5 | Did not meet target | No Slippage |
| **B** | Grade 8 | x5 | 4,765 | x5 | 3.83% | x5 | Met target | No Slippage |
| **C** | Grade HS | x5 | 8,776 | x5 | 2.71% | x5 | Did not meet target | Slippage |

**Provide reasons for slippage for Group C, if applicable**

Pursuant to the ESSA requirement that States assess 1% or fewer of their students with the alternate assessment, Arkansas has aggressively put actions in place to ensure that only students with the most significant cognitive disabilities participate in the alternate assessment. These actions included adopting new alternate assessment criteria and providing significant technical assistance to districts that were over the 1%. Based on this work, Arkansas has lowered the percentage of students who participate in the alternate assessment from well over 1% to below 1%. The students who have moved from the alternate assessment to general assessment were students with complex needs but who did not meet the criteria as having the most significant cognitive disabilities. These students were typically the highest functioning students who had participated in the alternate assessment. Since students with complex needs now participate in the general assessment, the proficiency rate for students with disabilities on the general assessment has slipped. Also, since the students who previously performed at the higher range on the alternate assessment no longer participate in that assessment, the overall proficiency rate for the alternate assessment also slipped.

**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.**

Arkansas's publicly available assessment data can be found at https://myschoolinfo.arkansas.gov/ and   
https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting

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

Arkansas test high school students in both grades 9 and 10; therefore, the HS numbers appear higher than expected since it represents both grade levels.  
  
Arkansas's online testing platform provide ALL students with accessibility features; therefore, the accommodations specific to special education beyond the ALL accessibility features has resulted with fewer number of SWD having personal need profiles indicating specific special education accommodations. This is different than how the state has received the accommodation data in the past from the testing company.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

## 3B - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

of testing.

## 3C - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 30.57% |
| Reading | B | Grade 8 | 2020 | 15.00% |
| Reading | C | Grade HS | 2020 | 11.21% |
| Math | A | Grade 4 | 2020 | 11.50% |
| Math | B | Grade 8 | 2020 | 12.04% |
| Math | C | Grade HS | 2020 | 15.21% |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 32.66% | 34.74% | 36.83% | 38.91% | 40.99% |
| Reading | B >= | Grade 8 | 17.87% | 19.96% | 22.05% | 24.13% | 26.22% |
| Reading | C >= | Grade HS | 16.35% | 18.43% | 20.52% | 22.60% | 24.69% |
| Math | A >= | Grade 4 | 14.92% | 18.35% | 21.77% | 25.20% | 28.62% |
| Math | B >= | Grade 8 | 16.30% | 20.56% | 24.82% | 29.08% | 33.33% |
| Math | C >= | Grade HS | 19.22% | 23.24% | 27.25% | 31.26% | 35.28% |

**Targets: Description of Stakeholder Input**During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to establish the baseline using data from the 2020/21 school year. Additionally, stakeholder feedback recommended increasing the targets for each grade level and subject matter using a full or partial standard deviation. Standard deviations were calculated for each grade and subject using current and historical data. Based on the historical and current data, math targets were set to increase by 1/3 of a standard deviation by FFY 2025 for all grades. For reading language arts, fourth grade targets are set to increase by a full standard deviation by FFY 2025; eighth grade will increase by 1/2 of a standard deviation, and high school will increase by 1/4 of a standard deviation. All interim year targets were proportionately increased for grade level and subject matter, accordingly.  
  
With stakeholder input, Arkansas revised its criteria for alternate assessment participation. Over the past three years the percent of students participating in the alternate assessment has fallen below the 1% ESSA requirement.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 335 | 322 | 613 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 122 | 51 | 56 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 336 | 322 | 613 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 57 | 44 | 88 |

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 122 | 335 | 30.57% | 32.66% | 36.42% | Met target | No Slippage |
| **B** | Grade 8 | 51 | 322 | 15.00% | 17.87% | 15.84% | Did not meet target | No Slippage |
| **C** | Grade HS | 56 | 613 | 11.21% | 16.35% | 9.14% | Did not meet target | Slippage |

**Provide reasons for slippage for Group C, if applicable**

Pursuant to the ESSA requirement that States assess 1% or fewer of their students with the alternate assessment, Arkansas has aggressively put actions in place to ensure that only students with the most significant cognitive disabilities participate in the alternate assessment. These actions included adopting new alternate assessment criteria and providing significant technical assistance to districts that were over the 1%. Based on this work, Arkansas has lowered the percentage of students who participate in the alternate assessment from well over 1% to below 1%. The students who have moved from the alternate assessment to general assessment were students with complex needs but who did not meet the criteria as having the most significant cognitive disabilities. These students were typically the highest functioning students who had participated in the alternate assessment. Since students with complex needs now participate in the general assessment, the proficiency rate for students with disabilities on the general assessment has slipped. Also, since the students who previously performed at the higher range on the alternate assessment no longer participate in that assessment, the overall proficiency rate for the alternate assessment also slipped.

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 57 | 336 | 11.50% | 14.92% | 16.96% | Met target | No Slippage |
| **B** | Grade 8 | 44 | 322 | 12.04% | 16.30% | 13.66% | Did not meet target | No Slippage |
| **C** | Grade HS | 88 | 613 | 15.21% | 19.22% | 14.36% | Did not meet target | No Slippage |

**Regulatory Information**

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

**Public Reporting Information**

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

Arkansas's publicly available assessment data can be found at https://myschoolinfo.arkansas.gov/ and   
https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting

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

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

## 3C - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

**Data Source**

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

**Measurement**

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

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

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

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3D - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2018 | 35.74 |
| Reading | B | Grade 8 | 2018 | 43.33 |
| Reading | C | Grade HS | 2018 | 38.14 |
| Math | A | Grade 4 | 2018 | 34.34 |
| Math | B | Grade 8 | 2018 | 41.47 |
| Math | C | Grade HS | 2018 | 28.71 |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 34.74 | 34.24 | 33.74 | 33.24 | 32.74 |
| Reading | B <= | Grade 8 | 42.20 | 41.65 | 41.10 | 40.55 | 40.00 |
| Reading | C <= | Grade HS | 36.80 | 36.16 | 35.16 | 34.79 | 34.12 |
| Math | A <= | Grade 4 | 33.32 | 32.81 | 32.30 | 31.79 | 31.28 |
| Math | B <= | Grade 8 | 38.77 | 37.42 | 36.07 | 34.72 | 33.37 |
| Math | C <= | Grade HS | 27.78 | 27.31 | 26.84 | 26.38 | 25.91 |

**Targets: Description of Stakeholder Input**

In preparation of the stakeholder sessions addressing assessment, the student level assessment datasets which are the source files for the EDFacts submissions, were analyzed using the new gap measurement requirement in accordance the with measurement table. The data was compiled for each year for which the statewide general assessment was ACT ASPIRE. During the stakeholder virtual and in person meetings on assessment, stakeholders reviewed gap data for prior assessment administrations and agreed to establish the baseline using school year 2018-19 pre-COVID assessment data. They believed the pre-COVID data was more of an accurate representation of the GAP than the 2020-21 assessment results. Additionally, stakeholders recommended decreasing the targets for each grade level and subject matter using a full standard deviation. Standard deviations were calculated for each grade and subject using current and historical data. The targets are to decrease by one standard deviation by FFY 2025. The standard deviation is proportionately applied for the interim year targets.   
  
Arkansas will be implementing a new regular assessment during the 2023-24 school year. We will work with stakeholders at that time a determine if a new baseline or targets are warranted

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 35,316 | 37,873 | 73,013 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 5,333 | 4,732 | 8,712 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 13,331 | 17,622 | 28,405 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | x[[6]](#footnote-7) | x6 | x6 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 466 | 256 | 352 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | x6 | x6 | x6 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 35,337 | 37,987 | 73,339 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 5,337 | 4,765 | 8,776 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 14,828 | 14,646 | 19,666 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | x6 | x6 | x6 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 717 | 199 | 191 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | x6 | x6 | x6 |

**FFY 2021 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards** | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | x[[7]](#footnote-8) | x7 | 29.56 | 34.74 | 29.01 | Met target | No Slippage |
| **B** | Grade 8 | x7 | x7 | 38.65 | 42.20 | 41.12 | Met target | No Slippage |
| **C** | Grade HS | x7 | x7 | 33.97 | 36.80 | 34.85 | Met target | No Slippage |

**FFY 2021 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards** | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | x7 | x7 | 28.84 | 33.32 | 28.53 | Met target | No Slippage |
| **B** | Grade 8 | x7 | x7 | 32.67 | 38.77 | 34.38 | Met target | No Slippage |
| **C** | Grade HS | x7 | x7 | 21.68 | 27.78 | 24.64 | Met target | No Slippage |

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

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

## 3D - Required Actions

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

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

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 30.14% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 30.14% | 30.00% | 29.50% | 29.50% | 29.80% |
| Data | 30.14% | NVR | 30.51% | 29.51% | 10.53% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 29.50% | 29.20% | 28.90% | 28.60% | 28.30% |

**Targets: Description of Stakeholder Input**

The measurement of the indicator was discussed with stakeholders and they agreed to keep the current methodology and criteria for identifying districts as having a significant discrepancy in discipline. With the 2019-20 and 2020-21 discipline data being highly affected by the pandemic, the decision was made with stakeholder feedback to decrease the targets annually by 0.3 percentage points. There is no change to the baseline year.

**FFY 2021 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 0 | 0 | 10.53% | 29.50% |  | N/A | N/A |

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

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

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

The State's special education benchmark for suspension/expulsion (s/e) rate is a state three-year average difference between LEA rates for general education students as compared to children with disabilities greater than 10 days out-of-school suspension/expulsion. The state's three-year average difference is 1.36 percentage points which creates the threshold difference for Indicator 4A.   
  
An LEA with a comparative percentage point difference greater than 1.36 is identified as having a significant discrepancy. Arkansas collects student discipline data at the individual student level for all students through the statewide student management system. Discipline data are submitted to the Office of Information Technology during Cycle 7 (June) each year. Upon closing the cycle, the DESE-OSE receives two data pulls, an aggregate unduplicated count of general education students meeting the greater than 10 days out of school suspensions or expulsions criteria along with the general education enrollment count by LEA to establish the general education rate. The second data set is a student level discipline file for children with disabilities which is aggregated into the 618 reporting. This data set along with child count for the denominator establishes the special education discipline rate. These data sets allow for the comparative analysis   
  
Arkansas has an established minimum cell size of five (5). Once the calculation has been finalized, LEAs with less than five special education students who have greater than 10 days OSS are excluded for being identified as having a significant discrepancy. After exclusions are made, the number of districts identified with significant discrepancy (greater than 1.36) are reported in the APR as the numerator. The total number of districts with five or more special education students with OSS/expulsion greater than 10 days are reported as the denominator.   
  
Local education agencies are identified, using a single year of data, as having a significant difference in special education discipline for the specific year if the special education rate is 1.36 percentage points higher than the rate for general education students. The formula is presented below.   
  
Formula: Suspension/expulsion rate for children with disabilities – Suspension/expulsion rate for general education students = Difference between Special Education & General Education students.

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

This indicator was highly affected by the pandemic, even though Arkansas schools were open in August 2020. The 2020-21 data had a significant drop in disciplinary records with more than 2/3 of the special education students in Arkansas having received their education virtually. This is evident in the data being reported for the indicator. For the first time since the calculation changed Arkansas is reporting zero districts met the minumum cell size of 5. Zero districts had 5 or more students receiving out-of-school suspsension/expulsion for greater than 10 days.

**Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)**

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

Zero districts were required to complete a review of policies, procedures, and practices.   
  
However, the process is presented below if one is required to complete a review of policies, procedures, and practices.  
  
An LEA self-assessment tool is used for the review of policies, procedures, and practices. The self-assessment tool required a team approach and review of student level data for completion. The self-assessment tool can be accessed at https://dese.ade.arkansas.gov/Offices/special-education/monitoring-and-program-effectiveness/monitoring-procedures. Within the self-assessment, questions range from parent notification of removal and timeline for manifestation meetings to functional behavioral assessments and behavioral intervention plans.   
  
If required, districts complete and submitted their self-assessment for review by the Special Education MPE section. If an LEA fails to comply with any requests, the State Director of Special Education is notified for further action. Once the reviews are completed a letter is sent to the district superintendent and special education administrator of the district’s compliance.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

The one district with findings was cited for failure to complete the required Compliance Action Plan issued to the district because of inappropriate policies, procedures, and practices on the self-assessments for Indicators 4A & 4B and significant disproportionality, and the tracking of students served under CCEIS. Since both the APR and CCEIS dealt with discipline, a single finding was issued. The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the corrective action plan (CAP), and other data to determine if additional requirements related to their IDEA budgets will be enforced.   
  
Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district was required to provide a copy of the special education bi-monthly leadership meeting agendas. The district was also required to develop a Special Education Procedure and Process manual with specific review deadlines established. They submitted a copy of the Procedure manual to DESE-OSE.  
  
The Office of Coordinated Support and Service (OCSS) provides assistance to school districts which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. The OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.  
  
With the assistance of the OCSS staff and OSE staff, all required documentation was submitted and the OSE was able to clear the finding and verify the district is correctly implementing the regulatory requirements.

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

The finding was not an individual case of non-compliance. The one district in question was cited for failure to complete the required Compliance Action Plan issued to the district because of inappropriate policies, procedures, and practices on the self-assessments for Indicators 4A, 4B and significant disproportionality, and the tracking of students served under CCEIS. Since both dealt with discipline a single finding was issued.   
  
The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the CAP, and other data to determine if additional requirements related to their IDEA budgets will be enforced.   
  
Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district was required to provide a copy of the special education bi-monthly leadership meeting agendas. The district was also required to develop a Special Education Procedure and Process manual with specific review deadlines established. They submitted a copy of the Procedure manual to DESE-OSE.  
  
The Office of Coordinated Support and Service (OCSS) provides assistance to school districts which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.  
  
With the assistance of the OCSS staff and OSE staff, all required documentation was submitted and the OSE was able to clear the finding and verify the district is correctly implementing the regulatory requirements.

## 4A - Prior FFY Required Actions

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

**Response to actions required in FFY 2020 SPP/APR**

As previously denoted the finding was not an individual case of non-compliance, but a district-level case of non-compliance.   
  
Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district was required to provide a copy of the special education bi-monthly leadership meeting agendas. The district was also required to develop a Special Education Procedure and Process manual with specific review deadlines established. They submitted a copy of the Procedure manual to DESE-OSE.  
  
During the monthly calls with the LEA, each outstanding item was review with a progress update. The LEA completed all required actions described above and submitted documentation indicating the compliance within the designated timelines.  
  
The Office of Coordinated Support and Service (OCSS) provides assistance to any school district for which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS continues to support the LEA now that the long-standing non-compliance is corrected to prevent future non-compliance.  
  
With the assistance of the OCSS staff and OSE staff, all required documentation was submitted and the OSE was able to clear the finding and verify the district is correctly implementing the regulatory requirements.

## 4A - OSEP Response

In the FFY 2021 SPP/APR the State included none of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "This indicator was highly affected by the pandemic, even though Arkansas schools were open in August 2020. The 2020-21 data had a significant drop in disciplinary records with more than 2/3 of the special education students in Arkansas having received their education virtually. This is evident in the data being reported for the indicator. For the first time since the calculation changed Arkansas is reporting zero districts met the minimum cell size of 5. Zero districts had 5 or more students receiving out-of-school suspension/expulsion for greater than 10 days." OSEP reminds the State that if the examination for significant discrepancies in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

## 4A - Required Actions

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

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

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

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | NVR | 0.38% | 0.38% | 0.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 0% | 0% | 0% | 0% | 0% |

**FFY 2021 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy, by race or ethnicity** | **Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 0 | 0 | 0 | 0.00% | 0% |  | N/A | N/A |

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

YES

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

The measurement for 4B uses a percentage point difference calculation within the LEA for a single year. The calculation is the difference of a specific race for SWD with suspension/expulsion exceeding 10 days minus the percent of all general education students with suspension/expulsion exceeding 10 days within the LEA. The following criteria are applied after the percent difference is calculated:  
  
Special Education Child Count must have more than 40 students or  
Special Education Child Count must have more than 10 students in a particular race/ethnicity or  
Special Education OSS count is less than 5 (this aligns with Indicator 4A)  
  
Districts identified as having a percentage point difference greater than 4.00 (special education suspension/expulsion rate for a specific race is more than four percentage points higher than general education suspension/expulsion rate), and that are not excluded by the criteria above, is required to submit a self-assessment for the review of discipline policies, procedures, and practices.

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

This indicator was highly affected by the pandemic, even though Arkansas schools were open in August 2020. The 2020-21 data had a significant drop in disciplinary records with more than 2/3 of the special education students in Arkansas having received their education virtually. This is evident in the data being reported for the indicator. For the first time since the calculation changed Arkansas is reporting zero districts met the minumum cell and N size.

**Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)**

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

An LEA self-assessment tool is used for the review of policies, procedures, and practices. The self-assessment tool required a team approach and review of student level data for completion. The self-assessment tool can be accessed at https://dese.ade.arkansas.gov/Offices/special-education/monitoring-and-program-effectiveness/monitoring-procedures. Within the self-assessment, questions range from parent notification of removal and timeline for manifestation meetings to functional behavioral assessments and behavioral intervention plans.   
  
If an LEA is flagged they must submit a self-assessment. The staff of the Special Education MPE section reviews the completed self-assessments and will determine if a district had any inappropriate policies, procedures, and practices.   
  
If an LEA fails to comply with any requests, the State Director of Special Education is notified for further action. Once the reviews are completed a letter is sent to the district superintendent and special education administrator of the district’s compliance.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

The one district with findings was cited for failure to complete the required Compliance Action Plan issued to the district because of inappropriate policies, procedures, and practices on the self-assessments for Indicators 4A & 4B and significant disproportionality, and the tracking of students served under CCEIS. Since both the APR and CCEIS dealt with discipline a single finding was issued. The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the corrective action plan (CAP), and other data to determine if additional requirements related to their IDEA budgets will be enforced.   
  
Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district was required to provide a copy of the special education bi-monthly leadership meeting agendas. The district was also required to develop a Special Education Procedure and Process manual with specific review deadlines established. They submitted a copy of the Procedure manual to DESE-OSE.  
  
The Office of Coordinated Support and Service (OCSS) provides assistance to school districts which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. The OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.  
  
With the assistance of the OCSS staff and OSE staff, all required documentation was submitted and the OSE was able to clear the finding and verify the districts is correctly implementing the regulatory requirements.

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

The finding was not an individual case of non-compliance. The one district in question was cited for failure to complete the required Compliance Action Plan issued to the district because of inappropriate policies, procedures, and practices on the self-assessments for Indicators 4A, 4B and significant disproportionality, and the tracking of students served under CCEIS. Since both dealt with discipline a single finding was issued.   
  
The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the CAP, and other data to determine if additional requirements related to their IDEA budgets will be enforced.   
  
Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district was required to provide a copy of the special education bi-monthly leadership meeting agendas. The district was also required to develop a Special Education Procedure and Process manual with specific review deadlines established. They submitted a copy of the Procedure manual to DESE-OSE.  
  
The Office of Coordinated Support and Service (OCSS) provides assistance to school districts which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.  
  
With the assistance of the OCSS staff and OSE staff, all required documentation was submitted and the OSE was able to clear the finding and verify the districts is correctly implementing the regulatory requirements.

## 4B - Prior FFY Required Actions

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

**Response to actions required in FFY 2020 SPP/APR**

As previously denoted the finding was not an individual case of non-compliance, but a district-level case of non-compliance.   
  
Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district was required to provide a copy of the special education bi-monthly leadership meeting agendas. The district was also required to develop a Special Education Procedure and Process manual with specific review deadlines established. They submitted a copy of the Procedure manual to DESE-OSE.  
  
During the monthly calls with the LEA, each outstanding item was review with a progress update. The LEA completed all required actions described above and submitted documentation indicating the compliance within the designated timelines.  
  
The Office of Coordinated Support and Service (OCSS) provides assistance to any school district for which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS continues to support the LEA now that the long-standing non-compliance is corrected to prevent future non-compliance.  
  
With the assistance of the OCSS staff and OSE staff, all required documentation was submitted and the OSE was able to clear the finding and verify the districts is correctly implementing the regulatory requirements.

## 4B - OSEP Response

In the FFY 2021 SPP/APR the State included none of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP recognizes the State reported, "This indicator was highly affected by the pandemic, even though Arkansas schools were open in August 2020. The 2020-21 data had a significant drop in disciplinary records with more than 2/3 of the special education students in Arkansas having received their education virtually. This is evident in the data being reported for the indicator. For the first time since the calculation changed Arkansas is reporting zero districts met the minimum cell and N size." OSEP reminds the State that if the examination for significant discrepancies, by race and ethnicity, in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

## 4B- Required Actions

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

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Inside the regular class 80% or more of the day;

B. Inside the regular class less than 40% of the day; and

C. In separate schools, residential facilities, or homebound/hospital placements.

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

**Data Source**

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

**Measurement**

A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)]times 100.

**Instructions**

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

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

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

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2019 | Target >= | 59.85% | 61.81% | 63.77% | 56.94% | 57.32% |
| A | 56.94% | Data | 53.08% | 53.34% | 54.32% | 56.94% | 58.83% |
| B | 2019 | Target <= | 12.64% | 12.16% | 12.00% | 12.18% | 12.08% |
| B | 12.18% | Data | 13.40% | 13.15% | 12.72% | 12.18% | 11.66% |
| C | 2019 | Target <= | 2.46% | 2.43% | 2.40% | 2.01% | 1.99% |
| C | 2.01% | Data | 2.30% | 2.14% | 2.05% | 2.01% | 1.92% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 57.70% | 58.07% | 58.45% | 58.82% | 59.20% |
| Target B <= | 11.98% | 11.88% | 11.78% | 11.68% | 11.58% |
| Target C <= | 1.99% | 1.99% | 1.99% | 1.99% | 1.99% |

**Targets: Description of Stakeholder Input**

During the stakeholder virtual and in person meetings on school age educational environment stakeholders were informed that the baseline year was already established in the prior SPP/APR when we changed the data set. For the FFY 2020-2025 targets they recommended setting the targets for 5A to increase and 5B to decrease by one standard deviation by FFY 2025 and set 5C at a flat rate of 1.99%.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 68,275 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 40,832 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 7,890 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 412 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 542 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 261 |

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

NO

**FFY 2021 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 5 (kindergarten) through 21 served** | **Total number of children with IEPs aged 5 (kindergarten) through 21** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 40,832 | 68,275 | 58.83% | 57.70% | 59.81% | 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 | 7,890 | 68,275 | 11.66% | 11.98% | 11.56% | 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] | 1,215 | 68,275 | 1.92% | 1.99% | 1.78% | Met target | No Slippage |

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

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

C. Receiving special education and related services in the home.

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

**Data Source**

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

**Measurement**

A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

**Instructions**

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A** | Target >= | 33.95% | 34.93% | 35.94% | 20.74% | 21.44% |
| **A** | Data | 26.78% | 28.17% | 29.04% | 20.74% | 18.77% |
| **B** | Target <= | 29.83% | 28.61% | 26.65% | 20.21% | 19.73% |
| **B** | Data | 29.89% | 27.27% | 23.74% | 20.21% | 21.71% |

**Targets: Description of Stakeholder Input**

During the stakeholder virtual and in person meetings on preschool educational environment stakeholders were informed that the baseline year was already established in the prior SPP/APR for 6A and 6B when we changed the data set. The stakeholders agreed on using the FFY2020 data for the 6C baseline. Additional, discussions resulted in selecting a full or partial standard deviation to establish the FFY 2020-2025 targets. Indicator 6A and 6C will improve by a one standard deviation by FFY 2025 and 6B will improve by 1/2 of a standard deviation.

**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 | 20.74% |
| **B** | 2019 | 20.21% |
| **C** | 2020 | 1.08% |

**Inclusive Targets – 6A, 6B**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 22.13% | 22.83% | 23.53% | 24.22% | 24.92% |
| Target B <= | 19.25% | 18.77% | 18.29% | 17.81% | 17.31% |

**Inclusive Targets – 6C**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C <= | 1.04% | 1.00% | 0.96% | 0.92% | 0.88% |

**Prepopulated Data**

**Data Source:**

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

**Date:**

07/06/2022

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 2,678 | 4,619 | 2,172 | 9,469 |
| 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 | 481 | 837 | 440 | 1,758 |
| b1. Number of children attending separate special education class | 45 | 74 | 24 | 143 |
| b2. Number of children attending separate school | 663 | 813 | 429 | 1,905 |
| b3. Number of children attending residential facility | 0 | 1 | 3 | 4 |
| c1**.** Numberof children receiving special education and related services in the home | 5 | 19 | 11 | 35 |

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

NO

**FFY 2021 SPP/APR Data - Aged 3 through 5**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 1,758 | 9,469 | 18.77% | 22.13% | 18.57% | Did not meet target | No Slippage |
| B. Separate special education class, separate school or residential facility | 2,052 | 9,469 | 21.71% | 19.25% | 21.67% | Did not meet target | No Slippage |
| C. Home | 35 | 9,469 | 1.08% | 1.04% | 0.37% | Met target | No Slippage |

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

The Office of Special Education, Early Childhood Special Education (ECSE) program has formed a state-level collaborative team to address Least Restrictive Environment (LRE) in early childhood. This group consists of members from Part B, Part C, various community-based preschool programs, state funded preschool, Head Start, local education agencies, higher education, parents of children with disabilities and other stakeholders. The team is currently working around three main topics – family engagement, public awareness and professional learning. The ECSE staff used feedback from the team to provide professional learning opportunities and Communities of Practice Calls on LRE during the 2022-23 school year. The Early Childhood Special Education team is also working with local education agencies to develop implementation sites where other LEAs can visit and observe best practices to aid them in developing plans to improve their LRE data.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.

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

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

d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

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

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

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

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

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

**Instructions**

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

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A1 | 2008 | Target >= | 90.60% | 91.08% | 91.56% | 91.56% | 89.16% |
| A1 | 89.56% | Data | 85.13% | 84.39% | 87.89% | 88.70% | 87.32% |
| A2 | 2008 | Target >= | 67.76% | 68.24% | 68.72% | 68.72% | 66.32% |
| A2 | 68.61% | Data | 56.66% | 57.89% | 57.92% | 63.66% | 62.57% |
| B1 | 2008 | Target >= | 91.42% | 91.90% | 92.38% | 92.38% | 89.98% |
| B1 | 89.64% | Data | 85.26% | 85.98% | 89.49% | 89.53% | 87.98% |
| B2 | 2008 | Target >= | 58.17% | 59.64% | 61.11% | 61.11% | 57.17% |
| B2 | 59.74% | Data | 45.67% | 45.68% | 45.15% | 48.27% | 47.93% |
| C1 | 2008 | Target >= | 91.17% | 91.65% | 92.13% | 92.13% | 90.71% |
| C1 | 91.68% | Data | 85.93% | 86.59% | 90.63% | 90.68% | 88.85% |
| C2 | 2008 | Target >= | 75.46% | 76.93% | 78.00% | 78.40% | 75.95% |
| C2 | 77.81% | Data | 65.54% | 64.97% | 65.22% | 70.18% | 70.08% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 89.64% | 90.12% | 90.60% | 91.08% | 91.56% |
| Target A2 >= | 66.80% | 67.28% | 67.76% | 68.24% | 68.72% |
| Target B1 >= | 90.46% | 90.64% | 91.42% | 91.90% | 92.38% |
| Target B2 >= | 56.21% | 57.19% | 58.17% | 59.64% | 61.11% |
| Target C1 >= | 89.73% | 90.21% | 91.17% | 91.65% | 92.13% |
| Target C2 >= | 94.97% | 93.99% | 75.46% | 76.93% | 78.00% |

**Targets: Description of Stakeholder Input**

At the various stakeholder meeting discussing Indicator 7: EC Outcomes, participants noticed that the targets have rarely been met. As the different methodologies for setting targets were presented, stakeholders kept going back to the fact that previous targets were not being met. The baseline is 2008 and historically, the data have fluctuated little (within a few percentage points) from year to year. Taking the discussion into account, the final decision was to carry the targets from the previous SPP into this six-year SPP.

**FFY 2021 SPP/APR Data**

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

4,848

**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 | 18 | 0.37% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 333 | 6.87% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,365 | 28.16% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,816 | 37.46% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,316 | 27.15% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 3,181 | 3,532 | 87.32% | 89.64% | 90.06% | Met target | No Slippage |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 3,132 | 4,848 | 62.57% | 66.80% | 64.60% | Did not meet target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 16 | 0.33% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 423 | 8.73% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,061 | 42.51% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,970 | 40.64% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 378 | 7.80% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 4,031 | 4,470 | 87.98% | 90.46% | 90.18% | Did not meet target | No Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,348 | 4,848 | 47.93% | 56.21% | 48.43% | Did not meet target | No Slippage |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 14 | 0.29% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 265 | 5.47% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,139 | 23.49% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,004 | 41.34% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,426 | 29.41% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.  *Calculation:(c+d)/(a+b+c+d)* | 3,143 | 3,422 | 88.85% | 89.73% | 91.85% | Met target | No Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  *Calculation: (d+e)/(a+b+c+d+e)* | 3,430 | 4,848 | 70.08% | 94.97% | 70.75% | Did not meet target | No Slippage |

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

YES

| **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 data collection is based on a census of all children with IEPs who had both entry and exit COS scores and exited early childhood special education because they no longer required services, were kindergarten eligible, or the parents withdrew consent for services, and the children received at least six months of services. Early childhood programs are permitted to use various assessment instruments, but they must use the child outcomes summary (COS) form and utilize a team approach, which includes the parents, for determining a child’s entry and/or exit scores for each outcome area. In the 2016-2017 school year, the COS was integrated into the IEP process and was fully implemented in the 2017-2018 school year.

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

The first step to increase outcomes is ensuring children are being served in their Least Restrictive Environment (LRE). The Office of Special Education, Early Childhood Special Education (ECSE) program has formed a state-level collaborative team to address LRE in the early childhood setting. This group consists of members from Part B, Part C, various community-based preschool programs, state funded preschool, Head Start, local education agencies, higher education, parents of children with disabilities, and other stakeholders. The ECSE team used feedback to provide LRE and Outcomes trainings during the 2022-2023 school year and will offer these trainings in the 2023-2024 school year.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

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

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

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

## 8 - Indicator Data

| **Question** | **Yes / No** |
| --- | --- |
| Do you use a separate data collection methodology for preschool children? | YES |
| If yes, will you be providing the data for preschool children separately? | YES |

**Targets: Description of Stakeholder Input**

During the stakeholder sessions, Indicator 8 Family Involvement data was shared with both school age and early childhood participants. Both groups recognized that Arkansas rarely reaches the established targets. Through their review of the historical data trends and proposed target setting methodologies and applied results, there was no clear conclusion as to which methodology would be best. In presenting the stakeholder meeting results to the state advisory council, the question was brought up about applying the targets from the previous SPP to this iteration since the state rarely met them. In the end, the decision was to bring forward the previous SPP targets.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Preschool | 2005 | Target >= | 92.88% | 93.86% | 94.84% | 94.84% | 89.94% |
| Preschool | 82.92% | Data | 92.32% | 92.26% | 93.83% | 91.12% | 90.55% |
| School age | 2005 | Target >= | 95.49% | 95.97% | 96.45% | 96.45% | 94.05% |
| School age | 95.35% | Data | 93.18% | 95.45% | 95.82% | 96.52% | 96.23% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 90.92% | 91.90% | 92.88% | 93.86% | 94.84% |
| Target B >= | 94.53% | 95.01% | 95.49% | 95.97% | 96.45% |

**FFY 2021 SPP/APR Data: Preschool Children Reported Separately**

| **Group** | **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Preschool | 2,844 | 3,111 | 90.55% | 90.92% | 91.42% | Met target | No Slippage |
| School age | 15,318 | 15,960 | 96.23% | 94.53% | 95.98% | Met target | No Slippage |

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

77,744

**Percentage of respondent parents**

24.53%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Response Rate | 24.82% | 24.53% |

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

Arkansas will continue to train LEAs on the preparation, collection, and submission of the family surveys. Each February the IDEA Data & Research Office, in its newsletter, reminds LEAs that they are required to (1) offer every child’s parent/guardian the opportunity to participate in the survey; and (2) submit the survey data to the DESE-OSE no later than July 15th. The newsletter provides strategies for improving response rates along with instructions on how to complete the surveys online via a secure website or by mailing all completed scan forms to the IDEA Data & Research Office for scanning.  
  
Most LEAs offer the survey to families at Annual Review meetings. Since most meetings were being conducted virtually, due to COVID, IDEA Data & Research provided documents LEAs could share with families on how to complete the survey online. The instructions are available in English and Spanish, the same as the surveys.   
  
The DESE-OSE monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2023. Further, the DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunity to participate in the family survey.

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

While the response rate dropped slightly from the previous year, an examination of the actual response rates compared to the number of students in the December 1 child count for the demographic categories of race/ethnicity and disability found minimal over- or under-representation. Further, if an LEA had a zero-response rate for the family outcomes survey, the data manager send the MPE section a list of the LEAs for further action. These LEAs must provide evidence that the family was given the opportunity to participate in the survey. The DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunity to participate in the family survey.  
   
Most LEAs offer the survey to families at Annual Review meetings. Annual review meetings were conducted in-person and virtually this past-year. Based on our analysis of the responses, if a non-response bias exists it may be linked to holding more virtual IEP meetings. Since the pandemic and the increasing use of virtual meetings, the number of respondent parents has slightly declined. Providing families, the information to login to the survey and completing it at their convenience is not the same as being face-to-face and completing the survey while attending the meeting in person. IDEA Data & Research provided documents LEAs could share with families on how to complete the survey online. The instructions were available in English and Spanish, the same as the surveys.   
  
Arkansas will continue to work with LEAs on the preparation, collection, and submission of the family surveys. Each February the IDEA Data & Research Office, in its newsletter, reminds LEAs that they are required to (1) offer every child’s parent/guardian the opportunity to participate in the survey; and (2) submit the survey data to the DESE-OSE no later than July 15th. The newsletter provides strategies for improving response rates along with instructions on how to complete the surveys online via a secure website or by mailing all completed scan forms to the IDEA Data & Research Office for scanning.  
  
The DESE-OSE monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2022. Further, the DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunity to participate in the family survey.

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

The number of responding parents/guardians increased in 2021-2022 for early childhood programs; however, it declined for school age programs. Arkansas analyzes both race/ethnicity and primary disability categories for representativeness   
  
Using a +/- 3% as the criteria to identify over- or under-representativeness, families of CWD in early childhood programs are representative in all disability categories by race except developmental delay (-9.58) were families of white children remain underrepresented. Early childhood responses were also slightly underrepresented in the racial/ethnic group of white at -3.06; an improvement of 0.50. Additionally, 6.42% of respondents did not indicate the child's race and/or disability.   
  
Hispanic families of CWD in school age programs are under-represented at -6.00 percentage points. It should be noted that 12.89% of respondents failed to indicate the child's racial/ethnic and/or disability group. Even with improved representativeness there is a need for continual training on the preparation, collection, and submission of the family surveys.  
  
Alouth representativeness is met for most areas, there is a need for continued training on the preparation, collection, and submission of the family surveys.

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**

Arkansas will continue to train LEAs on the preparation, collection, and submission of the family surveys via webinars and face-to-face meetings. Additionally, each February the IDEA Data & Research Office, in its newsletter, reminds LEAs that they are required to (1) offer every child’s parent/guardian the opportunity to participate in the survey; and (2) submit the survey data to the DESE-OSE no later than July 15th. The newsletter provides strategies for improving response rates along with instructions on how to complete the surveys online via a secure website or by mailing all completed scan forms to the IDEA Data & Research Office for scanning.  
  
Most LEAs offer the survey to families at Annual Review meetings. Since most meetings were being conducted virtually, due to COVID, IDEA Data & Research provided documents LEAs could share with families on how to complete the survey online. The instructions were available in English and Spanish, the same as the surveys.   
  
The DESE-OSE monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2023. Further, the DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunity to participate in the family survey.

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

Arkansas reviews representativeness by race and disability category for both school age and early childhood. The survey responses are compared to the child count demographics for the given year. When the difference is +/- 3.00 percentage points that category is considered under- or over-represented.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used? | NO |

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

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

## 8 - Prior FFY Required Actions

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

**Response to actions required in FFY 2020 SPP/APR**

Arkansas will continue to train LEAs on the preparation, collection, submission and the importance of indicating the race and disability on the family surveys. Each February the IDEA Data & Research Office, in its newsletter, reminds LEAs that they are required to (1) offer every child’s parent/guardian the opportunity to participate in the survey; and (2) submit the survey data to the DESE-SEU no later than July 15th. The newsletter provides strategies for improving response rates along with instructions on how to complete the surveys online via a secure website or by mailing all completed scan forms to the IDEA Data & Research Office for scanning

## 8 - OSEP Response

## 8 - Required Actions

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

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 0% | 0% | 0% | 0% | 0% |

**FFY 2021 SPP/APR Data**

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

YES

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

19

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 4 | 0 | 259 | 0.00% | 0% | 0.00% | Met target | No Slippage |

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

YES

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

The calculation is a single year event (one-year of data) utilizing a risk ratio and alternate risk ratio methodology with a minimum cell size of 5, n size of 15, and a risk ratio threshold of greater than 3.00. Alternate risk ratio is calculated if the comparison group does not meet the minimum cell or n size.

**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.**

Using the self-assessment tool, this past year Arkansas had zero districts identified as having inappropriate policies, procedures, and practices related to race in the area of identification. The self-assessment tool required a team approach and review of student level data for completion.  
  
Each of the 4 LEAs which the State identified in 2021-2022 as having a disproportionate representation in the area of identification, completed a self–assessment of policies, procedures, and practices related to child find/evaluation/reevaluation/eligibility determination. The State reviewed LEAs’ self-assessments related to child find/evaluation/reevaluation/eligibility determination. The State verified each LEA’s self-assessment through desk audits and/or on-site visits to determine whether an LEA was in compliance with Part B requirements. When necessary, districts were contacted for clarification and directed to resubmit.  
  
The review of policies, procedures, and practices resulted in zero findings of noncompliance.  
  
The Disproportionality Self-Assessment of District Policies, Procedures, and Practices is available on the special education website under Monitoring & Program Effectiveness on the Monitoring Procedure page or https://dese.ade.arkansas.gov/Offices/special-education/monitoring-and-program-effectiveness/monitoring-procedures.  
  
If an LEA fails to comply with any requests, the State Director of Special Education is notified for further action. Once the reviews are completed, a notification letter regarding the district's compliance is sent to the district superintendent and special education administrator.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 9 - Prior FFY Required Actions

The State must revise its baseline using FFY 2020 data in the FFY 2021 SPP/APR.

**Response to actions required in FFY 2020 SPP/APR**

The state has updated the baseline year to FFY 2020

## 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 the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 0% | 0% | 0% | 0% | 0% |

**FFY 2021 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 62 | 0 | 259 | 0.00% | 0% | 0.00% | Met target | No Slippage |

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

YES

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

The calculation is a single year event (one-year of data) utilizing a risk ratio or alternate risk ratio methodology with a minimum cell size of 5, n size of 15, and a risk ratio threshold of greater than 3.00. Alternate risk ratio is calculated if the comparison group does not meet the minimum cell or n size.

**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 self-assessment tool, this past year Arkansas had zero districts identified as having inappropriate policies, procedures, and practices related to race in the area of identification. The self-assessment tool required a team approach and review of student level data for completion.  
  
Each of the 62 LEAs that the State identified in 2021-2022 as having a disproportionate representation in the area of identification completed a self–assessment of policies, procedures, and practices related to child find/evaluation/reevaluation/eligibility determination. The State reviewed LEAs’ self-assessments related to child find/evaluation/reevaluation/eligibility determination. The State verified each LEA’s self-assessment through desk audits and/or on-site visits to determine whether an LEA was in compliance with Part B requirements. When necessary, districts were contacted for clarification and directed to resubmit.  
  
The review of policies, procedures, and practices resulted in zero findings of noncompliance.  
  
The Disproportionality Self-Assessment of District Policies, Procedures, and Practices is available on the special education website under Monitoring & Program Effectiveness on the Monitoring Procedure page or http://www.arkansased.gov/divisions/learning-services/special-education/monitoring-program-effectiveness/monitoring-procedures  
  
If an LEA fails to comply with any requests, the State Director of Special Education is notified for further action. Once the reviews are completed, a notification letter regarding the district's compliance is sent to the district superintendent and special education administrator.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 10 - Prior FFY Required Actions

The State must revise its baseline using FFY 2020 data in the FFY 2021 SPP/APR.

**Response to actions required in FFY 2020 SPP/APR**

The state has updated the baseline year to FFY 2020

## 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 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 91.91% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.75% | 99.54% | 99.75% | 99.71% | 99.35% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

| **(a) Number of children for whom parental consent to evaluate was received** | **(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 17,204 | 17,096 | 99.35% | 100% | 99.37% | Did not meet target | No Slippage |

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

108

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

The 108 children whose evaluations exceeded the state established timeline are represented by 28 LEAs . The number of days beyond the 60 day timeline varied between 1 - 137 days. Eighty-eight (88) of the 108 children were found to be eligible, 19 were found not eligible, and one family moved prior to the placement conference.   
  
The IDEA Data & Research Office in December 2022, conducted a review of current year data to verify compliance. The review revealed that 26 of 28 LEAs with findings in FFY 2021 are correctly implementing the specific regulatory requirements by reviewing current year referrals in the student management system. Two of the LEAs had continuing non-compliance with one student out of tmelines. The two LEAs with 2022-23 timeline issues will be issued a finding and will have to establish a corrective action plan (CAP). The CAP will be submitted to the MPE section for review and approval. We will report on the clearance of the two LEAs in the FFY 2022 APR.   
  
A root cause analysis of this indicator continues to identify two key issues: (1) LEA team errors such as timeline calculations, and (2) availability of contracted evaluators. Arkansas regulations do not provide any exceptions for weekends, holidays, or school breaks including summer. State timelines are based on calendar days, not business days. Further analysis of this issue revealed timelines were often exceeded as a result of these non-school periods. In addition, Arkansas has many small districts which utilize contracted services. In discussions with LEAs, the DESE-OSE has recommended (1) a contractual statement which would address the contractor’s responsibility related to   
timelines and repercussions when timelines are missed and (2) the exploration of using fewer contracted evaluators by partnering with other LEAs to hire staff jointly.

**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.**

There are two different data collection systems for special education. First, there is the Arkansas Division of Elementary and Secondary Education's student management system managed by the Arkansas Public School Computer Network (APSCN) which is utilized by the school districts, charter schools, and educational cooperatives. The second data system is Special Education’s MySped Resource web-based application which is utilized by other state agencies offering educational services such as the Department of Human Services Division of Developmental Disabilities Services (DDS) and Arkansas Department of Corrections (ADC). The MySped Resoruce system is also used to provide the LEAs an opportunity to verify thier data and to complete referrals which may have crossed over fiscal years.   
  
The end of year data collection is to be submitted to the state information system (SIS) by midnight June 15th. Districts with schools operating year round buildings have until June 30th to submit the year end data.  
  
Preparation for data transfer from the SIS warehouse to special education includes the data and reporting office in DESE's Research and Technology Division forwarding the data files to the DESE's Office of Special Education technology manager by July 15th. Between July 15th and August 15th the special education database administrator prepares and loads the entire end of school year student level data (SIS and MySped Resource) into the special education data warehouse. The preparation includes ensuring all districts are represented in the data set and that no required fields (e.g. disability code) in the various data tables are blank, which would cause the upload to fail. The data sets include school age exits, discipline, early childhood exits, early childhood outcomes, early intervening services, and referral tracking. The IDEA Data & Research Office staff preliminary analysis of data errors is completed by August 31st and LEAs review and correct data errors between September 1st and September 30th.  
  
Data Cleaning, Clarification, and Follow-up (September 1 through November 30): Each LEA can review data error reports via MySped Resource. The error reports are dynamic and contain student information. As errors are corrected the student is removed from the report. The IDEA Data & Research Office staff continue to run error checks throughout the cycle review period (September 1-30) to ensure LEAs are reviewing their data and making corrections prior to the September 30th deadline.   
  
Once the cycle review period is complete, referral records are checked for missing data (i.e. dates or reason for exceeding timelines) related to timely evaluation (Indicator 11) and early childhood transition (Indicator 12) one final time. Any LEA found to still have missing data elements is contacted via phone to finalize the data. Failure to provide evidence of data error corrections (i.e. the missing data) by November 1st may result in a LEA being cited for Timely and Accurate Reporting.  
  
The referral tracking data reviewed by the IDEA Data & Research Office staff begins October 1 and is checked for the following errors:  
  
\*Referral Date Exceeds FY  
\*Age of student is not within acceptable parameters (younger than 2 or older than 21)  
\*Inconsistent timeline: expected chronological order (referral->initial parental consent->evaluation->eligibility determined->parental consent to place) is not observed  
\*Process continued without initial parental consent  
\*60 day consent to evaluation completion timeline exceeded with no reason recorded  
\*Evaluation was completed but no eligibility determination date was recorded  
\*30 day evaluation to eligibility determination timeline exceeded with no reason recorded  
\*Indication of placement in special education without a date of parental consent to place recorded  
\*Indication of placement in special education without an evaluation completion date recorded  
\*Indication of placement in special education without an eligibility determination date recorded  
\*Record completed with a reason of “not eligible” with no eligibility determination date recorded  
\*Special education placement inconsistent (record indicates the student was not placed yet the completion reason is “SP” or record indicates student was placed yet the completion reason is “NE”)  
\*Referral process incomplete  
  
Identification of Non-compliance: Prior to calculation of Indicators 11 and 12 for the APR in October/November, referral records exceeding the 60 day evaluation timeline for which a code of “other” was recorded are closely examined to determine if they meet exclusionary criteria. If further clarification is necessary, LEA supervisors are contacted via phone or email. For compliance of State regulations this process is also applied to the 30 day eligibility determination timeline.   
  
Further, failure of an LEA to submit referral data, without prior notification that they had zero referrals for the year, results in an automatic 0% LEA rate for the related indicator(s). Missing data which prohibits the calculation of a record is considered a missed timeline since verification of timeliness cannot be made. This results in the elevation of the record being “flagged” for noncompliance.  
  
Verification of Services and Correction: The referral tracking data captures eligibility determination date, placement to special education (y/n) and parent consent to place date, thus allowing verification of the whole process. If these data elements are missing, the IDEA Data & Research Office staff reviews the eSchool special education modules to verify that students who had their evaluation timelines exceed 60 day were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.  
  
Verification of correction of noncompliance is further conducted by reviewing the referral tracking data for the current school year. Referrals already entered into the student management system are reviewed to determine if the LEA is currently in compliance. If correction of noncompliance cannot be verified, the records are elevated from a “flag” to a “red flag” and the information is sent to the State Director of Special Education for further action.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 33 | 33 | 0 | 0 |

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

The DESE-OSE in conjunction with the IDEA Data & Research Office verified that each of the 33 LEAs with findings in FFY 2020 are correctly implementing the specific regulatory requirements by reviewing current year referrals in the student management system, which is updated data. The review conducted in December 2021, revealed that all 33 LEAs are 100% compliant and are correctly implementing the regulatory requirements.   
  
The State will continue to implement and refine verification protocols to ensure LEA compliance with the requirements in 34 CFR §300.301(c)(1), including correction of noncompliance.

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

The State, by reviewing the student level data in the special education modules of the student management system, found that each of the 33 LEAs with findings in FFY 2020 are correctly implementing the specific regulatory requirements.   
  
Since individual timelines cannot be corrected, the State examined student records in the student management system for whom had initial evaluations with non-complaince. Although the evaluations were late, they were completed and an IEP implemented if the child was eligible, unless the child was no longer within the jurisdiction of the LEA.   
  
Further review of the student management system examined current year referrals to verify if a systemic issue existed. The IDEA Data & Research staff reviewed records in December 2021 via the student management system and found no further noncompliance.  
  
The referral tracking data captures eligibility determination date, status as to placement in special education (y/n), and date of parental consent for placement, thus allowing verification of the entire referral process. If these data elements are missing, the IDEA Data & Research Office staff reviews the SMS special education modules to verify that students whose evaluation timelines exceeded 60 days were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

## 11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

The State, by reviewing the student level data in the special education modules of the student management system, found that each of the 33 LEAs with findings in FFY 2020 are correctly implementing the specific regulatory requirements.   
  
Since individual timelines cannot be corrected, the State examined student records in the student management system for whom had initial evaluations with non-complaince. Although the evaluations were late, they were completed and an IEP implemented if the child was eligible, unless the child was no longer within the jurisdiction of the LEA.   
  
Further review of the student management system examined current year referrals to verify if a systemic issue existed. The IDEA Data & Research staff reviewed records in December 2021 via the student management system and found no further noncompliance.  
  
The referral tracking data captures eligibility determination date, status as to placement in special education (y/n), and date of parental consent for placement, thus allowing verification of the entire referral process. If these data elements are missing, the IDEA Data & Research Office staff reviews the SMS special education modules to verify that students whose evaluation timelines exceeded 60 days were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.

## 11 - OSEP Response

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priorit**y: Effective General Supervision Part B / Effective Transition

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

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

**Data Source**

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

**Measurement**

a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.

b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.

c. # of those found eligible who have an IEP developed and implemented by their third birthdays.

d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.

e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.

f. # of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option.

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 75.91% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 95.24% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 81 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 4 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 39 |
| 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. | 38 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 0 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 39 | 39 | 100.00% | 100% | 100.00% | Met target | No Slippage |

**Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f**

0

**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.**

**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.**

Data Collection: Arkansas has a single student management system utilized by all school districts, charter schools, and educational cooperatives.   
  
The end of year data collection is to be submitted to the state information system (SIS) by midnight June 15th. Districts with schools operating year round buildings have until June 30th to submit the year end data. Preparation for data transfer from the SIS warehouse to special education includes the data and reporting office in DESE's Research and Technology Division forwarding the data files to the DESE's Office of Special Education technology manager by July 15th. Between July 15th and August 15th the special education database administrator prepares and loads the entire end of school year student level data (SIS and MySped Resource) into the special education data warehouse. The preparation includes ensuring all districts are represented in the data set and that no required fields (e.g. disability code) in the various data tables are blank, which would cause the upload to fail. The data sets include school age exits, discipline, early childhood exits, early childhood outcomes, early intervening services, and referral tracking. The IDEA Data & Research Office staff preliminary analysis of data errors is completed by August 31st and LEAs review and correct data errors between September 1st and September 30th.  
  
Data Cleaning, Clarification, and Follow-up (September 1 through November 30): Each LEA can review data error reports via MySped Resource. The error reports are dynamic and contain student information. As errors are corrected the student is removed from the report. The IDEA Data & Research Office staff continue to run error checks throughout the cycle review period (September 1-30) to ensure LEAs are reviewing their data and making corrections prior to the September 30th deadline.   
  
Once the cycle review period is complete, referral records are checked for missing data (i.e. dates or reason for exceeding timelines) related to timely evaluation (Indicator 11) and early childhood transition (Indicator 12) one final time. Any LEA found to still have missing data elements is contacted via phone to finalize the data. Failure to provide evidence of data error corrections (i.e. the missing data) by November 1st may result in a LEA being cited for Timely and Accurate Reporting.  
  
The referral tracking data reviewed by the IDEA Data & Research Office staff begins October 1 and is checked for the following errors:  
  
\*Referral Date Exceeds FY  
\*Age of student is not within acceptable parameters (younger than 2 or older than 21)  
\*Inconsistent timeline: expected chronological order (referral->initial parental consent->evaluation->eligibility determined->parental consent to place) is not observed  
\*Process continued without initial parental consent  
\*60 day consent to evaluation completion timeline exceeded with no reason recorded  
\*Evaluation was completed but no eligibility determination date was recorded  
\*30 day evaluation to eligibility determination timeline exceeded with no reason recorded  
\*Indication of placement in special education without a date of parental consent to place recorded  
\*Indication of placement in special education without an evaluation completion date recorded  
\*Indication of placement in special education without an eligibility determination date recorded  
\*Record completed with a reason of “not eligible” with no eligibility determination date recorded  
\*Special education placement inconsistent (record indicates the student was not placed yet the completion reason is “SP” or record indicates student was placed yet the completion reason is “NE”)  
\*Referral process incomplete  
  
Specific to Indicator 12 records flagged as being a “Part C to Part B transition” or C to B concurrent record are further checked for:  
\* Eligibility determination occurred after the child’s third birthday (exceeding timelines) and no reason was recorded  
  
Identification of Non-compliance: Prior to calculation of Indicators 11 and 12 for the APR in October/November, referral records exceeding the 60 day evaluation timeline for which a code of “other” was recorded are closely examined to determine if they meet exclusionary criteria. If further clarification is necessary, LEA supervisors are contacted via phone or email. For compliance of State regulations this process is also applied to the 30 day eligibility determination timeline.   
  
Further, failure of an LEA to submit referral data, without prior notification that they had zero referrals for the year, results in an automatic 0% LEA rate for the related indicator(s). Missing data which prohibits the calculation of a record is considered a missed timeline since verification of timeliness cannot be made. This results in the elevation of the record being “flagged” for noncompliance.  
  
Verification of Services and Correction: The referral tracking data captures eligibility determination date, placement to special education (y/n) and parent consent to place date, thus allowing verification of the whole process. If these data elements are missing, the IDEA Data & Research Office staff reviews the APSCN special education modules and/or the MySped Resource DDS Application to verify that students who had their evaluation timelines exceed 60 day were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.  
  
Verification of correction of noncompliance is further conducted by reviewing the referral tracking data for the current school year. Referrals already entered into the student management system are reviewed to determine if the LEA is currently in compliance. If correction of noncompliance cannot be verified, the records are elevated from a “flag” to a “red flag” and the information is sent to the State Director of Special Education for further action.

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

## 12 - Prior FFY Required Actions

None

## 12 - OSEP Response

## 12 - Required Actions

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 96.34% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.85% | NVR | 80.54% | 71.26% | 84.34% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target | 100% | 100% | 100% | 100% | 100% |

**FFY 2021 SPP/APR Data**

| **Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition** | **Number of youth with IEPs aged 16 and above** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 298 | 381 | 84.34% | 100% | 78.22% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Arkansas reviewed 132 more IEPs in FFY 2021 than in FFY 2020, as we rolled out the Special Education Monitoring and Management System (SMSS).  
  
Of the 381 IEPs monitored for secondary transition, 83 IEPs had components which were non-compliant. Sixty-three of the IEPs were corrected within 90 days; however, 20 remained out of compliance. The 20 IEPs represent six (6) LEAs. Some of the reasons for the non-compliance was the transition plan was not on effect for the 16th birthday, they lacked measurable post-secondary goals; and lacked career employment goals.   
  
There are no patterns or obvious reasons the various components of the transition plan are non-compliant. The LEAs represents small to large districts, with the number of IEPs out of compliance ranging from 1 to 6. The six LEAs received a letter of findings, were issued a Compliance Action Plan (CAP) and are currently in their one-year window.

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

State monitoring

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

As part of Arkansas' monitoring and general supervision system, the MPE Section has oversight of special education programs in the State’s public schools and co-ops. The MPE Section, in conjunction with the Non-Traditional Section, also oversees the implementation of special education programs in the State’s open-enrollment charter schools, State-operated and State-supported facilities and institutions, Juvenile Detention Facilities and DHS-Division of Youth Services (DYS) juvenile treatment centers, and private agencies and residential sites located throughout the state.  
  
Beginning no later than the first IEP to be in effect when an Arkansas youth with an IEP is 16, appropriate measurable post-secondary goals based upon age appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills and the transition services (including courses of study) needed to assist the child in reaching these goals are developed.  
  
The monitoring process includes on-site and LEA self-monitoring, a review of IEPs to ascertain a program's status with regard to secondary transition plans. Arkansas utilizes the Indicator 13 checklist, developed by the National Secondary Transition Technical Assistance Center (NSTTAC), in its monitoring procedures to ensure the transition components are present in every students’ IEP aged 16-21. The data is collected via an electronic monitoring form completed by the SEA staff and/or LEA staff. In conjunction with IDEA Data & Research, the Indicator 13 checklist aligned data elements are then reviewed and counts are compiled for the indicator.   
  
Indicator 13 data are reported at the initial compliance level prior to the opportunity to correct. Therefore, in applying the two prong requirement of OSEP Memo 09-02, if an IEP is found to be non-compliant and correction does not occur prior to issuing a letter of findings, DESE-OSE cites the district for noncompliance and is issues a Compliance Action Plan (CAP).  
  
Arkansas is participating in an intensive TA project through National Technical Assistance Center on Transition (NTACT) that involves DESE-OSE staff, Arkansas Transition Services, Arkansas Rehabilitation Services, Career and Technical Education, and local district partners. Goals and activities are designed to improve secondary transition services, drop out, graduation and post school outcomes.

| **Question** | **Yes / No** |
| --- | --- |
| Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16? | NO |

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

**Correction of Findings of Noncompliance Identified in FFY 2020**

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

**FFY 2020 Findings of Noncompliance Verified as Corrected**

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

DESE issued a finding to one district in the area of post-secondary transition. The district’s required actions included: revising their policies, procedures, and/or practices for post-secondary transition and providing training on the process and regulatory requirements. The LEA was required to correct the student level finding and submit additional evidence to ensure the non-compliance was not continuing for other students (prong 2).   
   
DESE-OSE reviewed the following items submitted by the LEA: (1) updated procedures for addressing post-secondary transition in the IEP, (2) a pre-meeting planning checklist for post-secondary transition, (3) an IEP agenda for post-secondary transition conferences, and (4) the agenda with a sign-in sheet from training provided to the LEA by Arkansas Transition Services. Additionally, DESE reviewed the non-compliant student folder to ensure the non-compliance was corrected. DESE-OSE staff reviewed additional folders for students not in the original review and found their post-secondary transition to be compliant.  
   
Based on the on-site and desks reviews of the required actions in the Compliance Action Plan and evidence submitted to ensure the actions were complete, DESE determined all requirements for post-secondary transition were met, and issued a letter on May 12, 2022, stating the district met the Compliance Action Plan.

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

DESE issued a finding to one district in the area of post-secondary transition. The district’s required actions included: revising their policies, procedures, and/or practices for post-secondary transition and providing training on the process and regulatory requirements. The LEA was required to correct the student level finding and submit additional evidence to ensure the non-compliance was not continuing for other students (prong 2).   
   
DESE-OSE reviewed the following items submitted by the LEA: (1) updated procedures for addressing post-secondary transition in the IEP, (2) a pre-meeting planning checklist for post-secondary transition, (3) an IEP agenda for post-secondary transition conferences, and (4) the agenda with a sign-in sheet from training provided to the LEA by Arkansas Transition Services. Additionally, DESE reviewed the non-compliant student folder to ensure the non-compliance was corrected. DESE-OSE staff reviewed additional folders for students not in the original review and found their post-secondary transition to be compliant.  
   
Based on the on-site and desks reviews of the required actions in the Compliance Action Plan and evidence submitted to ensure the actions were complete, DESE determined all requirements for post-secondary transition were met, and issued a letter on May 12, 2022, stating the district met the Compliance Action Plan.

**Correction of Findings of Noncompliance Identified Prior to FFY 2020**

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

## 13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2020 : (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

**Response to actions required in FFY 2020 SPP/APR**

The DESE-OSE MPE Section verified the correction of noncompliance via desk audits of LEA submitted documentation and/or on-site visits to the LEAs in question. Documentation obtained from on-site monitoring visits and/or desk audits confirmed that all individual student files had been corrected in less than one year, unless the student was no longer within the jurisdiction of the LEA. The MPE staff verified the LEA was correctly implementing the regulatory requirements through the review of additional student records during on-site visits. Therefore, based on desk audits of documentation submitted by the LEA, and/or on-site visits to the LEAs it was determined that the student IEPs determined to be out of compliance had been corrected within the one year timeline and the review of updated data verified 100% compliance.

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

A. Enrolled in higher education within one year of leaving high school.

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

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

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

**Data Source**

State selected data source.

**Measurement**

A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

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

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

**Instructions**

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

Collect data by September 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

1. Enrolled in higher education within one year of leaving high school;

2. Competitively employed within one year of leaving high school (but not enrolled in higher education);

3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);

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

“Leavers” should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, “leavers” who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2009 | Target >= | 14.82% | 15.31% | 15.80% | 15.80% | 13.06% |
| A | 12.86% | Data | 17.92% | 10.53% | 11.78% | 10.90% | 15.82% |
| B | 2009 | Target >= | 50.51% | 51.00% | 51.49% | 51.49% | 49.21% |
| B | 48.55% | Data | 44.32% | 50.19% | 25.93% | 41.97% | 64.06% |
| C | 2009 | Target >= | 61.70% | 62.48% | 63.26% | 63.26% | 59.89% |
| C | 59.34% | Data | 52.02% | 54.89% | 51.35% | 48.45% | 68.36% |

**FFY 2020 Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 13.26% | 13.46% | 13.66% | 13.86% | 14.06% |
| Target B >= | 49.87% | 50.53% | 51.19% | 51.85% | 52.51% |
| Target C >= | 60.44% | 60.99% | 61.54% | 62.09% | 62.64% |

**Targets: Description of Stakeholder Input**

This Indicator was discussed with stakeholders at the May 25, 2022 meeting. Stakeholders reviewed historical data and various target setting methodologies. Based on stakeholder input, Indicator 14A & 14B would utilize the average annual difference to establish the new targets and Indicator 14C targets would be established using ½ of the average annual difference.

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 718 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 614 |
| Response Rate | 85.52% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 96 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 321 |
| 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) | 21 |
| 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). | 14 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 96 | 614 | 15.82% | 13.26% | 15.64% | Met target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 417 | 614 | 64.06% | 49.87% | 67.92% | Met target | No Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 452 | 614 | 68.36% | 60.44% | 73.62% | Met target | No Slippage |

**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** | **2020** | **2021** |
| Response Rate | 82.71% | 85.52% |

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

Arkansas saw improvement in the response rate. Of the 718 students, 614 answered the phone survey or had data with our partner agencies. Through our various partners, no education or employment data was found for 104 students.  
Arkansas conducts a dual data collection, phone survey and administrative data mine. The administrative data mining includes data from the Arkansas Division of Higher Education, the Division of Workforce Services, Arkansas Rehabilitation Services, and Adult Education. Arkansas will continue to work with other state agencies to improve the data mining process. Arkansas is also exploring having LEAs collect data directly.

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

Based on the 618 exiting data, the Post-school O data set is compiled. For more than 10 years Arkansas has used a dual data collection which allows us to locate more students than a phone or mail survey. This helps in addressing non-response bias for we are able to locate information for exited students which may not be located with a single methodology. For FFY 2021, the data are representative by race, exiting reason, and disability and while there is not evidence of systemic under-representation leading to a response bias, there is still a need to to ensure students who were identified as having an intellectual disability and those who dropped out of school are represented in the responses. These two categories historically have a lower response rate.

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

A ± of 3.00 percentage points is used to determine demographic over- or under-representation. Arkansas analyzes the PSO data for representativeness in the areas of race/ethnicity, disability category, and exit reason. The collected data for FFY 2021 is representative. The percentage point difference for race/ethnicity spread from -0.93 for Black to 0.84 for White. Disability was also repesentative with ID on the low end at -1.42 and OHI on the high end at 1.66 and analyis of exit reason found dropout was -1.20 and regular diploma was 1.25.  
  
Arkansas conducts a dual data collection, phone survey and administrative data mine. The administrative data mining includes data from the Arkansas Division of Higher Education, the Division of Workforce Services, Arkansas Rehabilitation Services, and Adult Education. Arkansas will continue to work with other state agencies to improve the data mining process. By expanding the number of agencies participating in the collection the representativeness should improve. The DESE has established data sharing agreements for the data collection with the agencies mentioned above. The DESE will continue exploring other agencies which could provide data for this indicator.

**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)**

YES

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

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

A ± of 3.00 percentage points is used to determine demographic over- or under-representation. Arkansas analyzes the PSO data for representativeness in the areas of race/ethnicity, disability category, and exit reason. The collected data for FFY 2020 is representative.

| **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.**

Arkansas adopted the sampleing plan OSEP provided to states in the yearly years of the SPP/APR.  
  
Identification of districts for the Post-school outcomes collection is through a stratified random sample. Stratified random sampling without replacement is used to assign each LEA to a sampling year. The district average daily membership (ADM) strata are based upon 2017/18 data. The strata are assigned according to natural splits in the existing ADM data. Within these strata, LEAs were randomly assigned to a collection year. Little Rock School District and Springdale School District, the largest two school districts in Arkansas with an ADM over 20,000, are the only districts within ADM strata 1; therefore, they are sampled in year one (1) and will be sampled a second time in year six (6).   
  
If more LEAs are created due to a split of a district or the apprival of more charter schools in the state, these LEAs will be added to year six  
  
Summaries of the number of districts within each stratum, as well as per year are available at https://arksped.ade.arkansas.gov/documents/data\_n\_research/PublicReporting/ARindicator14samplingplanfor2019-2025.pdf  
  
Treatment of Missing Data: The survey response rate is examined and reported. In addition, missing data is evaluated. Subsequently, a sensitivity analysis is conducted to investigate the effects, if any, of non-response and missing data on results of the survey. Demographic and historical data is evaluated with regard to differences between students who respond and those who do not. Estimates and analysis is adjusted accordingly.

| **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)**

On January 5, 2023, Arkansas received feedback on the sampling plan posted on the DESE-OSE public reporting webpage (https://arksped.ade.arkansas.gov/documents/data\_n\_research/PublicReporting/ARindicator14samplingplanfor2019-2025.pdf). Arkansas will update the documentation on the website and send a copy to our OSEP lead no later than June 1, 2023.

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

OSEP’s response to the State’s initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP’s evaluation of the plan indicates that it is approvable.

## 14 - Required Actions

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

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

**Results Indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

## 15 - Indicator Data

Select yes to use target ranges

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 28 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 18 |

**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**

Stakeholders were presented with various methodologies that could be applied to setting targets for Indicator 15. Actual data for this indicator fluctuates widely from year to year. After the discussions, it was decided to repeat the targets from the previous SPP.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 50.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 62.84% | 64.80% | 66.76% | 66.76% | 56.96% |
| Data | 12.50% | 55.56% | 78.26% | 93.33% | 58.82% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 58.92% | 60.88% | 62.84% | 64.80% | 66.76% |

**FFY 2021 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 18 | 28 | 58.82% | 58.92% | 64.29% | Met target | No Slippage |

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

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 19 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 18 |

**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**

Stakeholders were presented the data and various methods which could be applied to setting targets for Indicator 16. After reviewing the data sets, stakeholders agreed that with the uncertainty of the data from year to year, especially in relation to the pandemic that a flat rate would be the best targets through FFY 2025.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 52.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 79.48% | 81.44% | 83.40% | 83.40% | 75.00% |
| Data | 100.00% | 93.55% | 100.00% | 100.00% | 100.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 75.00% | 75.00% | 75.00% | 75.00% | 75.00% |

**FFY 2021 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 18 | 19 | 100.00% | 75.00% | 94.74% | Met target | No Slippage |

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

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

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

**Measurement**

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

**Instructions**

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

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

**Updated Data:** In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

*Phase I: Analysis:*

- Data Analysis;

- Analysis of State Infrastructure to Support Improvement and Build Capacity;

- State-identified Measurable Result(s) for Children with Disabilities;

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

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

- Infrastructure Development;

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

- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

**Specific Content of Each Phase of the SSIP**

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

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

***Phase III: Implementation and Evaluation***

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., Feb 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023).).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes, and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023)) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 17 - Indicator Data

**Section A: Data Analysis**

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

The State-identified Measurable Result (SiMR) is the percent of students with disabilities (SWD) in grades 3-5, from the targeted schools, whose value-added score (VAS) in reading is moderate or high for the same subject and grade level in the state.

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

NO

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

YES

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

Historically, Arkansas has interpreted the population for this indicator as the special education population of grades 3-5 in SSIP-supported buildings. All students may be exposed to SSIP activities or the results.  
  
The SiMR is comprised of value-added growth scores for students with multiple years of data on the regular assessment. The State has decided to change this response to “yes” (previous years was indicated as "no") to reflect that the data are reflective of a subset of the special education population in SSIP-supported buildings since the SiMR does not include students who took the alternate assessment.

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

NO

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

https://arksped.ade.arkansas.gov/documents/ssip/SSIP-SPDG-OSE-TOA.pdf

**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** |
| --- | --- |
| 2016 | 59.53% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 61.50% | 62.33% | 63.16% | 63.37% | 64.50% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of SWD with a high or moderate VAS in reading at participating schools and grade levels** | **Number of SWD with a VAS in reading at participating schools and grade levels** | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | **Status** | **Slippage** |
| 877 | 1,304 | 64.37% | 61.50% | 67.25% | Met target | No Slippage |

**Provide the data source for the FFY 2021 data.**

The data is the RLA value added score based on the State's approved ESSA plan. Upon the receipt of the data file from the Office of Innovation for Education (OIE) at the University of Arkansas (state contractor for accountability), student level records are filtered based on the participating school buildings. Only students with value added scores (VAS) for RLA are included.

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

The data is the RLA value added score based on the State's approved ESSA plan.  
  
In the first step, a longitudinal individual growth model is used to produce a predicted score for each student. The individual growth model uses as many years of prior scores for each student to maximize the precision of the prediction (best estimate) and accounts for students having different starting points (random intercepts). In the value-added model, each student’s prior score history acts as the control/conditioning factor for the expectation of growth for the individual student. In the second step, the student’s predicted score is subtracted from his or her actual score to generate the student’s value-added score (actual – predicted = value-added score). The magnitude of value-added scores indicates the degree to which students did not meet, met, or exceed expected growth in performance. Student value-added scores are averaged for each school. School value-added scores indicate, on average, the extent to which students in the school grew compared to how much they were expected to grow, based on how the students had achieved in the past. The school value-added scores answer the question, “On average, did students in this school meet, exceed, or not meet expected growth?” (Arkansas ESSA Plan p. 45) While the school average tells us about the building, it does not tell us about how the individual student is doing compared to their peers. Therefore, to look at an individual student’s growth in relation to their peers, the Office of Innovation for Education (OIE) at the University of Arkansas (state contractor for accountability) ranked the value-added scores of all students and categorized them into low, moderate, or high based on the percentile rank of students’ growth scores, or residuals. This is commonly Percentile Rank of the Residual (PRR). An explanation of each category is as follows:  
  
•Low indicates that a student’s VAS, based on the PRR, was in the bottom 25% of all student VAS for same subject and grade level in the state  
  
• Moderate indicates that a student’s VAS, based on the PRR, was between 25% and 75% of all student VAS for the same subject and grade level in the state  
  
• High indicates that a student’s VAS, based on the PRR, was in the top 25% of all student VAS for the same subject and grade level in the state

**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)**

NO

**Section B: Implementation, Analysis and Evaluation**

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

https://arksped.ade.arkansas.gov/documents/ssip/Arkansas-SSIP-Evaluation-Plan-Infrastructure-Tool.pdf

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

NO

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

Strategy One: Expand a system of support that is aligned with other DESE Units and is differentiated based on LEAs’ needs as evidenced by data.   
This phase of the SSIP continued with expanding a coordinated system of support that provides the necessary organizational and collaborative structures for the way in which LEA services and supports are identified, managed, and differentiated at the state-level. This strategy is reflected in DESE’s Theory of Action. Through intentional alignment and infrastructure expansion, the DESE is more effective in leveraging resources that will improve services for all students, including students with disabilities, and in increasing the reach and impact of the work with LEAs. The State Performance Management Team (SPMT) is directly involved with agency leaders in all initiatives reflected in the theory of action, including High Reliability Schools (HRS), Professional Learning Communities (PLC), High-Leverage Practices (HLPs) for Inclusive Classrooms, Inclusive Principal Leadership, Reading Initiative for Student Excellence (R.I.S.E.), Response to Intervention (RTI) and the Strategic Instructional Model (SIM™). The SSIP Theory of Action reflects Arkansas’ commitment to ensuring that all students have access to highly reliable schools that are safe, supportive, collaborative and that provide a guaranteed and viable curriculum with effective teaching in every classroom (High Reliability Schools). Through a multi-tiered system of support (AR THRIVE and RTI Arkansas) general and special educators, administrators, and related services professionals build collective efficacy via team-based and action-oriented modeling, coaching and support with intentional focus on four critical questions: 1) What is it we expect students to learn? 2) How will we know when they have learned it? 3) How will we respond when they don’t learn? 4) How will we respond when they already know it? (PLC at Work ™ and Inclusive Practices Project). RTI is directly aligned to critical question number three. The system of support in Arkansas is dependent upon administrators who advance inclusive leadership and practices (Advancing Inclusive Principal Leadership). The Arkansas SSIP emphasizes the knowledge and implementation of high-leverage and other evidence-based practices that promote access to inclusive classrooms. The goal is to empower novice and experienced educators with knowledge and skills, building self and collective efficacy to meet the needs of diverse learners (R.I.S.E., HLPs, AR THRIVE and SIM™). The focus on alignment and expansion of these initiatives in the SSIP reflects a continuous evolution towards a single, coherent and collaborative system where students with disabilities are considered general education students with additional supports and services as determined by data. This system coalesces around DESE’s mission to promote inclusive practices.  
  
Strategy Two: In collaboration with other DESE Units, expand Arkansas’ Response-to-Intervention (RTI) and inclusive practices model including Universal Design for Learning (UDL) and using evidence-based personnel development to implement a multi-tiered system of supports for behavior and academics, with a focus on literacy. This strategy has continuously evolved to focus on RTI, UDL and inclusionary practices and is being implemented and supported in SSIP targeted districts by DESE through the State Personnel Development Grant (SPDG). This support strategically aligns with the R.I.S.E., Inclusive Principal Leadership, AR THRIVE and the Inclusive Practices initiatives. The State Personnel Development Grant (SPDG), in partnership with other DESE Units, works to transform and expand the statewide coherent system of support through professional learning and coaching. The SPDG professional learning design includes multi-year job-embedded training, differentiated coaching, and follow-up supports, with a focus on increasing the ability of instructional staff to implement high-leverage and other evidence-based practices when teaching all students, especially students with disabilities. In addition, the SPDG project focuses on increasing the capacity of leadership and instructional coaches to support the scale-up and sustainment of Response to Intervention through collaborative processes and structures, and with embedded evidence-based practices. A micro-credential is a verification of proficiency in a job-embedded discrete skill or competency that an educator demonstrates through the submission of evidence assessed via defined evaluation criteria. Micro-credentials allow educators the flexibility to personalize learning experiences that are relevant to the needs of students and are backed by research and best-practices. Additionally, micro-credentials provide a way to recognize educators for existing skills, talents or newly acquired skills that are demonstrated in the educators' own time and in their own space. During this report cycle, DESE has championed the development of micro-credentials around UDL and HLPs to allow educators choice and greater autonomy in the professional learning process. DESE recognizes micro-credentials as part of the agency's comprehensive system of professional learning, and DESE-approved micro-credentials are used in a variety of ways to support teachers at all stages of the career continuum. The DESE Office of Educator Effectiveness and Licensure and the SPDG provide micro-credentials at no cost to Arkansas teachers and administrators, and the SPDG offers stipends to educators who complete the micro-credentials related to the improvement strategies outlined in the SSIP/SPDG Alignment and Evaluation Plan.  
  
Embedded within both of the infrastructure improvement strategies is an initiative called AR THRIVE. AR THRIVE is a collaborative project to support districts in efforts to develop and sustain a Multi-Tiered System of Support, in order for students to have access to the personalized academic, behavior, and mental health supports needed to be successful. AR THRIVE has expanded and rebranded DESEs coherent messaging and supports around RTI for behavior with the goals of increasing coordination of efforts that support behavior and mental health services and programs, increasing capacity in developing and sustaining evidence-based multi-tiered systems of support that address behaviors with a focus on positive behavior supports, and developing the infrastructure that will best support the needs of the whole child.   
  
The purposeful selection of these strategies aligns well with stakeholder feedback, the extant evidence base, and with DESE's mission and vision to lead the nation in student-focused learning.

**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.**

Relative to strategy one, the State Performance Management Team (SPMT) met monthly to improve the LEA system of support. This collaboration strategy involves multiple overlapping agency systems, including governance, data, accountability/monitoring, and quality standards. Representatives from the SPMT participated in NCSI’s Cross-State Learning Collaboratives focused on scaling evidence-based practices (EBPs) and low-performing school systems (LPSS) with a focus on students with disabilities. Representatives form the SPMT and DESE Learning Services also participated in NCSI's Universal Design for Learning (UDL) Deep Dive Group and IDC's SSIP Data Quality Peer Group. To measure change across multiple agency initiatives in the SSIP, Arkansas continued to utilize the SSIP Infrastructure Development Planning and Progress Management Tool: Using Implementation Drivers and Stages of Implementation. Consideration of all initiatives reflected in the SSIP Theory of Action for this improvement strategy resulted in ratings that remained stable. On a scale of 1 to 5 (1 = pre-exploration and 5 = full implementation) Arkansas SSIP Infrastructure Tool ratings revealed the following implementation scores: Competency drivers of selection (4.5), training (4.0) and coaching (4.0), Organizational drivers of decision support data systems (4.5), facilitative administration (4.5) and systems intervention (4.5). Overall performance assessment of the Arkansas system coherence also remained stable at (4.0). The technical & adaptive leadership drivers improved to (5.0). Multiple initiatives are included in the SSIP and some initiatives are more developed with regard to stages of implementation. Ratings reflect the intentional focus on coherence among multiple initiatives at multiple stages of implementation. The SPMT continued interdepartmental collaboration and coordination through regular involvement and initiative alignment presentations at DESE First Friday Meetings, DESE Learning Services Unit Leader Meetings, Quarterly Regional Content Specialist Meetings, Monthly Office of Special Education Meetings, Statewide LEA Monthly Virtual Calls, Monthly Arkansas Collaborative Consultant Director Meetings, an annual convening of the Arkansas Collaborative Consultants, an annual convening of LEA Supervisors called the LEA Academy, an annual School-based Therapy Conference for related service providers, and with The Center for Exceptional Families (TCFEF), Arkansas’ PTI Center. By focusing on strand one, DESE is increasingly modeling for LEAs the collaborative accountability and decision making that is needed to meet the needs of all learners. This strand assists with facilitating information exchange and reducing the organizational silos that can be obstacles to sustainable systemic change. A coherent message of how multiple initiatives work together in the system to serve all students promotes uniformity of messaging and prioritization of needs. This coherent message was presented to all DESE staff in April of 2022 with positive feedback from across divisions of the agency. Increasing collaboration with strategy one has assisted the agency with focusing direction to build organizational coherence in order to positively impact the SiMR.   
  
Relative to strategy two, The State Personnel Development Grant (SPDG), in partnership with other DESE Units, works to transform and expand the statewide coherent system of support through professional learning and coaching. The SPDG professional learning design includes multi-year job-embedded training, differentiated coaching, and follow-up supports, with a focus on increasing the ability of instructional staff to implement high-leverage and other evidence-based practices when teaching all students, especially students with disabilities. In addition, the SPDG project focuses on increasing the capacity of leadership and instructional coaches to support the scale-up and sustainment of Response to Intervention and Universal Design for Learning with embedded evidence-based practices. These implementation supports directly relate to DESE's professional development and technical assistance system. During this reporting cycle, the State Implementation Team reviewed data from implementation science measures from districts receiving SPDG support, and continued to meet with DESE leaders and a statewide advisory panel to gain stakeholder feedback on systemic implementation strengths and barriers. The completed RTI modules and facilitator guides for academics and behavior from the previous SPDG serve as a foundational component to support the current expansion of the SPDG. The academic modules are aligned with R.I.S.E., the statewide initiative to implement the science of reading, the PLC Project focused on collaboration between general and special educators, and with High Reliability Schools. This alignment promotes equity in access to high quality professional learning, and sustainability of the ongoing initiative for inclusive practices. The behavior modules promote implementation of Positive Behavioral Interventions and Supports and this work is directly aligned to the work of the Arkansas Behavior Support Specialists and their work to install sustainable systems for behavior. This work was scaled during this reporting cycle towards increased coaching and training supports with the AR THRIVE Initiative. AR THRIVE is a collaborative project to support districts in efforts to develop and sustain MTSS in order for students to have access to the personalized academic, behavior, and mental health supports needed to be successful. AR THRIVE is a reflection of DESEs coherent messaging and supports with the goals of increasing coordination of efforts that support behavior and mental health services and programs, increasing capacity in developing and sustaining evidence-based multi-tiered systems of support that address behaviors with a focus on positive behavior, and developing the infrastructure that will best support the needs of the whole child. Data from the first cohort of AR THRIVE indicated that DESE supported 109 building leaders (principals, assistant principals and/or counselors) from 51 LEAs and 92 buildings. Following a 4-day intensive training, AR THRIVE participants then return to their districts to work through the process of implementing Tier 1 and 2 systems of support for behavior and mental health. Leaders have a year to implement what is learned and provide evidence in portfolio submissions due the following September. Future reporting of indicator 17 will highlight data from these submissions.   
  
As the implementation team for strategy two of the SSIP regarding inclusive practices, systemic improvements facilitated by the SPDG are measured through the SISEP State Capacity Assessment (SCA) tool. State Capacity Assessment results from the spring of 2022 were as follows: Leadership (67%), Infrastructure and Resources (100%), Communication and Engagement (61%), and SCA Total Score (73%). Percentages represent the number of SCA items in place and mark significant improvement over the previous year's SCA results. Current SCA ratings will serve as a comparison for future SCA administrations. At the regional educational cooperative level, the SPDG Team administers the SISEP Regional Capacity Assessment (RCA) tool to measure systemic change with regional cooperative partners. The average from all RCA assessments revealed the following results: Leadership (81%), Competency (62%), Organization (59%), Total RCA Score (67%). At the district level, the SPDG team administers the SISEP District Capacity Assessment (DCA). The average from all DCA assessments revealed the following results: Organizational Leadership (31%), Competency (19%), Data Based Decision Making (21%), Total DCA Score (24%). Year-to-year comparative data on the RCA and DCA were not available as this was the first administration of these assessments to these agencies.

**Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)**

NO

**Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.**

Strategy One -   
Inclusive Practices Project:  
This project strategically supports the SSIP, and an additional cohort of Inclusive Practices Project schools will occur during the next reporting cycle.The DESE and a contracted vendor will continue a partnership to expand the Professional Learning Communities (PLC) at Work® process within select SSIP schools. This PLC improvement strategy focuses on building a culture of shared responsibility and collective teacher efficacy between general and special educators to maximize learning for all students. Through collaborative PLC efforts between general and special educators, it is expected that school and district LRE percentages will improve. With greater access to quality core instruction, students will experience moderate to high growth in literacy as measured by the statewide assessment. Exploration of ways to systemically scale this work beyond project schools will also be a next step of this project.   
  
High Leverage Practices:  
Survey data acquired during this phase of the SSIP revealed improvement in year-to-year comparisons for Arkansas novice special educators' self-efficacy with applying high-leverage practices (HLPs) in their everyday work. As next steps, the SSIP will continue to leverage agency infrastructure and supports to increase state-level capacity and knowledge of HLPs, with a focus on agency unit leaders, regional content specialists, agency technical assistance providers, IHEs and the state’s parent training center. The SSIP will also continue to intentionally collaborate with DESE Educator Effectiveness and IHEs around efforts to mentor all novice general and special educators with HLPs, and to align this work with the Arkansas Special Education Resource Academy, a DESE partnership with IHEs to increase the number of special educators in Arkansas. It is expected that the scaling of work around HLPs will better equip general and special educators to be more confident in knowledge and skills of working with diverse learners, and that improved self-efficacy will encourage more novice teachers to remain in the profession.   
Additionally, the SSIP will partner with The Center for Exceptional Families to highlight how families can engage with teachers and how teachers can engage with families to improve outcomes for students with disabilities. It is anticipated that aggregate survey data will continue to indicate high levels of educator self-efficacy with applying high-leverage practices, and that high percentages of novice teachers will choose to remain in the profession.   
  
Advancing Inclusive Principal Leadership:  
Arkansas recognizes that administrators play an important role in guaranteeing that students and teachers have access to necessary supports. DESE will continue to be supported by CCSSO’s Advancing Inclusive Principal Leadership (AIPL) initiative, and the SSIP SiMR will continue to be the overarching goal for this AIPL work. An integral component of AIPL has been related to embedding HLPs into statewide professional learning for principals and school leadership teams. DESE and the work of the SSIP will partner with the Arkansas Association of Educational Administrators (AAEA) to provide inclusive practices trainings for all principals involved in the AAEA Beginning Administrators Academy. In addition, DESE plans to invest in inclusive principal leadership through the expansion of the Inclusive Practices Project. Promotion and expansion of the ALL IN inclusive practices branding and an inclusive practices website occurred during this reporting period and will continue to be expanded with increased resources, research, and implementation supports during the next reporting period. The website address for the ALL IN initiative is as follows: https://sites.google.com/view/inclusive-practices/home. With improved website access to resources that align with state initiatives, LEAs will be able to see that this work stretches well beyond special education and is important for all stakeholders, including administrators. Beyond improvements to the SiMR, DESE anticipates a principal-led, continuous cultural shift at the building level that promotes the Least Dangerous Assumption, and ensures that all Arkansas students will be considered general education students. DESE also expects that inclusive leaders will lead buildings towards greater access to core instruction where LRE continuously improves for students with disabilities.   
  
Strategic Instructional Model:  
Though the SSIP SiMR is focused on literacy value-added growth scores for SWD in grades 3-5, Arkansas recognizes the need to provide supports for all students regardless of grade. Arkansas will continue to expand supports for the Strategic Instructional Model, with an emphasis on promoting digital access the following SIM Learning Strategies and Content Enhancement Routines: Inference Strategy, Proficiency in Sentence Writing Strategy, Main Idea Strategy, Listening and Note-taking Strategy, Vocabulary LINCing Routine/Strategy, Fundamentals of Sentence Writing Strategy, Unit Organizer Routine, and the Framing Routine. Trainings and follow up coaching on these strategies and routines will continue to be supported through a partnership with the University of Central Arkansas Mashburn Center for Learning. The next steps for this work will be to continue to scale the reach and sustainability of SIM professional learning opportunities via a learning management system, followed by job-embedded coaching. It is expected that providing resources and support for strategy instruction and content enhancement will empower teachers with the knowledge and skills needed help diverse students become self-directed learners. This improvement strategy directly aligns with HLP 14.  
  
Strategy Two -  
State Personnel Development Grant  
Arkansas will continue to leverage the SPDG to build upon previous work around RTI for academics and behavior, and will revise the PBIS Modules to update them for new content and resource links. The SPDG will continue to embed HLPs and other EBPs to directly align with the SSIP. The SPDG and the Division of Educator Effectiveness began piloting newly developed High-Leverage Practices and Universal Design for Learning Micro-Credentials during this report cycle. Sixty-six Educators from across the state piloted an HLP or UDL micro-credential. Next steps for this improvement strategy will be to add the following new micro-credentials to the current library:   
-Teach pro-social behaviors  
-Provide scaffolded supports  
-Use explicit instruction  
-Use flexible groupings  
-Use assistive technology  
-Organize and facilitate effective meetings with professionals and families  
-Collaborate with families to support student learning  
-Develop a comprehensive learner profile to understand students' strengths and needs  
-Provide positive and constructive feedback to guide students' learning and behavior  
-Conduct functional behavior assessments (FBA) to develop individual student behavior support plans  
As an additional next step to the micro-credential work, Arkansas will participate in The Micro-Credentials Partnership of States to further transform the state system to support systems-level quality standards.   
  
The SSIP/SPDG and Division of Educator Effectiveness will increase statewide coaching supports through monthly Coaching Collaborative Calls focused on increasing coaching practices for all. The next steps with this strategy will be to promote 3 Communities of Practice supporting Cognitive Coaching that will pertain to:  
-Cognitive Coaching Skills and Practice  
-Cognitive Coaching Implementation Challenges  
-DESE Implementation Challenges   
  
Universal Design for Learning (UDL)  
As a next step for increasing UDL in Arkansas schools, DESE will explore the potential adoption of a team-based capacity building pilot project with an internationally respected technical assistance provider focused on concepts and practices of UDL and MTSS.

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

High Leverage Practices for Inclusive Classrooms - HLPs  
Collaboration - Inclusive Practices Project   
Response to Intervention - Inclusive Practices  
Strategic Instructional Model - Executive Functioning/Content Enhancement Routines/Learning Strategies  
Inclusive Administrative Support - Advancing Inclusive Principal Leadership  
Universal Design for Learning (UDL)

**Provide a summary of each evidence-based practices.**

High Leverage Practices for Inclusive Classrooms, as defined by the the Council for Exceptional Children, offers a set of practices that are essential to the support of student learning, and that can be systematically taught, learned and implemented by novice and experienced educators. HLPs have been supported by research to have significant potential for improving academic or behavioral outcomes for students with disabilities and other learners. These practices are best utilized through a tiered system of support with decision making that is based on data to meet individual student needs.  
  
The Inclusive Practices Project has an intentional focus on the promotion of inclusive practices, ensuring that students who are IEP eligible, as well as other groups of struggling learners, have meaningful access to core instruction in established systems of intervention. Through the installation and implementation of collaborative structures and a relentless focus on learning, student outcomes will improve, including achievement and growth performance measured by district and state assessments. Collaboration leads to collective teacher efficacy which is a highly influential factor for improving student outcomes.  
  
Response to Intervention (RTI) is a multi-component, general education model, designed to identify students who may be at risk for learning or behavior challenges, offer support, and monitor progress.   
  
The Strategic Instructional Model (SIM) is a formal model of cognitive and metacognitive interventions for struggling learners designed to focus on the following three broad areas of learning: Acquisition, storage, and/or expression/demonstration. The goal of SIM is for students to grow in executive functioning skills for self-directed learning.  
  
Advancing Inclusive Principal Leadership is a DESE initiative in partnership with the Council of Chief State School Officers (CCSSO). The focus of this initiative is to develop Inclusive principals who are well prepared to serve students with disabilities and support teachers across general and special education in order to improve outcomes. Inclusive leaders create learning environments where all students can excel at high levels and promote distributive leadership to support and retain effective teachers of students with disabilities.  
  
According to ESSA, Universal Design for Learning is a scientifically valid framework for guiding educational practice. UDL provides flexibility in the presentation of information, the ways in which students respond or demonstrate learning, and the ways in which students are engaged in the learning. Additionally, UDL removes barriers to instruction, provides appropriate accommodations, and supports, challenges and maintains high achievement expectations for all.

**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.**

Arkansas recognizes the need to improve access for SWD to receive instruction in least restrictive environments. The evidence-based practices outlined in the SSIP support systemic change with the overarching goal of improving students' access to quality core instruction in least restrictive environments. When educators are supported and empowered through quality professional learning that deepens knowledge and skills to serve diverse learners, and when general and special educators and related services professionals collaborate together around student data, students will demonstrate significant growth in literacy scores, which is the Arkansas SSIP SiMR. This intended impact has been demonstrated in SSIP targeted schools as the SiMR target has been exceeded in the past two reporting cycles. As reflected in the SSIP Logic Model, outputs and changes to LEA systems include the following:  
  
-SSIP schools reflect a collaboratively designed multi-tiered system of supports for academics and behavior  
-SSIP school building leadership teams build and increase capacity as measured by a Systems Analysis Tool and/or the Professional Learning Communities Continuums Survey  
-Educators in SSIP schools build and increase capacity to implement HLPs and other evidence-based practices as measured by the Self-Efficacy Inventory  
-Principals in SSIP schools build and increase capacity to establish a culture of high expectations and inclusivity for diverse learners.  
-SSIP schools evidence an increase of students with disabilities with moderate or high growth as measured by the DESE and as reflected in the SiMR  
-SSIP schools meaningfully engage and collaborate with families to improve outcomes for students with disabilities  
  
The evidence-based practices that will enable and implement the above-listed changes include:  
  
High Leverage Practices for Inclusive Classrooms, as defined by the the Council for Exceptional Children, offers a set of practices that are essential to the support of student learning, and that can be systematically taught, learned and implemented by novice and experienced educators. HLPs have been supported by research to have significant potential for improving academic or behavioral outcomes for students with disabilities and other learners. These practices are best utilized through a tiered system of support, and based data and individual student needs.   
  
The Inclusive Practices Project has an intentional focus on the promotion of inclusive practices, ensuring that students who are IEP eligible, as well as other groups of struggling learners, have meaningful access to core instruction in established systems of intervention. Through the installation and implementation of collaborative structures and a relentless focus on learning, student outcomes will improve, including performance measured by district and state assessments. Collaboration leads to collective teacher efficacy which is a highly influential factor for improving student outcomes.  
  
Response to Intervention (RTI) is a multi-component, general education model, designed to identify students who may be at risk for learning or behavior challenges, and then offering needed support with frequent progress monitoring. With the identification of essential standards and frequent collaborative review of all students' data on common and summative assessments, matching interventions to specific student needs will ensure high levels of learning for all students.  
  
The Strategic Instructional Model (SIM) is a formal model of cognitive and metacognitive interventions for struggling learners designed to focus on the following three broad areas of learning: Acquisition, storage, and/or expression /demonstration. The goal of SIM is for students to increase self-direction in learning how to learn.  
  
Advancing Inclusive Principal Leadership is a DESE initiative in partnership with the Council of Chief State School Officers. The focus of this initiative is to develop Inclusive principals who are well prepared to serve students with disabilities and support teachers across general and special education to improve outcomes. Inclusive leaders create learning environments where all students can excel at high levels and promote distributive leadership to support and retain effective teachers of students with disabilities. Effective inclusive leaders will demonstrate increased efficacy to provide support and feedback to educators and improve instruction at the building level.  
  
Micro-credentialing for UDL and HLPs is expected to transform how educators in Arkansas approach lifelong learning. By integrating micro-credentials into the Arkansas system, educators will experience greater autonomy in identifying and developing new competencies, measuring competency of newly implemented skills, and potentially earning recognition along DESE's career continuum. By increasing educator ownership and agency, it is expected that rigorous and high-quality instructional and assessment practices will be implemented by educators for Arkansas students.

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

To measure change across multiple agency initiatives in the SSIP, Arkansas continued to utilize the SSIP Infrastructure Development Planning and Progress Management Tool: Using Implementation Drivers and Stages of Implementation. Consideration of all initiatives reflected in the SSIP Theory of Action for this improvement strategy resulted in ratings that remained stable. On a scale of 1 to 5 (1 = pre-exploration and 5 = full implementation) Arkansas SSIP Infrastructure Tool ratings revealed the following implementation scores: Competency drivers of selection (4.5), training (4.0) and coaching (4.0), Organizational drivers in decision support data system (4.5) facilitative administration (4.5) and systems intervention (4.5). Overall performance assessment of the Arkansas system coherence also remained relatively stable at (4.0) and the technical & adaptive leadership drivers increased (5.0). Multiple initiatives are included in the SSIP and some initiatives are more developed with regard to stages of implementation. Ratings reflect the intentional focus on coherence among multiple initiatives at multiple stages of implementation.   
  
The evaluation of improvement for the SSIP aligns with the SPDG evaluation plan. As the work has evolved across reporting cycles, tools to measure implementation fidelity have been modified. The SPDG’s comprehensive evaluation system measures the state, regional and district systems of support for growing educator capacity to proficiently implement high-leverage and other evidence-based instructional practices within daily instruction for academics and behavior. In addition, the SPDG evaluation plan monitors educator self-efficacy and and RTI capacity, fidelity of implementation, and student outcomes with value-added literacy scores. As the implementation team for strategy two of the SSIP, systemic improvements at the state level are measured through the SISEP State Capacity Assessment (SCA) tool. The SCA is designed to support scaling up of evidence-based practices by providing a regular measure of state capacity, a structured process for completing a state action plan, information on progress towards goals, and a common infrastructure for implementation. For measurement of implementation at the regional and district levels, the SPDG uses the SISEP Regional Capacity Assessment and the SISEP District Capacity Assessment respectively.   
  
To promote high quality coaching, the SPDG uses the Coaching Fidelity of Implementation Rubric. In the Arkansas model, coaches are defined as educational leaders that build collective capacity and efficacy of a school system based on educators’ self-identified needs to improve student outcomes by: Demonstrating knowledge of content and pedagogy; Demonstrating professional flexibility and responsiveness; Developing a comprehensive coaching plan; Establishing a culture for learning and engagement; Creating an environment of respect and rapport; and Communicating effectively in the coaching relationship. To further support coaching capacity, SPDG hosts Collaborative Coaching calls to build relationships amongst coaches across the network, to increase the capacity of coaches’ skills and tools based on coaching practices, to support inclusive practices and build a community where coaches receive support with ongoing implementation needs, to problem-solve challenges, and to share positive experiences and successful strategies. An Educator Self-Efficacy Survey is utilized to measure perceived acquisition, growth, knowledge, skill, and implementation of HLPs, UDL, and other evidence-based practices. The Micro-credential Professional Learning Evaluation Criteria assists the team with ensuring high quality standards in the development and implementation of micro-credentials for UDL, RTI and HLPs. Any training performed by the State team or coaching affiliates follows the Observation Checklist for High-Quality Professional Development (HQPD) Version 3.

**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.**

As measured by FFY 21 pre- and post- surveys of 290 Arkansas educators enrolled the DESE-OSE Novice Special Education Mentoring Program, data indicated that DESE's intensified efforts to provide training and technical assistance around UDL resulted in positive change regarding educators' understanding and implementation of UDL and inclusive practices. Post-survey results indicated that 86.3% of novice special educators understand UDL, while only 77.7 indicated understanding of UDL in the pre-survey. Post-survey results also indicated that 75.8% of novice special educators implemented UDL in the classroom, up from only 63.4% on the pre-survey. A comparison of pre- and post-survey responses on novice special educator confidence with understanding Least Restrictive Environment (LRE) improved from 55% to 67.9%.   
  
Another systemic data point for consideration to continue addressing evidence-based practices was the interest in the DESE Special Education Resource Teacher Academies. The purpose of the Special Education Resource Teacher Academies is to provide current licensed public school educators in Elementary K-6, 4-8, or 7-12 ELA, Math, or Science the opportunity to earn an additional Special Education Resource Endorsement and participate in job-embedded professional development while receiving graduate school credit hours, at no cost to them. Educators obtaining this endorsement are able to provide special education services within the general education classroom, as supplementary supports, or in special education classrooms. One goal of the academies is to expand LEAs' ability to consider and offer a variety of special education service delivery models. With the growing emphasis on inclusive practices, this opportunity assists Arkansas school districts by providing the skilled staff needed to lead the nation in student focused inclusive education. Participating educators are part of the Novice Special Education Teacher Mentoring Program at their local education service cooperative where they will receive additional coaching, professional development, regional networking opportunities, and support throughout the school year. DESE and all partnering higher education programs provide programs that:   
-Include 12-15 hours of graduate coursework  
-Lead to a Special Education Resource Teacher Endorsement  
-Include some summer instruction to prepare teachers for the fall semester  
-Include ongoing supports throughout the school year  
-Are designed for completion of the Academy in one year  
-Cover Tuition, fees, and assessment costs  
Following the release of the Commissioner's Memo, 174 educators participated in the initial cohort during the 2021-2022 academic year. Two hundred and ninety four participants (294) will participate in the 2022-2023 academic year. Each educator preparation program agrees to promote HLPs and UDL within the coursework for the academies, and interest to participate exceeded expectations. Survey data on the numbers of participants interested in continuing learning on high-leverage and inclusive practices, UDL, and executive functioning supports the ongoing use of the evidence-based practices outlined in the SSIP.  
  
Qualitative survey feedback from Inclusive Practices trainings that occurred with over 3,000 educators, administrators and families representing districts from every Arkansas Regional Educational Service Cooperative in 2021-2022 indicated that district and school teams overwhelmingly want more support in how to implement inclusive practices, including UDL, PLCs, RTI and HLPs. LEAs are increasingly requesting DESE support for the "how" of implementing inclusive practices, and each evidence-based practice and improvement strategy outlined in the SSIP supports this identified need. For this reason, statewide trainings regarding UDL and Executive Functioning were unveiled in the summer of 2022.

**Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.**

Inclusive Practices Professional Learning Communities Project:  
Arkansas expects to expand the Inclusive Practices Project with an additional eight schools during the next reporting cycle. DESE and a national technical assistance provider will continue a partnership to develop and expand the Professional Learning Communities (PLC) at Work® process within select SSIP schools in Arkansas based on an application process. This evidence-based practice that focuses on applying PLC structures and building a culture of shared responsibility and collective teacher efficacy between general and special educators in maximizing learning for all students is essential to work of the SSIP. It is anticipated that schools involved in this initiative will install/expand a PLC culture by ensuring that all subgroups of students are addressed collectively. Additionally, it is anticipated that schools will experience increases in the number of students with disabilities being educated in general educated content settings, with access to core instruction. In this PLC culture, it is also anticipated that teachers will grow in self and collective efficacy with knowledge and implementation of UDL, RTI, HLPs and innovative service delivery models.  
  
High Leverage Practices:  
Survey data acquired during this phase of the SSIP revealed improvement in year-to-year comparisons for Arkansas novice special educators' self-efficacy with applying high-leverage practices (HLPs) in their everyday work. As next steps, the SSIP will continue to leverage the work of the SPDG with regard to the development of micro-credentials for all HLPs. A focus on building agency infrastructure and supports by focusing on state-level capacity and knowledge of HLPs with agency leaders, regional content specialists, agency technical assistance providers, IHEs and the state’s parent training center will continue. The SSIP will also continue to intentionally collaborate with Educator Effectiveness and IHEs around alignment of efforts to mentor all novice administrators and general and special educators with HLPs. It is expected that the scaling of work around HLPs will better equip general and special educators to be more confident in knowledge and skills of working with diverse learners, and that improved self-efficacy will encourage more novice teachers to remain in the profession.   
  
Advancing Inclusive Principal Leadership:  
Arkansas recognizes that administrators play an important role in guaranteeing that students and teachers have access to necessary supports. DESE has been directly supported by CCSSO’s Advancing Inclusive Principal Leadership (AIPL) initiative and the SSIP SiMR will continue to be the overarching goal for this AIPL work. An integral component of AIPL has been related to embedding HLPs into statewide professional learning for principals and school leadership teams. In addition, DESE plans to develop and expand the Inclusive Practices PLC Project within additional schools to serve as working laboratories for the PLC at Work® process, conducting action research, and sharing best inclusive practices with other schools throughout the state. This project will continue to have an intentional focus on ensuring that students who are IEP eligible as well as other groups of struggling learners have meaningful access to core instruction and established systems of intervention. Arkansas will also advance strategy one by expanding the ALL IN statewide inclusive practices training campaign focused on "the how" of inclusive practices. Promotion and expansion of the inclusive practices ALL IN branding and website will be an additional next step. With improved website access to resources that align with state initiatives, LEAs will be able to see that this work stretches beyond special education and is important for all stakeholders. Beyond improvements to the SiMR, DESE anticipates a continuous cultural shift that follows the Least Dangerous Assumption, where all Arkansas students will be considered general education students and will be served in Least Restrictive Environments. It is expected that Arkansas' LRE data will continue to improve with this continuous cultural shift. It is also anticipated that principals will grow in self-efficacy as inclusive instructional leaders and become champions for the inclusive practices work.  
  
Strategic Instructional Model:  
Though the SSIP SiMR is focused on literacy value-added growth scores for SWD in grades 3-5, Arkansas recognizes the need to provide supports for all students regardless of grade. Arkansas will continue to expand supports for the Strategic Instructional Model, with an emphasis on the following SIM Learning Strategies and Content Enhancement Routines: Inference Strategy, Proficiency in Sentence Writing Strategy, Main Idea Strategy, Listening and Note-taking Strategy, Vocabulary LINCing Routine/Strategy, Fundamentals of Sentence Writing Strategy, Unit Organizer Routine, and the Framing Routine. These strategies and routines have been offered via face-to-face and virtual sessions by content specialists through a partnership with the University of Central Arkansas Mashburn Center for Learning Team. The next steps for this work are to promote the developed training through DESE's Digital Learning Unit to scale the reach and sustainability of this work by offering SIM professional learning opportunities via a learning management system, followed by job-embedded coaching.   
  
Response to Intervention/HLPs/UDL Micro-credentials:  
Arkansas will continue to leverage the SPDG to build upon previous work around RTI for academics and behavior, and will revise the PBIS Modules to update them for new content and resource links. The SPDG will continue to embed HLPs and other EBPs to directly align with the SSIP. The SPDG and the Division of Educator Effectiveness began piloting newly developed High-Leverage Practices and Universal Design for Learning Micro-Credentials during this report cycle. Next steps for this improvement strategy will be to add the following new micro-credentials to the current library:   
-Teach pro-social behaviors  
-Provide scaffolded supports  
-Use explicit instruction  
-Use flexible groupings  
-Use assistive technology  
-Organize and facilitate effective meetings with professionals and families  
-Collaborate with families to support student learning  
-Develop a comprehensive learner profile to understand students' strengths and needs  
-Provide positive and constructive feedback to guide students' learning and behavior  
-Conduct functional behavior assessments (FBA) to develop individual student behavior support plans  
As an additional next step to the micro-credential work, Arkansas will participate in The Micro-Credentials Partnership of States to further transform the state system to support systems-level quality standards.   
  
Universal Design for Learning (UDL)  
As a next step for increasing UDL in Arkansas schools, DESE will explore the potential adoption of a team-based capacity building pilot project with an internationally respected technical assistance provider focused on concepts and practices of UDL and MTSS.  
  
Coaching:  
The SSIP/SPDG and Division of Educator Effectiveness will increase statewide coaching supports through monthly Coaching Collaborative Calls focused on increasing coaching practices for all. The next steps with this strategy will be to promote 3 Communities of Practice supporting Cognitive Coaching that will pertain to:  
-Cognitive Coaching Skills and Practice  
-Cognitive Coaching Implementation Challenges  
-DESE Implementation Challenges

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

YES

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

The above-listed SiMR data indicates that Arkansas has exceeded the target across two reporting cycles in SSIP-supported LEAs implementing the coherent improvement strategies. Stakeholder feedback from novice special educators, beginning administrators, educators seeking resource endorsement in the Special Education Resource Academies and from parent engagement sessions indicate that the SSIP is well-calibrated to the needs of Arkansas LEAs. Results from the SSIP Infrastructure Tool, and the State, Regional and District Capacity Assessments indicates that systemic change is occurring throughout the cascade of supports from the SEA to the classroom.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

Following the submission of the new targets for the FFY 2020-2025 SPP/APR cycle, the OSE has continued to collaborate closely with numerous partners and through various initiatives to obtain authentic engagement and reciprocal exchange of information regarding the targets, including Indicator 17. These partners and/or initiatives include:  
   
The State Special Education Advisory Council is an integral group of stakeholders who provide input on target setting and improvement activities. The State Special Education Advisory Council meetings are held in April, July, October and January. Each meeting provides a forum for solicitation of feedback regarding SPP/APR targets and the SSIP Theory of Action. The Advisory Council representation includes: Parents (10), Adult Corrections, Advocates (2), AR Rehabilitation Services (2), Career & Technical Education (2), Center for Exceptional Families (PTI), Foster Care, Higher Education, Juvenile Corrections, LEA Special Education Supervisors, McKinney-Vento Administrator, Teachers (4), Private School, and Public Charter Schools. During these meetings, the council members and public participants are provided updates on the previously held stakeholder input sessions, compliance indicators, dispute resolution indicators, and the SSIP.   
  
The Center for Exceptional Families (TCFEF) is a Parent Training and Information (PTI) center for the state with the mission of improving educational opportunities for students with disabilities, including students transitioning to adult life beyond high school. TCFEF maintains a large database of families of students with disabilities, and engages with them via social media, virtual and in-person meetings and through email. The OSE partnered with TCFEF during the target setting for the FFY 2020-2025 SPP/APR cycle and maintains ongoing collaboration to solicit stakeholder feedback regarding indicator target updates and the SSIP. TCFEF is also a contracted partner of the State Personnel Development Grant which directly aligns with the SSIP Theory of Action.   
  
The Inclusive Practices Project has an intentional focus on inclusive practices, ensuring that students who are IEP eligible, as well as other groups of struggling learners, have meaningful access to core instruction and established systems of intervention. Participating schools engage in a collaborative evaluation process that gathers data regarding student achievement, teacher practices, and effective professional development. This project directly aligns with several key indicators, but is especially integral to supporting Indicator 5 (LRE) and Indicator 17 (SSIP). Schools supported by this initiative are factored into the Arkansas State-identified Measurable Result (SiMR). These LEAs form a key constituency group for ongoing input on targets and revisions. More information about this project can be found at this website: https://dese.ade.arkansas.gov/Offices/special-projects/inclusive-practices-project  
  
The Arkansas Association of Educational Administrators (AAEA) is an agency of diverse school leaders that promotes quality public education for all children in Arkansas. AAEA's mission is to ensure high standards of leadership by providing quality professional development, influencing education legislation and policy, stimulating and fostering support and building successful coalitions. The OSE maintains a close partnership with AAEA, and particularly the constituent groups of Beginning Administrators (BA) and Special Education Administrators (AASEA). These partnerships provide avenues for broad stakeholder input on all targets in the SPP/APR, and any need for subsequent revisions to the targets. The BA subgroup has had increasing input over the past year through the OSE and AAEA's Advancing Inclusive Principal Leadership (AIPL) initiative.   
  
The ALL IN Initiative of the DESE-OSE promotes equitable access to core instruction to foster greater opportunities for students to reach college, career, and life goals. A new Inclusive Practices website was unveiled during this reporting cycle and houses important information for stakeholders in the areas of Least Restrictive Environment (LRE), Universal Design for Learning (UDL). High-Leverage Practices (HLPs), Inclusive Principal Leadership, Inclusive Related Services, Parent Resources, Flexible Service Delivery, Scheduling, IEP Documentation and Videos for Implementation Support. Additional information on this initiative can be found on the following website https://sites.google.com/view/inclusive-practices/home. As part of the ALL IN initiative, Learning for All statewide trainings were unveiled in this reporting period and were presented across the entire state in every educational service cooperative to over 3000 participants. Learning for All emphasizes two key considerations for achieving inclusive education: Universal Design for Learning and Executive Functioning. These statewide trainings provide an avenue for broad stakeholder feedback regarding Indicator 17.  
  
The Arkansas Collaborative Consultants (ACC) Convening and ACC Monthly Director Meetings represent key stakeholders from DESE-OSE's technical assistance arm. These diverse stakeholders provide leadership, support and service to LEAs in all 75 counties in the state, in alignment with the vision and mission of DESE-OSE and the SSIP. Discussions regarding data, targets, planning, and action steps for the SSIP occur during these meetings in order to establish performance measures to meet the targets outlined in the SPP/APR and to prioritize performance measures within discretionary grants.   
  
The Arkansas School-Based Therapy Conference is an opportunity for the constituencies of special education administrators, occupational therapists, physical therapists, and speech-language pathologists to discuss indicator 17 targets and data, and to have meaningful dialogue to connect their roles to the targets when considering flexible service delivery, scheduling, funding, collaborative teaming structures, and high-leverage practices.   
  
In partnership with the State Personnel Development Grant and the SSIP, the Office of Innovation for Education (OIE) at the University of Arkansas engages stakeholders through Innovation Landscape Focus Groups, Coaching Communities of Practice, Empathy Interviews, and Process Mapping to transform of Arkansas' professional learning system from a traditional compliance model, to a nested model that encourages choice, educator capacity and efficacy.

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

The stakeholder engagement strategies primarily utilized for the SSIP include clarifying goals, working with partner organizations, using multiple meeting opportunities, communicating often, using multiple means of submitting feedback and identifying key individuals who will champion the work. The SSIP Coordinator, UALR Data and Research Director and State Implementation Team from DESE have provided regular updates to, and requested feedback from, external stakeholders including the Special Education State Advisory Council and Special Education LEA Supervisors to keep these groups informed as well as to solicit their feedback. Increased involvement with the state's family engagement center, The Center for Exceptional Families (TCFEF) was a primary focus during this cycle of the SSIP. The SSIP partnered with TCFEF to host five statewide workshops to gather qualitative data and feedback on baseline and targets for Indicator 17. The feedback from these workshops provided valuable perspectives to guide the SSIP Theory of Action and align supports and services that best leverage identified family needs and support family involvement and engagement. This effort directly aligns with HLP 3, which pertains to Collaborating with Families to Support Student Learning and Secure Needed Services.  
   
The SSIP Coordinator is frequently involved with SPDG and SPMT leadership, as well as with the Arkansas Association of Special Education Administrators' meetings. Feedback on the SSIP is regularly solicited through these collaborations. The SSIP Coordinator also serves as a team member on the AIPL initiative to increase the capacity of administrators to be inclusive leaders. As part of the annual DESE monthly LEA technical assistance calls, the SSIP Coordinator and the Associate Director of Special Education provide updates to LEA Special Education Supervisors about the infrastructure work taking place as well as solicit their feedback on the process. Continued intentional collaboration between the DESE and the Arkansas Collaborative Consultants (Professional Development Outreach) to better support LEAs has occurred through monthly meetings and the coordinated application of the SSIP theory of action into professional development, coaching and training support and facilitation.   
  
In December of this reporting cycle, TCFEF, the IDEA Data and Research Manager, and the SSIP Coordinator facilitated a statewide virtual event for families to provide feedback on the setting targets, data analysis, and improvement strategies. For families who could not attend the live virtual session, a link to a recording of the event was sent to TCFEF's broad network of families to review and provide input at their convenience. In partnership with the SSIP, TCFEF hosted five additional workshops during this reporting cycle for Arkansas parents/caregivers focused on gathering their perceptions of special education in Arkansas through the lens of lived experiences. The workshop dates were 5/20/21, 8/6/21, 10/15/21, 1/11/22, and 3/10/22. Participants were shown a video created by DESE-OSE and TCFEF that highlights diverse perspectives and reflections of 15 families navigating special education in Arkansas. Feedback was then requested from workshop participants on ways to improve special education services in Arkansas, including coverage of the established baselines and targets. Emphasis of these meetings centered around Indicators 1, 4, 5, 8, and 17 and highlighted HLP 3: Collaborating with Families to Support Student Learning and Secure Needed Services. Average attendance at each workshop was 12, with a total attendance of 59 across the five workshops. TCFEF also presented the video for families at the ASPA conference with 150 participants.   
  
During this reporting cycle, the DESE-OSE launched a new Inclusive Practices website https://sites.google.com/view/inclusive-practices/home. This website houses information that describes the systemic change occurring within special education in Arkansas, and provides implementation resources and supports. The website has provided effective and efficient delivery of information for key stakeholders, including individuals with disabilities, families, educators, administrators, institutions of higher education and community members.

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

NO

**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.**

SAIL Literacy Support:  
Recognizing the need to calibrate initiatives and supports for all learners, and to ensure that the SSIP is reflective of supports for diverse disabilities, a collaborative group of stakeholders will meet monthly to discuss the evidence-base and application of literacy supports for students with complex learning needs. The State's Lead R.I.S.E. Specialist, the DESE-OSE Coordinator for Curriculum and Assessment and the SSIP Coordinator will continue to participate in the Standards-Aligned Instruction for Literacy (SAIL) cross-state collaborative addressing the evidence base and literacy supports for students with complex learning needs. Application of the Science of Reading (SoR) to individuals with complex and multiple disabilities will be an intensified focus in the next fiscal year. The State will use the SAIL Matrix Rubric for Literacy to mark progress towards systemic change at the agency level. The goal is to ensure high expectations and access to rigor for all students, including students with complex and low incidence disabilities.   
  
Assistive Technology Application:  
In the next reporting cycle, DESE will explore proposals to support the State’s focus and priorities through a strategic technology purchase. The Arkansas Every Student Succeeds Act (ESSA) Plan highlights the need for a system of aligned supports across the ADE to improve outcomes for all students. ADE will seek a suite of web-based accessibility tools for students accompanied with training and technology integration to support the implementation of inclusive practices and accessibility to high-quality instruction. In addition, the statewide purchase of universal support tools will help Arkansas strive toward the goal of general and special education systems (in this case technology systems) working collaboratively to provide the supports needed for all students to be successful. The use of universal support tools advances Arkansas’ current work with High Leverage Practices (HLPs), Universal Design for Learning (UDL), Equitable Access to Accessible Educational Materials (AEM) and leadership training and commitment to inclusive practices. Since 2014, Arkansas has been heavily invested in transitioning away from teaching reading from a whole language approach to a phonics-based approach that is grounded in the Science of Reading. The Reading Initiative for Student Excellence (R.I.S.E) is backed by legislation and is a focal point for literacy instruction in Arkansas that spans grades K-12 and across content areas. The statewide training in the Science of Reading has sharpened the focus of reading instruction and strengthened teachers’ abilities to instruct all students. High quality instruction also reduces the need for additional and specialized supports. While students are receiving evidenced-based intervention aligned with the Science of Reading to address deficiencies, the expectation for classroom instruction is at grade-level for every student. For the students reading independently below grade level, assistive technology accommodations provide access to grade-level reading in all appropriate content areas. DESE will seek a partnership with a global leader in educational technology to procure a system of easy to use, universally designed, supplemental software solutions, with the goal of providing access to students in Arkansas in order to achieve the vision for teaching and learning: all students will be actively literate, and critical thinkers who are community engaged. Through this project, Arkansas will increase the capacity for inclusive education. Providing inclusive tools for all students promotes confidence, independence, and life-long success. The goal is for Arkansas students to graduate ready for college, careers, and community engagement. Goals for this project will include:  
-Provide accessibility options for Arkansas students from a host of easy-to-use tools to support their literacy and math that work in alignment with district technologies  
-Foster the principles of Universal Design for Learning (UDL) by providing Arkansas students multiple means of representation, expression, and engagement through an array of informational/assistive technology options  
-Promote self-directed learners who use support tools that assist students in grades 3-12 with math, reading, and writing to understand and express themselves more confidently and independently  
-DESE expects that the system will ready students for the same or similar tools available on the statewide assessment.

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

SAIL Literacy Support:  
The timeline for above-listed SAIL activity will be monthly literacy group stakeholder meetings. Data collection will include qualitative conversations based on agendas and meeting minutes. Quantitative data will be captured at the agency level by using the SAIL Matrix Rubric for Literacy in the spring of the next reporting period. Aligning the evidence base of the science of reading with UDL, high leverage and evidence-based practices and through the lens of diverse high and low incidence disabilities will inform the SSIP coherent improvement strategies, and guide the development of professional learning supports for LEAs in Arkansas to provide better instruction for students with cognitive/communicative/behavioral or other complex needs. With improved, standards-aligned instruction in the area of literacy, it is anticipated that students with diverse learning needs will demonstrate progress on the regular and alternate assessments.  
  
Assistive Technology Application Expected Timeline:  
Request For Proposal Release to Prospective Contractors: December 5, 2022  
Bidders Conference: December 9, 2022  
Deadline for Prospective Contractor Questions: December 12, 2022  
Answers to Questions Posted to ARBuy: December 16, 2022  
Proposal Due Date: January 6, 2023  
Initial Proposal Evaluation: January 12, 2023  
Interviews: January 18-19, 2023  
Final Proposal Evaluation: January 19, 2023  
Discussions Kick Off Meeting: January 27, 2023  
Finalize Discussions: February 17, 2023  
Post Anticipation to Award: February 21, 2023  
Award Contract: April 3, 2023  
  
Expected Outcomes for the Assistive Technology Application:   
Integration of assistive technology as a universal design for all students in grades 3-12 will provide accessibility options for Arkansas students from a host of easy-to-use tools deployed in least restrictive environments. Increasing educator competency and use of Universal Design for Learning (UDL) opportunities available through technology will improve access to LRE and equip learners to be more self-directed in the acquisition and selection of tools that best supplement quality instruction in math, reading, and writing. DESE expects that the assistive technology application/system will ready students for the same or similar tools available on the statewide assessment which will help students with disabilities demonstrate what they know and are able to do. Data collection will be centered around the metrics of the application and feature use by students, and the training/coaching of educators in the features available on the application, and how data-driven feature matching assists diverse Arkansas learners.

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

NA

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

NA

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

## 17 - Required Actions

# Certification

**Instructions**

**Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.**

**Certify**

**I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.**

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.**

**Name:**

Jody Fields

**Title:**

Part B Data Manager

**Email:**

jafields@ualr.edu

**Phone:**

501-916-5861

**Submitted on:**

04/27/23 11:57:30 AM

# Determination Enclosures

## RDA Matrix

**Arkansas**

2023 Part B Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[8]](#footnote-9)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 80.83% | Meets Requirements |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 24 | 16 | 66.67% |
| **Compliance** | 20 | 19 | 95.00% |

**2023 Part B Results Matrix**

**Reading Assessment Elements**

| **Reading Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 93% | 2 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 92% | 2 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 15% | 0 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 91% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 21% | 0 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 91% | 1 |

**Math Assessment Elements**

| **Math Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 93% | 2 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 92% | 2 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 29% | 0 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 95% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 16% | 0 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 94% | 1 |

**Exiting Data Elements**

| **Exiting Data Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of Children with Disabilities who Dropped Out** | 8 | 2 |
| **Percentage of Children with Disabilities who Graduated with a Regular High School Diploma\*\*** | 89 | 2 |

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

**2023 Part B Compliance Matrix**

| **Part B Compliance Indicator[[9]](#footnote-10)** | **Performance (%)** | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.** | 0.00% | N/A | 2 |
| **Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 11: Timely initial evaluation** | 99.37% | YES | 2 |
| **Indicator 12: IEP developed and implemented by third birthday** | 100.00% | N/A | 2 |
| **Indicator 13: Secondary transition** | 78.22% | YES | 1 |
| **Timely and Accurate State-Reported Data** | 100.00% |  | 2 |
| **Timely State Complaint Decisions** | 100.00% |  | 2 |
| **Timely Due Process Hearing Decisions** | 100.00% |  | 2 |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

## Data Rubric

**Arkansas**

FFY 2021 APR[[10]](#footnote-11)

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

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

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

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

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APR and 618 -Timely and Accurate State Reported Data**

**DATE: February 2023 Submission**

**SPP/APR Data**

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

**Part B 618 Data**

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

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

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

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

## Dispute Resolution



## How the Department Made Determinations

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

[https://sites.ed.gov/idea/how-the-department-made-determinations/](https://nam10.safelinks.protection.outlook.com/?url=https%3A%2F%2Fsites.ed.gov%2Fidea%2Fhow-the-department-made-determinations%2F&data=05%7C01%7Cdan.royal%40aemcorp.com%7C56561a053eed4e4dffea08db4cd0ea7f%7C7a41925ef6974f7cbec30470887ac752%7C0%7C0%7C638188232405320922%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=REJfNg%2BRs0Gk73rS2KzO2SIVRCUhHLglGd6vbm9wEwc%3D&reserved=0)

1. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection. [↑](#footnote-ref-3)
3. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-4)
4. Data suppressed due to small cell size. [↑](#footnote-ref-5)
5. Data suppressed due to small cell size. [↑](#footnote-ref-6)
6. Data suppressed due to small cell size. [↑](#footnote-ref-7)
7. Data suppressed due to small cell size. [↑](#footnote-ref-8)
8. For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B." [↑](#footnote-ref-9)
9. The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: <https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR_Measurement_Table.pdf> [↑](#footnote-ref-10)
10. In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table. [↑](#footnote-ref-11)
11. In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a ‘0’. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table. [↑](#footnote-ref-12)