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

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

**For reporting on   
FFY 2019**

**Indiana**

U.S. Department of Education seal

**PART B DUE   
February 1, 2021**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

The Indiana state education agency (SEA) is Indiana Department of Education (IDOE). The Office of Special Education (OSE) is part of IDOE’s Student Pathways and Opportunities Division, which works in close partnership with the Academics Division. The SEA offers support to the OSE through ancillary divisions such as: Finance, Communications, General Counsel, External Affairs & Partnerships (including Legislative Affairs), Assessment, Accountability, Information/Data Management, and Social, Emotional & Behavioral Wellness. For the IDOE organizational chart, please see: https://www.doe.in.gov/sites/default/files/idoe/idoeorgchart.pdf  
The OSE has strengthened relationships between various offices such as School Improvement, Assessment, Early Learning, Title Programs, and Educator Effectiveness through work on the State Systemic Improvement Plan (Indicator 17).  
Based on the Individuals with Disabilities Education Act (IDEA), Every Student Succeed Act (ESSA) and the Office of Special Education Programs (OSEP) 2015 Dear Colleague Letter on the Provision of a Free Appropriate Public Education (FAPE), IDOE/OSE has established the foundation for our state’s Every Student Succeeds initiative. This initiative is represented via an infographic that contains the following key provisions:   
1. Central is the philosophy equity plus access equals outcomes;  
2. This is achieved through the tenets of high expectations, shared accountability, and shared responsibility;  
3. Supporting those tenets are collaboration, instruction, assessment, and curriculum; and  
4. The overall system is designed around a Results Driven Accountability (RDA) Framework and supported through an environment of Universal Design for Learning and a Multi-Tiered System of Supports.   
In November 2020, Indiana made Local Educational Agency (LEA) determinations based upon an RDA system which includes differentiated support. Results indicators and other results data, compliance indicators and data timeliness are components and the cornerstone of RDA. Each of these components are then made up of specific elements which are assigned points dependent upon whether a target is met. These points are part of a calculation by which the LEA determination is assigned and differentiated support is decided. This has been a multi-year project developed and implemented on the input and advice of stakeholders from throughout Indiana to improve educational opportunities and results for all students, including students with disabilities (SWDs).   
OSE full-time staff provide general supervision to the state through three teams: Fiscal, Dispute Resolution, and Technical Assistance (TA)/Monitoring. In addition to the State Director, OSE administration also includes an Assistant Director for each of those three areas. Indiana also contracts with the Indiana Resource Network (IRN) entities who provide professional development (PD) and offer TA, working directly with LEA staff across the state. As a result of a long and productive relationship with our state Parent Training and Information Center (IN\*SOURCE), IDOE also provides office space for an IN\*SOURCE staff member, which fosters ongoing collaboration between the two entities and provides responsive parent support.

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

Due to COVID-19, USED granted a waiver for assessments for the spring of 2020 therefore the FFY2019 SPP/APR does not have data populated in B3B and B3C. Due to the absence of this data, IDOE used FFY2018 assessment data in the LEA RDA calculations. Although IDOE did not have new statewide assessment data due to COVID-19, LEAs continued to use formative and interim assessments in classrooms. COVID-19 guidance and resources were made available on a wide range of topics on the delivery of special education and related services. These resources are available at: https://www.doe.in.gov/specialed/covid-19-guidance-and-resources and https://docs.google.com/document/d/1daTpwPj-eXDgah6MyMNuJu9eRiOe7tAhbtB40YAEI1o/edit?usp=sharing.

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

399

**General Supervision System**

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

As a result of increased accountability and changes in OSEP’s monitoring priorities, IDOE developed a results driven accountability (RDA) system. With IDOE’s implementation of RDA, efforts shifted to a framework that focuses on both compliance and improved results. This RDA system aligns with the IDEA requirements, RDA as outlined by OSEP, the Elementary and Secondary Education Act as revised by the ESSA, and state statutes and regulations. RDA is an integrated process involving data collection and verification, LEA corrective action, TA, reporting, and sanctions as applicable. RDA also emphasizes child outcomes: assessment performance, graduation rates, LRE, and early childhood outcomes, as well as data timeliness. This system is designed to ensure state and district compliance with federal special education requirements and improved academic, behavioral, and social outcomes for SWDs.  
  
IDOE’s system aligns with OSEP’s 8 key components for improving educational results and functional outcomes for all SWDs:   
  
1 State Performance Plan /Annual Performance Report (SPP/APR)  
The current SPP/APR, effective from FFY2013-19, describes the 17 federal indicators and provides a target for each. Each indicator is categorized as either compliance or results, with targets set based on trend analysis and stakeholder input. The APR reflects the performance of LEAs based on indicator data (including findings), allowing a year for correction by LEAs that did not meet the targets for specific indicators. The SPP/APR is posted here: https://www.doe.in.gov/specialed/results-driven-accountability.  
  
2 Implementation of Policies & Procedures  
Indiana’s special education rules are found in the Indiana Administrative Code at 511 IAC 7-32 through 7-49 (Article 7). Article 7 is aligned with IDEA and implemented by local programs, including LEAs. IDOE encourages LEAs to proactively seek assistance as needed to implement state policies and procedures. A phone line and email account are monitored daily by special education staff to assist LEAs. In addition, guidance/clarification is often included in the OSE newsletter.  
  
3 Integrated Monitoring   
IDOE conducts monitoring activities focused on improving educational results and functional outcomes for all SWDs, and ensuring that LEAs and other educational programs meet the requirements of the IDEA. IDOE monitors through the collection and analysis of data the LEAs submit. These data are compared to targets as defined in the SPP/APR.  
IDOE monitors LEAs using an RDA framework, including compliance indicator data, results data, and data timeliness. Each compliance indicator is assigned a status of compliant, finding of noncompliance, or N/A. A score is assigned to each of the indicators, based upon the status. The compliance scores and data timeliness scores are added and weighted to calculate the LEA determination. Based on the determination, IDOE may offer TA/PD, require a corrective action plan to resolve the root cause issue(s), and/or put special conditions on funds.   
Statewide grade 3 reading test data, 1% alternate assessment cap data, and data points from Indicators 1, 3, 5, and 7 are used to calculate results. A differentiated level of support is assigned based on the final results calculation: Level 1 (universal support), Level 2 (targeted PD), and Level 3 (one-on-one support from an OSE specialist to work on correction of compliance/improving results as needed). For individual LEA determinations, see: https://www.doe.in.gov/specialed/results-driven-accountability.   
  
4 Fiscal Management  
Part B LEA allocations are calculated in accordance with 34 CFR §§300.705 (subgrants of section 611 funds) and 300.815 & 816 (subgrants of section 619 funds). Once calculated, allocations are posted to IDOE’s internal system, and LEAs complete and submit grant applications for approval. Applications are as follows: Part B 611 (budget/part one), Part B 611 (MOE/part two), Part B 619, and Part B Mandatory CCEIS.  
Part B applications are uploaded by fiscal agencies to a web-based grant management system for initial review by a fiscal team member. Once approved, a second fiscal team member reviews the application. Applications are reviewed for allowable costs, proportionate share amounts, CEIS amounts, signatures, and all other IDEA requirements. Application data is entered into an internal tracking sheet by grant year. Upon approval, LEAs receive a letter granting reimbursement requests. If an LEA requests modification, IDOE specialists use a two-party review to ensure accuracy and allowability.   
The reimbursement template (as of 2019) requires LEAs to report the number of students receiving CCEIS and the number in that category who receive an IEP. Reimbursement requests are split by scope (Special Education, CCEIS, and Proportionate Share) to ensure funds are being used in the manner approved and to benefit SWDs in each scope. At the end of a grant cycle, LEAs must submit a final expenditure report with a final reimbursement request to confirm funds were expended as approved. For any funds expended in a nonapproved manner, LEAs are contacted and required to return the funds for repayment to the USED. IDOE utilizes a portion of Part B funds for administrative support and discretionary activities, including contracts to entities for the provision of TA and PD to LEAs.   
  
5 Data   
Public schools, including charter schools, and accredited nonpublic schools submit data regarding students, personnel, and other required information via online data portal. Required submissions, some of which are specific to SWDs, include: child count, personnel, education settings, exiting information, discipline, assessment, and dispute resolution. Data, including 618 data, is used to inform all of the projects in which IDOE is involved, including the RDA system and completion of the SPP/APR. In 2020 IDOE conducted RDA Data Retreats where LEAs reviewed local data and discussed next steps and developing goals. The Data Retreats assisted LEAs in understanding RDA calculations and determinations, changes from last year, the RDA Planning Tool, and findings received based on special education indicators. Upon request, IDOE provides data to members of the general public, school personnel, State Board of Education, and legislators following confidentiality laws (FERPA and Article 7). https://www.doe.in.gov/specialed/data   
  
6 Sustaining Compliance & Improvement  
Based on both prongs of our RDA framework, LEAs receive individualized levels of assistance to: sustain compliance, encourage growth, and analyze systemic efforts to improve outcomes for students with disabilities. If an LEA has a finding of noncompliance, the LEA must complete, as necessary, a root cause analysis to determine the reason(s) for non-compliance and then develop a corrective action plan. The plan must be implemented, and noncompliance fixed within a year of the finding. If the noncompliance is not corrected within 1 year, the LEA is determined to be in continued noncompliance, and if not fixed after a second year, the LEA goes into long-standing noncompliance. In recent years, 1 LEA has been determined to need substantial intervention. This resulted in Special Conditions being placed on the Part B Grant, along with other sanctions.   
  
7 Dispute Resolution  
IDOE encourages communication between parents and LEAs when a dispute arises related to special education. When informal efforts prove unsuccessful, IDOE makes available all of IDEA’s dispute resolution mechanisms: mediation, state complaint, and due process hearing. In addition to the 3 processes identified in Article 7, IDOE also provides Facilitated IEP services to address concerns within the IEP team meeting on request at no cost to the parties. IDOE works with LEAs and IN\*SOURCE to ensure that parents receive and understand their rights and responsibilities. https://www.doe.in.gov/specialed/dispute-resolution  
  
8 Technical Assistance: See next section.

**Technical Assistance System**

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

For purposes of this section, TA is defined as the provision of advice and assistance in the implementation, installation and maintenance of the concepts related to improving the performance of students with disabilities. In Indiana, the provision of LEA TA and PD go hand in hand. With the implementation of Indiana’s RDA framework, the support is matched to the LEA determination and/or results indicator level, and subsequent assistance will be differentiated. Depending on the subject matter and the intensity of the need, the IDOE and IRN (Indiana’s technical assistance partners) specialists offer various levels of TA and/or professional development. TA and professional development are provided based upon three levels of need: universal, targeted, and intensive.  
The universal level is available to all LEAs and includes: discussion with or training by IDOE or IRN staff members; IDOE and IRN websites including topic-specific communities of learning; the IDOE Moodle Communities; information about state and national resources (including the OSEP funded national TA centers as well as the IRN ); links and contact information to relevant local, regional and state resources; written guidance about specific topics; short video clips; webinars; and question and answer documents.  
The targeted level of assistance is available to those LEAs who have identified noncompliance found through our RDA monitoring processes described elsewhere in this introduction, or if the LEA is in danger of being out of compliance if policy/procedure/practice revisions are not made. The targeted level also includes those LEAs who have had personnel changes and require assistance to ensure new staff gain the knowledge of the expectations under IDEA. Assistance is provided via: webinars, conference calls, virtual meetings, and on-site or regional training opportunities that include evidence-based practices, and summits.  
The intensive level of assistance focuses on LEAs where the issue or issues are identified as systemic and/or requiring rigorous LEA work and focused assistance by the IDOE and/or the IRN. Assistance will be individualized dependent upon the identified issue(s) and includes one-to-one consultation (telephone, email, virtual, or on-site meeting) and/or topic-specific training provided to LEA staff by the IDOE and/or the IRN.  
With the implementation of RDA, there is a direct correlation between the LEA determination score and the differentiated level of TA/PD assistance provided. With respect to Results Technical Assistance levels, Level 1 LEAs are generally provided universal TA; Level 2s are targeted; Level 3s are intensive.   
As TA and professional development occur in Indiana, IDOE follows the principles of adult learning and includes evidence-based practices. The effectiveness of the implementation is measured through the data collected for the specific indicators or evidence that practice has changed.

**Professional Development System**

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

Depending on the subject matter and the intensity of the need, IDOE offers various levels of TA and/or professional development to LEAs either directly (telephone/email and on-site), virtually (both synchronous and asynchronous), indirectly via online resources, and through Indiana Resource Network (IRN) service providers: (http://www.doe.in.gov/specialed/indiana-resource-network).   
  
These IRN partners’ services are briefly described below and can be directly accessed by the LEAs in the state:  
Indiana IEP Resource Center (IEPRC): IEPRC provides resources, professional learning opportunities, and technical assistance related to the Indiana IEP system, Article 7 compliance, IEP processes and improving local practices.  
Indiana Center on Teacher Quality (ICTQ): ICTQ improves educational outcomes for students with disabilities by ensuring their access to a PreK -12 continuum of instruction from high-quality teachers. The project uses Implementation Science as a framework for building capacity at the universal, targeted, and intensive levels.  
Project Success: Project SUCCESS supports higher academic achievement for students with significant intellectual disabilities (SWSID). Topics frequently covered: Inclusive Practices, Unpacking the Content Connectors, Curriculum Mapping, Goal Writing, and Distance Learning for SWSID.   
IN\*SOURCE: The Indiana Resource Center for Families with Special Needs, or IN\*SOURCE, provides parents, families, individuals, and service providers the information and training necessary to help assure effective educational programs and appropriate services for individuals with disabilities.   
Pass Project: Promoting Achievement for Students with Sensory Loss (PASS): PASS Project provides statewide support, technical assistance, and professional development opportunities for educators that will improve instructional quality, promote academic achievement, and foster successful post-secondary transition outcomes for students with sensory loss.  
PATINS Project: The PATINS Project supports schools in creating and sustaining an equitable learning environment for every student through assistive and accessible technologies, accessible educational materials, and Universal Design for Learning.  
Indiana Center for Accessible Instructional Materials (ICAM): ICAM is a managed web-based system designed to provide support to LEAs in meeting the NIMAS regulations of the IDEA 2004.   
Indiana Secondary Transition Resource Center (INSTRC): INSTRC works closely with transition educators and teams throughout the state, providing technical assistance, troubleshooting challenges, and assisting schools as they collaborate with state agencies and organizations to build seamless transitions for their students.   
The Indiana Disproportionality Resource Center (IDRC): IDRC assists the IDOE in defining and identifying disproportionality in special education, and provides TA to LEAs in order to increase equity in special education throughout the state.  
Virtuoso Education Consulting: VIrtuosos develops practitioners’ awareness, knowledge, and skills related to best practices in the PK-12 environment. The team helps educators meet school improvement goals, remediate disproportionality, close discipline and achievement gaps, and develop proficiency in culturally responsive practices.   
Indiana School Mental Health Initiative (ISMHI): ISMHI provides resources, consultation, professional development, and education that promote and sustain the social, emotional, behavioral, mental, and physical health of Indiana’s school-aged children, including those with disabilities, with the goal of increasing school engagement and improving educational and life outcomes.  
The Early Childhood Center (ECC): ECC provides training, technical assistance, data analyses, and strategic planning to support schools in improving the quality and impact of their preschool programs with specific attention to inclusion and early literacy.  
  
There are other technical assistance / professional development resources in the state that can be accessed by the LEAs; however, IDOE does not have a direct contract relationship. They include:  
Indiana Deafblind Services Project: The Indiana Deafblind Services Project is designed to improve the quality of educational services available to Indiana's infants, toddlers, children, and youth who have a combined vision and hearing loss.   
PBIS Indiana: Positive Behavior Interventions & Supports Resource Center develops and establishes a statewide network of culturally responsive school-wide positive behavior support sites and increases educators' knowledge and understanding of how PBIS impacts student achievement, family engagement, dropout rate, and least restrictive environment placements.   
HANDS (Helping Answer Needs by Developing Specialists) in Autism Resource Center: HANDS in Autism builds local capacity in the use of behavioral and educational practices supported with the data-driven HANDS Model curriculum, framework, and process of outreach, education, and training that is accessible, usable and relevant across systems, providers and communities serving individuals and families affected not only by autism spectrum disorder but a full range of disabilities, ages, intellectual and functional abilities, and neurodevelopmental, behavioral and other challenges.  
Center on Education and Lifelong Learning (CELL): CELL provides tools, training, and TA as schools increase student achievement, build staff capacity, and align resources. Their work focuses on professional development related to teacher evaluation systems, differentiated instruction, classroom management, co-teaching, instructional consultation teams, culturally responsive practices, and PBIS. In addition, CELL conducts program evaluations for a variety of district, state, and national programs.  
Center for Deaf and Hard of Hearing Education (CDHHE): CDHHE promotes positive outcomes for all deaf and hard of hearing children so they can reach their full potential.  
The Indiana Resource Center for Autism (IRCA): IRCA staff are actively engaged in work that leads to improved outcomes for individuals on the autism spectrum and related disorders, and their families by providing professionals, family members, and individuals with ASD with the knowledge and skills to support children and adults in typical early intervention, school, community, work, postsecondary and home settings.

**Stakeholder Involvement**

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

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

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

YES

**Reporting to the Public**

**How and where the State reported to the public on the FFY18 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 2018 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State’s SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2018 APR in 2020, is available.**

The performance of each LEA located in the state on the targets on the FFY 2018 SPP/APR are reported to the public by posting on the IDOE  
 website and are available here: https://www.doe.in.gov/sites/default/files/specialed/618-reporting-ffy2018-website-new-save-12-8-20.xlsx  
  
The complete copy of the FFY2018 SPP/APR including attachments, as well as the FFY2018 SSIP (Indicator 17), is available on the IDOE website at the following links:   
Final FFY2018 APR: https://www.doe.in.gov/sites/default/files/specialed/indiana-ffy2018-spp-apr.pdf  
  
Attachment A (General Supervision) to FFY2018 SPP/APR: https://www.doe.in.gov/sites/default/files/specialed/indiana-ffy2018-attachment-general-supervision-introduction.pdf  
  
Attachment B (Professional Development) to FFY2018 SPP/APR: https://www.doe.in.gov/sites/default/files/specialed/indiana-ffy2018-attachment-b-professional-development-system-introduction.pdf   
  
FFY 2018 SSIP: https://www.doe.in.gov/sites/default/files/specialed/indiana-indicator-17-state-systematic-improvement-plan.pdf

## Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must provide a FFY 2019 target that reflects improvement over baseline and report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP’s coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short- and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities are impacting the State’s capacity to improve its SiMR data.  
  
OSEP notes that one or more of the attachments included in the State’s FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

**Response to actions required in FFY 2018 SPP/APR**

The FFY 2019 target that reflects improvement over baseline and report of FFY 2019 data for the State-identified Measurable Result (SiMR) will be included in Indiana's FFY 2019 SSIP submission on or before April 1, 2021. Additionally, Indiana will assess and report on its progress in implementing the SSIP (specifically including supporting data that demonstrates that the implementation of these activities is impacting Indiana's capacity to improve its SiMR data, consistent with the requirements identified above) with submission of the FFY 2019 SSIP on or before April 1, 2021.  
  
Indiana has taken steps, including amending compliance checkers to its 2 pdf attachments to FFY 2018 SPP/APR to ensure compliance with Section 508 of the Rehabilitation Act of 1973. These attachments to the FFY 2018 SPP/APR are included on the IDOE website along with the final copy of the FFY 2018 SPP/APR at the following discrete links:  
Final FFY 2018 SPP/APR: https://www.doe.in.gov/sites/default/files/specialed/indiana-ffy2018-spp-apr.pdf  
Attachment A General Supervision (Introduction): https://www.doe.in.gov/sites/default/files/specialed/indiana-ffy2018-attachment-general-supervision-introduction.pdf  
Attachment B Professional Development System (Introduction): https://www.doe.in.gov/sites/default/files/specialed/indiana-ffy2018-attachment-b-professional-development-system-introduction.pdf

## Intro - OSEP Response

Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State does not have any FFY 2019 data for indicator 17.

## 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) graduating from high school with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

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

**Measurement**

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

**Instructions**

Sampling is not allowed.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), and compare the results to the target. Provide the actual numbers used in the calculation.

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

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

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

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2012 | 71.72% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 67.00% | 70.00% | 72.00% | 74.00% | 76.00% |
| Data | 73.41% | 70.87% | 72.03% | 70.87% | 72.64% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 76.50% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs graduating with a regular diploma | \*[[1]](#footnote-2) |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs eligible to graduate | 9,910 |
| SY 2018-19 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec FS150; Data group 695) | 07/27/2020 | Regulatory four-year adjusted-cohort graduation rate table | 71.4%[[2]](#footnote-3) |

**FFY 2019 SPP/APR Data**

| **Number of youth with IEPs in the current year’s adjusted cohort graduating with a regular diploma** | **Number of youth with IEPs in the current year’s adjusted cohort eligible to graduate** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| \*1 | 9,910 | 72.64% | 76.50% | 71.4%2 | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Overall, the graduation rate in the state saw a small decline between school year 2017-2018 and school year 2018-2019. Graduation rates for students without disabilities saw a similar decline when compared to the rate for students with disabilities, indicating that the decline was not specific to students with disabilities but was systemic to the cohort. The graduation rate for both students with and without disabilities has been consistent with small variations since the adoption of new state academic standards in 2014. Further examination into graduation APR data shows that medium-sized districts (defined as those districts with total enrollments of 2,501 to 10,000 students) were the predominant driver of decrease. IDOE addressed these differences with districts at the annual LEA Results Driven Accountability training. Individual LEA data was shared with districts in technical assistance tools. Graduation rate is part of the Results Driven Accountability scoring matrix.

**Graduation Conditions**

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

4-year ACGR

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

To graduate with a general (regular) diploma, students must: 1) pass 40 credits of high school instruction, including specific requirements across subject areas in English, mathematics, social studies, science, physical education, health, and college and career readiness; AND 2) either: a) pass the graduation qualifying exam administered by the state or be granted a waiver under certain conditions if they do not pass this exam, OR b) be certified with a graduation pathway that includes an employability skills component and a postsecondary education readiness component. Requirements for students with disabilities are the same as those without.

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

NO

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

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

OPTION 1:

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

OPTION 2:

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

**Measurement**

OPTION 1:

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

OPTION 2:

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

**Instructions**

Sampling is not allowed.

OPTION 1:

Use 618 exiting data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) received a certificate; (c) reached maximum age; (d) dropped out; or (e) died.

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

OPTION 2:

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

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

Options 1 and 2:

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), and compare the results to the target.

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2011 | 10.76% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 8.51% | 8.01% | 7.51% | 7.01% | 6.51% |
| Data | 6.94% | 7.60% | 5.90% | 7.04% | 7.50% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 6.01% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

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

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 6,171 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b) | 924 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c) | 5 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d) | 779 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education as a result of death (e) | 18 |

**FFY 2019 SPP/APR Data**

| **Number of youth with IEPs who exited special education due to dropping out** | **Total number of High School Students with IEPs by Cohort** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 779 | 7,897 | 7.50% | 6.01% | 9.86% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Indiana saw a decrease in overall graduation rate for students with and without disabilities. The four-year-cohort dropout rate also increased for students with and without disabilities from school year 2017-2018 to 2018-2019, consistent with the dropout rate increase using Section 618 data, indicated here. The increase for students with and without disabilities indicates that this increase was systemic to all students in 2018-2019. The relatively large increase in dropout rate is also due to the following two additional factors. First, continuing efforts were made to improve source data for existing data (EDFacts file specification FS009), which indicates that dropout rate under Section 618 was likely underreported in prior years. Second, the passage of Public Law 159-2019 placed higher evidentiary scrutiny on the recording of some students who were indicated as withdrawing from high school to enroll in homeschool, thus removing them from the possibility of dropping out. LEAs began reviewing student data in anticipation of the enforcement of this law, likely leading to an increase in the number of students coded as dropouts.

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

All students who are no longer enrolled in a school, and for whom there are not proper mobility documentation demonstrating continuing education consistent with the state's compulsory education law or documentation of receipt of a diploma or certificate of completion as specified in the student's IEP (except for those students who died during the school year or aged-out of special education services under Indiana law), are recorded as a dropout. For purposes of Indicator 2, this includes all youth aged 14 to 22. Per federal regulations, a student cannot be reported as a dropout for a school year that the student has completed. Therefore, students finishing a school year without a diploma or certificate are reported as dropouts at the beginning of the next school year if and when they do not return to school.

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

NO

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

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

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3B: Participation for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

Indicator 3B: Provide separate reading/language arts and mathematics participation rates, inclusive of all ESEA grades assessed (3-8 and high school), for children with IEPs. Account for ALL children with IEPs, in all grades assessed, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3B - Indicator Data

**Reporting Group Selection**

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

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

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Overall | 96.87% | Actual | 96.73% | 88.66% | 95.39% | 97.06% | 99.00% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Overall | 96.87% | Actual | 97.68% | 88.95% | 96.03% | 97.52% | 98.96% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Overall | 95.00% |
| Math | A >= | Overall | 95.00% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**FFY 2019 Data Disaggregation from EDFacts**

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

YES

**Data Source:**

SY 2019-20 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

**Reading Assessment Participation Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards |  |  |  |  |  |  |  |  |  |  |  |

**Data Source:**

SY 2019-20 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

**Math Assessment Participation Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards |  |  |  |  |  |  |  |  |  |  |  |

**FFY 2019 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 99.00% | 95.00% |  | N/A | N/A |

**FFY 2019 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 98.96% | 95.00% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

Assessment results are reported with other 618 data at https://www.doe.in.gov/specialed/data under "618 Reporting."

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

Under order of the Governor of Indiana and the waiver granted by the United States Secretary of Education, no statewide assessments were administered for this indicator for the 2019-2020 school year due to the outbreak of the COVID-19 pandemic.

## 3B - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2020 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2018, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f).  In addition, OSEP reminds the State that in the FFY 2019 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2019.

**Response to actions required in FFY 2018 SPP/APR**

Data consistent with requirements has been posted on the web at https://www.doe.in.gov/sites/default/files/specialed/618-reporting-ffy2018-website-new-save-12-8-20.xlsx, viewable to the pubic at https://www.doe.in.gov/specialed/data.

## 3B - OSEP Response

OSEP's response to the State's FFY 2018 SPP/APR required the State to provide OSEP with a Web link that demonstrates that it has reported, for FFY 2018, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). The State provided the required information.  
  
The State was not required to provide any data for this indicator. Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State received a waiver of the assessment requirements in section 1111(b)(2) of the ESEA, and, as a result, does not have any FFY 2019 data for this indicator.

## 3B - Required Actions

# Indicator 3C: Proficiency for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3C - Indicator Data

**Reporting Group Selection**

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

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

**Historical Data: Reading**

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

**Historical Data: Math**

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

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Overall | 18.15% |
| Math | A >= | Overall | 19.26% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**FFY 2019 Data Disaggregation from EDFacts**

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

YES

**Data Source:**

SY 2019-20 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

**Reading Proficiency Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs who received a valid score and a proficiency was assigned |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |

**Data Source:**

SY 2019-20 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

**Math Proficiency Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs who received a valid score and a proficiency was assigned |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |

**FFY 2019 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 17.90% | 18.15% |  | N/A | N/A |

**FFY 2019 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 18.91% | 19.26% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

Assessment data is reported with all 618 data at https://www.doe.in.gov/specialed/data under "618 Reporting."

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

Under order of the Governor of Indiana and the waiver granted by the United States Secretary of Education, no statewide assessments were administered for this indicator for the 2019-2020 school year due to the outbreak of the COVID-19 pandemic.

## 3C - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2020 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2018, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f).  In addition, OSEP reminds the State that in the FFY 2019 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2019.

**Response to actions required in FFY 2018 SPP/APR**

Data consistent with requirements has been posted on the web at https://www.doe.in.gov/sites/default/files/specialed/618-reporting-ffy2018-website-new-save-12-8-20.xlsx, viewable to the pubic at https://www.doe.in.gov/specialed/data.

## 3C - OSEP Response

OSEP's response to the State's FFY 2018 SPP/APR required the State to provide OSEP with a Web link that demonstrates that it has reported, for FFY 2018, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). The State provided the required information.  
  
The State was not required to provide any data for this indicator. Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State received a waiver of the assessment requirements in section 1111(b)(2) of the ESEA, and, as a result, does not have any FFY 2019 data for this indicator.

## 3C - 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 districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for 2018-2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 4A - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 1.30% | 1.20% | 0.43% | 0.33% | 0.23% |
| Data | 1.62% | 0.53% | 0.00% | NVR | 7.14% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 0.00% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**FFY 2019 SPP/APR Data**

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

YES

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

344

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 1 | 57 | 7.14% | 0.00% | 1.75% | Did Not Meet Target | No Slippage |

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

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

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

IDOE defines Indicator 4A "significant discrepancy of students with disabilities in the rates of suspensions and expulsions greater than 10 days" as a comparison of the risk index of all races/ethnicities of students with disabilities in the LEA to the risk index of all races/ethnicities of students with disabilities combined in the state. The risk ratio must be greater than 2.0 for each of three consecutive years of data. IDOE has a required minimum of 15 students of all races or ethnicities with a disability suspended or expelled for more than 10 days for both the target and comparison group.

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

**Review of Policies, Procedures, and Practices (completed in FFY 2019 using 2018-2019 data)**

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

For each LEA that the State identifies as having a significant discrepancy in the rate of suspensions or expulsions of greater than 10 days in a school year for children with IEPs, Indiana completed the following process:  
  
LEAs were notified that the LEA had significant discrepancy in discipline (over the Indiana defined risk ratio threshold of 2.0 for each of three years) and the annual data analysis reflected possible noncompliance for this indicator.  
  
Each LEA was required to participate in a policy and procedure review which included the following information:  
  
Requiring that the case conference committee (CCC) consider positive behavioral interventions and supports to address any of the student's behaviors that impede the student's learning or the learning of others  
Requiring teachers of record to ensure that a student's IEP, including any behavioral intervention plan (BIP), is being implemented as written  
Explaining that the school will count a short-term removal from the student’s placement for any part of the student’s day as a day of suspension when the removal is not pursuant to the student’s IEP  
Requiring compliance with I.C. 20-33-8-7 when a student is removed from the student’s placement for any part of the day when the removal is not pursuant to the student’s IEP  
Describing who is responsible for determining if a change of placement has occurred when a student has been removed/suspended for more than 10 cumulative days in a school year  
Describing the factors to be taken into account when making that decision  
Describing when the CCC must meet to determine if the student's misconduct is a manifestation of the student's disability  
Describing what the CCC must consider in determining if the misconduct is a manifestation of the student's disability  
Describing when a functional behavioral assessment (FBA) is required to be conducted  
Describing what information is to be included in a FBA and how it is to be conducted  
Requiring that a FBA be conducted prior to developing a BIP  
Describing what must be included in a BIP  
  
Each LEA was required to participate in a file review (practices) (minimum of 5 files). Topics/areas reviewed:  
  
Parent notification of change of placement  
Appropriate services provided during the removal  
CCC meeting held within 10 instructional days of the decision to change the student's placement  
CCC reviewed relevant information in the student's file, including the student's IEP, any teacher observations, and information provided by the parent to determine if the conduct in question was 1) caused by, or had a direct and substantial relationship, to the student's disability; or 2) the direct result of the school's failure to implement the student's IEP  
School took steps to remedy the deficiencies  
New or existing FBA and BIP reviewed  
Student placement discussion  
Student received appropriate services during removal  
Review of documentation concerning removal to an Interim Alternative Educational Setting (IAES) if a student: 1) carries a weapon to school or possesses a weapon, 2) knowingly possesses or uses illegal drugs or sells or solicits the sale of a controlled substance, or 3) inflicts serious bodily injury upon another person; while at school, on school premises, or at a school function  
CCC determines the IAES and appropriate services needed to enable the student to 1) continue to participate in the GE curriculum, although in another setting; 2) progress toward meeting IEP goals; 3) receive, as appropriate, a FBA and behavioral intervention services and modifications designed to address the behavior violation so that it does not recur  
  
If policies, procedures and/or practices (including the use of positive behavioral interventions and supports and procedural safeguards) were determined to be inappropriate, findings of noncompliance were issued.

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

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

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

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and conduct a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included were the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). The IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 | 0 | 0 | 1 |

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2013 | 1 | 0 | 1 |
|  |  |  |  |
|  |  |  |  |

**FFY 2013**

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

**Actions taken if noncompliance not corrected**

IDOE has imposed Special Conditions on one LEA for the grant award under Part B to ensure that the LEA General Supervision system (including monitoring, complaints, hearings, etc.) corrects noncompliance as required. These special conditions were initially imposed because:  
  
1. The failure of the LEA to implement requirements to evaluate and determine students eligible within 50 instructional days;  
2. The failure of the LEA to implement requirements for Part C to Part B transition services;  
3. The failure of the LEA to implement requirements for secondary transition services;  
4. The failure of the LEA to implement requirements for discipline procedures;  
5. The failure of the LEA to implement requirements for significant discrepancy in suspensions and/or expulsions;  
6. The failure of the LEA to implement requirements for disproportionate representation in identification of students with disabilities based on race/ethnicity;  
7. The failure of the LEA to implement requirements for Least Restrictive Environment;  
8. The failure of the LEA to implement requirements for Maintenance of Effort;  
9. The failure of the LEA general supervision system to timely correct noncompliance; and  
10. The failure of the LEA to provide an appropriately certified sign language interpreter.   
  
It should be noted that the LEA, though still under special conditions, has worked with the State and the Indiana IEP Resource Center throughout the APR reporting year to identify ways to increase compliance and has corrected some but not all of the failures identified above. The State took over the academics and finances of the LEA in FFY 2017, and this takeover resulted in a series of turnovers in administrative and management positions (including special education) throughout FFY 2019. As a result of these staffing changes, the lack of progress with some of the identified noncompliance areas, and lack of fidelity with internal data and data reporting, it has been determined appropriate that this LEA remain on special conditions.  
  
We would like to further note that as of January 2021, this LEA has been released from it's Indicator 4A Special Conditions based on correction of #4 and #5 above. All findings of noncompliance for FFY 2013 were corrected and correction verified unless the students moved or are no longer attending school within the district. Indiana has verified through a review of data submitted in our RDA Planning Tool and one-on-on technical assistance meetings and other support with the Assistant Director of the Office of Special Education that this district with a finding of noncompliance reflected in the FFY 2013 data reported for this indicator has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district or LEA consistent with OSEP Memorandum 09-02.IDOE has verified that each individual instance of noncompliance was corrected. IDOE has also verified by reviewing updated data that the LEA is implementing the requirements related to the disciplinary procedures for this indicator.

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

## 4A - Required Actions

The State must report, in the FFY 2020 SPP/APR, on the correction of noncompliance that the State identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
The State reported that noncompliance identified in FFY 2018 and FFY 2013 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 2020 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2018 and FFY 2013: (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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons

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

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

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

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for 2018-2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.27% | 0.53% | 0.00% | NVR | NVR |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 SPP/APR Data**

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

YES

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

356

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy, by race or ethnicity** | **Number of those districts that have policies procedure, or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 45 | NVR | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

IDOE's definition identifies significant discrepancy of racial and ethnic groups (American Indian or Alaska Native, Asian, Native Hawaiian or other Pacific Islander, Hispanic/Latino, Black or African American, White, and Multiracial) as the risk index for a given racial/ethnic group in the LEA compared with the risk index for all students with disabilities in the state. The risk ratio must be greater than 2.0 for each of three consecutive years. IDOE has a required minimum of 15 students with a disability in a racial/ethnic group suspended or expelled for more than 10 days for the target group and has a required minimum of 15 students of all races or ethnicities with a disability suspended or expelled for more than 10 days for the comparison group.

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

**Review of Policies, Procedures, and Practices (completed in FFY 2019 using 2018-2019 data)**

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

For each LEA that the State identifies as having a significant discrepancy in the rate of suspensions or expulsions of greater than 10 days in a school year for children with IEPs, Indiana completed the following process:  
  
LEAs were notified that the LEA had significant discrepancy in discipline (over the Indiana defined risk ratio threshold of 2.0 for each of three years) and the annual data analysis reflected possible noncompliance for this indicator.  
  
Each LEA was required to participate in a policy and procedure review which included the following information:  
  
Requiring that the case conference committee (CCC) consider positive behavioral interventions and supports to address any of the student's behaviors that impede the student's learning or the learning of others  
Requiring teachers of record to ensure that a student's IEP, including any behavioral intervention plan (BIP), is being implemented as written  
Explaining that the school will count a short-term removal from the student’s placement for any part of the student’s day as a day of suspension when the removal is not pursuant to the student’s IEP  
Requiring compliance with I.C. 20-33-8-7 when a student is removed from the student’s placement for any part of the day when the removal is not pursuant to the student’s IEP  
Describing who is responsible for determining if a change of placement has occurred when a student has been removed/suspended for more than 10 cumulative days in a school year  
Describing the factors to be taken into account when making that decision  
Describing when the CCC must meet to determine if the student's misconduct is a manifestation of the student's disability  
Describing what the CCC must consider in determining if the misconduct is a manifestation of the student's disability  
Describing when a functional behavioral assessment (FBA) is required to be conducted  
Describing what information is to be included in a FBA and how it is to be conducted  
Requiring that a FBA be conducted prior to developing a BIP  
Describing what must be included in a BIP  
  
Each LEA was required to participate in a file review (practices) (minimum of 5 files). Topics/areas reviewed:  
  
Parent notification of change of placement  
Appropriate services provided during the removal  
CCC meeting held within 10 instructional days of the decision to change the student's placement  
CCC reviewed relevant information in the student's file, including the student's IEP, any teacher observations, and information provided by the parent to determine if the conduct in question was 1) caused by, or had a direct and substantial relationship, to the student's disability; or 2) the direct result of the school's failure to implement the student's IEP  
School took steps to remedy the deficiencies  
New or existing FBA and BIP reviewed  
Student placement discussion  
Student received appropriate services during removal  
Review of documentation concerning removal to an Interim Alternative Educational Setting (IAES) if a student: 1) carries a weapon to school or possesses a weapon, 2) knowingly possesses or uses illegal drugs or sells or solicits the sale of a controlled substance, or 3) inflicts serious bodily injury upon another person; while at school, on school premises, or at a school function  
CCC determines the IAES and appropriate services needed to enable the student to 1) continue to participate in the GE curriculum, although in another setting; 2) progress toward meeting IEP goals; 3) receive, as appropriate, a FBA and behavioral intervention services and modifications designed to address the behavior violation so that it does not recur  
  
If policies, procedures and/or practices (including the use of positive behavioral interventions and supports and procedural safeguards) were determined to be inappropriate, findings of noncompliance were issued.

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

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

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

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and conduct a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included were the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 | 0 | 0 | 1 |

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 3 | 1 | 2 |
| FFY 2014 | 1 | 0 | 1 |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included were the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible but in no case greater than one year from the date of the issuance of the finding.   
  
The LEAs were informed that after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and IDOE consultant to address the specific reason(s) of noncompliance. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). The IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**FFY 2017**

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

**Actions taken if noncompliance not corrected**

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

**FFY 2014**

**Findings of Noncompliance Verified as Corrected**

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

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

**FFY 2014**

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

**Actions taken if noncompliance not corrected**

IDOE has imposed Special Conditions on one LEA for the grant award under Part B to ensure that the LEA General Supervision system (including monitoring, complaints, hearings, etc.) corrects noncompliance as required. These special conditions were initially imposed because:  
  
1. The failure of the LEA to implement requirements to evaluate and determine students eligible within 50 instructional days;  
2. The failure of the LEA to implement requirements for Part C to Part B transition services;  
3. The failure of the LEA to implement requirements for secondary transition services;  
4. The failure of the LEA to implement requirements for discipline procedures;  
5. The failure of the LEA to implement requirements for significant discrepancy in suspensions and/or expulsions;  
6. The failure of the LEA to implement requirements for disproportionate representation in identification of students with disabilities based on race/ethnicity;  
7. The failure of the LEA to implement requirements for Least Restrictive Environment;  
8. The failure of the LEA to implement requirements for Maintenance of Effort;  
9. The failure of the LEA general supervision system to timely correct noncompliance; and  
10. The failure of the LEA to provide an appropriately certified sign language interpreter.   
  
It should be noted that the LEA, though still under special conditions, has worked with the State and the Indiana IEP Resource Center throughout the APR reporting year to identify ways to increase compliance and has corrected some but not all of the failures identified above. The State took over the academics and finances of the LEA in FFY 2017, and this takeover resulted in a series of turnovers in administrative and management positions (including special education) throughout FFY 2019. As a result of these staffing changes, the lack of progress with some of the identified noncompliance areas, and lack of fidelity with internal data and data reporting, it has been determined appropriate that this LEA remain on special conditions.  
  
We would like to further note that as of January 2021, this LEA has been released from it's Indicator 4B Special Conditions based on correction of #4 and #5 above. All findings of noncompliance for FFY 2014 were corrected and correction verified unless the students moved or are no longer attending school within the district. Indiana has verified through a review of data submitted in our RDA Planning Tool and one-on-on technical assistance meetings and other support with the Assistant Director of the Office of Special Education that this district with a finding of noncompliance reflected in the FFY 2014 data reported for this indicator has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district or LEA consistent with OSEP Memorandum 09-02.IDOE has verified that each individual instance of noncompliance was corrected. IDOE has also verified by reviewing updated data that the LEA is implementing the requirements related to the disciplinary procedures for this indicator.

## 4B - Prior FFY Required Actions

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

**Response to actions required in FFY 2018 SPP/APR**

IDOE met numerous times with their state assigned technical assistance center as well as their OSEP state contact. The misunderstanding was uncovered and a more explicit definition was provided with the FFY 2019 submission.

## 4B - OSEP Response

## 4B- Required Actions

The State reported that noncompliance identified in FFY 2017 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was partially corrected. When reporting on the correction of noncompliance, the State must demonstrate, in the FFY 2020 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2018, FFY 2017, and FFY 2014: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2008 | Target >= | 68.00% | 69.00% | 70.00% | 71.00% | 72.00% |
| A | 63.77% | Data | 70.55% | 71.40% | 72.62% | 73.98% | 75.33% |
| B | 2008 | Target <= | 11.50% | 11.00% | 10.50% | 10.00% | 9.50% |
| B | 12.94% | Data | 10.55% | 10.42% | 9.84% | 9.34% | 8.68% |
| C | 2008 | Target <= | 2.15% | 2.14% | 2.13% | 2.12% | 2.11% |
| C | 2.42% | Data | 2.06% | 2.02% | 1.86% | 1.82% | 1.87% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 73.00% |
| Target B <= | 9.00% |
| Target C <= | 2.10% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | Total number of children with IEPs aged 6 through 21 | 162,513 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day | 123,844 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 13,455 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c1. Number of children with IEPs aged 6 through 21 in separate schools | 1,417 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c2. Number of children with IEPs aged 6 through 21 in residential facilities | 529 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements | 1,204 |

**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 2019 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 6 through 21 served** | **Total number of children with IEPs aged 6 through 21** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day | 123,844 | 162,513 | 75.33% | 73.00% | 76.21% | Met Target | No Slippage |
| B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 13,455 | 162,513 | 8.68% | 9.00% | 8.28% | Met Target | No Slippage |
| C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 3,150 | 162,513 | 1.87% | 2.10% | 1.94% | Met Target | No Slippage |

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

NO

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

This data was from December 2019, therefore there was no impact from COVID-19.

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

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2011 | Target >= | 40.00% | 40.50% | 41.00% | 41.50% | 42.00% |
| A | 38.70% | Data | 40.12% | 39.08% | 38.12% | 39.98% | 39.38% |
| B | 2011 | Target <= | 33.00% | 32.90% | 32.80% | 32.70% | 32.60% |
| B | 35.20% | Data | 33.81% | 34.09% | 33.71% | 32.56% | 32.35% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 42.00% |
| Target B <= | 32.60% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | Total number of children with IEPs aged 3 through 5 | 19,622 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 7,554 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b1. Number of children attending separate special education class | 5,896 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b2. Number of children attending separate school | 281 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b3. Number of children attending residential facility | 11 |

**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 2019 SPP/APR Data**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 7,554 | 19,622 | 39.38% | 42.00% | 38.50% | Did Not Meet Target | No Slippage |
| B. Separate special education class, separate school or residential facility | 6,188 | 19,622 | 32.35% | 32.60% | 31.54% | Met Target | No Slippage |

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

NO

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

This data was from December 2019, therefore there was no impact from COVID-19.

## 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A1 | 2010 | Target >= | 73.00% | 74.00% | 75.00% | 76.00% | 77.00% |
| A1 | 64.20% | Data | 69.83% | 73.00% | 72.00% | 74.14% | 75.41% |
| A2 | 2010 | Target >= | 23.00% | 24.00% | 25.00% | 26.00% | 27.00% |
| A2 | 20.40% | Data | 18.21% | 20.09% | 17.29% | 18.98% | 19.36% |
| B1 | 2010 | Target >= | 81.00% | 81.50% | 82.00% | 82.50% | 83.00% |
| B1 | 72.60% | Data | 77.55% | 79.77% | 80.09% | 82.05% | 81.82% |
| B2 | 2010 | Target >= | 15.50% | 16.00% | 16.50% | 17.00% | 17.50% |
| B2 | 15.40% | Data | 9.83% | 10.69% | 8.29% | 10.17% | 10.15% |
| C1 | 2010 | Target >= | 83.50% | 84.00% | 84.50% | 85.00% | 85.50% |
| C1 | 74.50% | Data | 80.28% | 82.59% | 82.66% | 84.31% | 84.27% |
| C2 | 2010 | Target >= | 17.00% | 17.50% | 18.00% | 18.50% | 19.00% |
| C2 | 16.90% | Data | 11.26% | 12.18% | 9.85% | 11.38% | 11.80% |

**Targets**

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

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**FFY 2019 SPP/APR Data**

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

0

**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 | 0 | 0.00% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 0 | 0.00% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 0 | 0.00% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 0 | 0.00% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 0 | 0.00% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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)* | 0 | 0 | 75.41% | 77.00% |  | N/A | N/A |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 0 | 0 | 19.36% | 27.00% |  | N/A | N/A |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 0 | 0.00% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 0 | 0.00% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 0 | 0.00% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 0 | 0.00% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 0 | 0.00% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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)* | 0 | 0 | 81.82% | 83.00% |  | N/A | N/A |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 0 | 0 | 10.15% | 17.50% |  | N/A | N/A |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 0 | 0.00% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 0 | 0.00% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 0 | 0.00% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 0 | 0.00% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 0 | 0.00% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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)* | 0 | 0 | 84.27% | 85.50% |  | N/A | N/A |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  *Calculation: (d+e)/(a+b+c+d+e)* | 0 | 0 | 11.80% | 19.00% |  | N/A | N/A |

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

YES

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

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

NO

**If no, provide the criteria for defining “comparable to same-aged peers.”**

IDOE utilized the Indiana Student Performance Readiness and Observation of Understanding Tool (ISPROUT) assessment tool in SY 2019-2020, and the ISTAR-KR assessment tool in prior years. Both of these tools are derivative of the Foundations to the Indiana Academic Standards and are aligned to the Indiana Standards for Kindergarten in the areas of mathematics, English/language arts and three functional areas, including physical skills, personal care skills and social-emotional skills. Teachers or speech language pathologists (SLPs) complete the online questionnaire annually at the entrance and exit of the program. The initial entrance and final exit scores are used to assess growth. Based on the student data, a score that is equal to or above the expected score would be considered evidence of achievement at a level that is "comparable to same-age peers."

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

ISPROUT is a tool used by educators to: a) identify student skills, knowledge, and behaviors; and b) monitor growth through daily observations.  
ISPROUT is required for all preschool-aged students with an IEP. Students are required to be observed by ISPROUT-certified special education teachers or SLPs. The students are rated during their first six weeks of receiving services and within the final six weeks prior to being released from their IEP or exiting to kindergarten.

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

Indiana's preschool outcomes assessment tool (ISPROUT) requires in-person evaluation of students by special education personnel. Due to the COVID-19 pandemic, by executive order of the Governor of Indiana, school buildings were not open for in-person instruction and/or services from late March until the end of the 2019-2020 school year. Thus, the vast majority of students exiting preschool special education did not have an exiting evaluation performed with which to calculate the data for this indicator. Additionally, Indiana transitioned from one evaluation tool (ISTAR-KR) for Indicator 7 to another (ISPROUT) in 2019-2020. This required a statistical comparison to align the entering scores from ISTAR-KR with the exiting score from ISPROUT to generate the outcomes categories. Due to COVID-19 restrictions, the number of students with both entrance and exit scores was insufficient to complete this statistical comparison. Indiana is thus unable to report any preschool outcomes data for FFY2019.  
  
In response to the impact on preschool outcomes data caused by COVID-19, Indiana has taken the following actions:   
LEAs were reminded that the ISPROUT management system remained open throughout the 2019-2020 school year for adding year end data that may have been collected prior to school building closures in the spring of 2020;  
IDOE sent a July 2020 memo titled “ISPROUT Data Windows” to all LEAs, providing notice that there would be four ISPROUT testing windows throughout the 2020-2021 school year (instead of just one initial window and one exit window) to provide maximum flexibility for administration and reporting on the ISPROUT when students were actually in-person, in response to the fluidity of students moving between in-person and virtual instruction. These test windows for the 2020-2021 school year are: July 7, 2020 - October 1, 2020; October 6, 2020 - December 31, 2020; January 5, 2021 - April 1, 2021; and April 6, 2021 - June 30, 2021.

## 7 - Prior FFY Required Actions

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

**Response to actions required in FFY 2018 SPP/APR**

On the FFY 2018 SPP/APR, FFY 2019 targets were to be adjusted when data from the new tool (ISPROUT) became available. Initial stakeholder input for the FFY 2019 targets included consultation with teachers (specifically including preschool teachers), Indiana Council for Administrators of Special Education (ICASE) executive committee, parents of SWDs, the parent resource center (IN\*SOURCE) and other technical assistance partners. During the RDA Data Retreats it was shared with LEAs across the state that the FFY 2019 target would be adjusted based on FFY 2019 data with stakeholder consultation. As there is no available data for FFY 2019 due to COVID-19, the target has been maintained based on previous data from the previous assessment tool, and stakeholders have been notified of this decision. The state will be setting a new target with a diverse group of stakeholders for FFY 2020 with the newly available data from the completed 2020-2021 ISPROUT and ISTAR-KR comparison data (and is likely to set a new baseline for the data at this time as well). This process was unable to be completed for FFY 2019, as Indicator 7 data was unavailable due to COVID-19 (see Indicator 7 data page). A series of stakeholder meetings for FFY 2020 will be held in the spring, summer, and fall months of 2021.

## 7 - OSEP Response

OSEP's response to the State's FFY 2018 SPP/APR noted that OSEP could not accept the FFY 2019 targets because the State did not indicate that stakeholders were provided an opportunity to provide input on the targets for this Indicator. The State has provided the required information and accepts the revised targets.  
  
The State did not provide any data for this indicator due to the COVID-19 pandemic. Therefore, OSEP could not determine whether the State met its targets.

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

Report the number of parents to whom the surveys were distributed.

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

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

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

## 8 - Indicator Data

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

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 42.20% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 70.00% | 71.00% | 72.00% | 73.00% | 74.00% |
| Data | 88.59% | 96.05% | 97.11% | 79.92% | 94.44% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 75.00% |

**FFY 2019 SPP/APR Data**

| **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6,353 | | 6,782 | 94.44% | 75.00% | 93.67% | Met Target | No Slippage |

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

182,240

**Percentage of respondent parents**

3.72%

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

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

| **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 |
| The demographics of the parents responding are representative of the demographics of children receiving special education services. | 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.**

Indiana conducted tests of representativeness of survey respondents on three domains: race/ethnicity, grade level, and primary disability category. The distribution of survey respondents were compared to the distribution of students with disabilities in the state. Indiana established a threshold of plus or minus five percentage points from each category in the overall population of students with disabilities to establish representativeness. Based on this threshold, the data are overall representative in the grade level and primary disability domains, and not representative in the race/ethnicity domain. Indiana has underrepresentation in the subcategories of Black/African American and Hispanic, and overrepresentation in the White subcategory. The overrepresentation in the white category is determined to be a function of the underrepresentation of the Black/African American and Hispanic subcategories.  
  
Indiana is adopting strategies to address the lack of representativeness. Indiana will notify all LEAs of their response rate and offer technical assistance to those whose response rate currently shows underrepresentation in any of the subcategories. Indiana will also increase communication efforts regarding the availability of the survey in alternative languages (most importantly Spanish). In addition, in August Indiana will be hosting meetings with stakeholders to update the survey in an effort to make it more user friendly and increase results.

**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.**

IDOE conducted representativeness tests across three domains: grade level, primary disability area, and race. Overall, the survey responses were representative of these populations in Indiana. Comparisons and tests of statistical interdependence strongly suggest representative responsiveness. The observed and expected values (based on populations) are listed below.  
  
Grade Level: SURVEY POPULATION OVERREPRESENTATION   
Pre-Kindergarten 665 10.09% 14,000 7.68% 2.41%  
Kindergarten 414 6.28% 10,666 5.85% 0.43%  
Grade 1 446 6.77% 11,916 6.54% 0.23%  
Grade 2 488 7.41% 12,693 6.97% 0.44%  
Grade 3 556 8.44% 13,520 7.42% 1.02%  
Grade 4 559 8.48% 14,399 7.90% 0.58%  
Grade 5 554 8.41% 14,208 7.80% 0.61%  
Grade 6 475 7.21% 14,217 7.80% -0.59%  
Grade 7 476 7.22% 13,705 7.52% -0.30%  
Grade 8 520 7.89% 13,424 7.37% 0.52%  
Grade 9 347 5.27% 13,024 7.15% -1.88%  
Grade 10 364 5.52% 12,663 6.95% -1.43%  
Grade 11 315 4.78% 11,749 6.45% -1.67%  
Grade 12 343 5.20% 11,073 6.08% -0.87%  
Adult 68 1.03% 982 0.54% 0.49%  
TOTAL 6,590 100.00% 182,239 100.00%  
  
Primary Disability Area: SURVEY POPULATION OVERREPRESENTATION   
Autism Spectrum Disorder 840 13.20% 16,994 9.33% 3.88%  
Blind/Low Vision 50 0.79% 977 0.54% 0.25%  
Cognitive Disability 444 6.98% 13,115 7.20% -0.22%  
Deaf/Hard of Hearing 92 1.45% 2,449 1.34% 0.10%  
Deaf-Blind 6 0.09% 30 0.02% 0.08%  
Developmental Delay 483 7.59% 10,492 5.76% 1.83%  
Emotional Disability 354 5.56% 12,752 7.00% -1.43%  
Multiple Disabilities 166 2.61% 2,070 1.14% 1.47%  
Orthopedic Impairment 39 0.61% 1,487 0.82% -0.20%  
Other Health Impairment 800 12.57% 27,295 14.98% -2.40%  
Specific Learning Disability 1,693 26.61% 54,120 29.70% -3.09%  
Speech or Language Impairment 1,375 21.61% 40,013 21.96% -0.34%  
Traumatic Brain Injury 20 0.31% 445 0.24% 0.07%  
TOTAL 6,362 100.00% 182,239 100.00%  
  
Child’s Ethnicity/Race: SURVEY POPULATION OVERREPRESENTATION   
Black/African American 522 8.04% 24,062 13.20% -5.16%  
White 5,172 79.68% 126,350 69.33% 10.35%  
Hispanic/Latino 304 4.68% 19,488 10.69% -6.01%  
Asian 70 1.08% 2,110 1.16% -0.08%  
Multi-racial 399 6.15% 9,766 5.36% 0.79%  
American Indian/Alaska Native 24 0.37% 360 0.20% 0.17%  
Hawaiian/Pacific Islander - 0.00% 103 0.06% -0.06%  
TOTAL 6,491 100.00% 182,239 100.00%

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

## 8 - Prior FFY Required Actions

None

## 8 - OSEP Response

## 8 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 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 FFY 2018, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 0.29% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.29% | 0.00% | 0.28% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 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 and ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 380 | 0.28% | 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).**

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

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

LEAs were notified that the LEA had disproportionate representation in identification (over the Indiana defined risk ratio threshold of 2.0 for each of three years), and the annual data analysis reflected possible noncompliance for this indicator. Each LEA was required to participate in a policy and procedure review, which included the following information:  
  
Detailing how LEA responds to requests for educational evaluations, including how a parent or agency may request the initial evaluation and the procedures for reevaluations  
  
Describing how a multidisciplinary team will be assigned to conduct educational evaluations  
  
Ensuring that assessments and evaluation materials are provided in the student’s native language or other mode of communication  
  
Ensuring that assessments and evaluation materials are provided in a form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally  
  
Ensuring that assessments and evaluation materials are selected and administered so as not to be discriminatory on a racial or cultural basis  
  
Ensuring that assessments and evaluation materials are used for the purposes for which the assessments or measures are valid and reliable  
  
Ensuring that assessments and evaluation materials are administered by trained personnel and in accordance with the evaluation/assessment protocol  
  
Ensuring that assessments and evaluation materials include those tailored to assess specific areas of educational need and not merely those designed to provide a single general IQ  
  
Ensuring that assessments and evaluation materials are selected and administered to ensure that the assessment accurately reflects the student’s achievement rather than reflect the student’s impaired sensory, manual, or speaking skills (unless the instrument is designed to assess those areas)  
  
Ensuring that the student is assessed (or that information is collected) in all areas related to the suspected disability  
  
Ensuring that assessment tools and strategies provide relevant information that directly assists the case conference committee (CCC) in determining the student’s eligibility for special education  
  
Requiring the multidisciplinary team to use a variety of assessment tools and strategies to gather required and relevant information about the student  
  
Ensuring that the multidisciplinary team includes the requisite qualified professionals  
  
Requiring the multidisciplinary team to review existing evaluation data on the student, obtain input from the student’s parent, identify the suspected disability, and determine additional data needed to determine the student’s eligibility for special education services  
  
Ensuring that the evaluation report for a student with the suspected disability of Autism Spectrum Disorder includes assessment results and other information collected as aligned to the characteristics of Autism Spectrum Disorder  
  
Ensuring the evaluation report for a student with the suspected disability of Specific Learning Disability includes the elements described in Indiana Administrative Code  
  
Ensuring that the CCC does not determine that a student is eligible for special education if the determinant factor is the lack of instruction in reading or math or the student’s limited English proficiency  
  
Ensuring that the CCC does not determine that a student is eligible for special education if the student does not meet the eligibility criteria for the disability  
  
Ensuring that the CCC does not determine the student eligible for special education when the student’s only need is a related service  
  
Ensuring that the CCC includes the requisite members  
  
Ensuring that at least one of the qualified professionals from the multidisciplinary team attends the initial CCC meeting  
  
Each LEA was required to participate in a file review (practices) (minimum of five files). Topics/areas reviewed:  
  
1. General Initial Evaluation Requirements  
1.1 Written notice of evaluation.  
1.2 Signed parental consent for evaluation.  
1.3 Written notice prior to the initial CCC containing:  
(1) A description and overall findings of each:  
(A) evaluation;  
(B) procedure;  
(C) assessment;  
(D) record; or  
(E) report;  
that the school used as a basis for any proposed action.  
(2) A description of action that the school may propose.  
(3) An explanation of why the school may propose an action.  
1.4 Educational evaluation conducted by a multidisciplinary team that includes, but is not limited to: (1) At least one teacher licensed in or other specialist with knowledge in, the area of suspected disability; (2) A school psychologist except for suspected disabilities of DD, LI, SI; (3) For suspected SLD, the student's general education teacher; (4) For BLV, DHH, MD, representatives of the state-operated schools.  
1.5 Findings of the evaluation compiled into an educational evaluation report and provided to the parent prior to or at the CCC.  
1.6 Educational evaluation report contains information collected or considered for all areas addressed during the evaluation.  
1.7 Notice of CCC meeting.  
1.8 Notice of ineligibility or proposed IEP.  
  
2. Disability-Specific Evaluation Requirements  
Evaluation included the necessary components given the suspected area(s) of disability. Consider the requirements for the relevant suspected disability(ies). (Information on specific eligibility requirements in rubric available upon request)  
  
3. Eligibility Determination  
3.1 Parent participation as a member of the CCC.  
3.2 Required members of the CCC were present including at least one of the qualified professionals from the evaluation team.  
3.3 The CCC considered all information contained in the educational evaluation report when determining eligibility.  
3.4 The CCC did not rely on any single measure of assessment as the sole criterion for determining eligibility or services.  
3.5 CCC must not determine that a student is eligible if the determinant factor is lack of appropriate instruction in reading or math.  
3.6 CCC must not determine that a student is eligible if the determinant factor is limited English proficiency.  
3.7 Evaluation results support the eligibility decision made by the CCC.  
  
If policies, procedures and/or practices were determined to be inappropriate, findings of noncompliance were issued.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 | 0 | 0 | 1 |

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

## 9 - Required Actions

The State must demonstrate, in the FFY 2020 SPP/APR, that the one district identified in FFY 2018 with disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that the district with noncompliance identified in FFY 2018: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

Based on its review of the 618 data for FFY 2019, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 2.78% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 2.70% | 1.84% | 2.78% | 3.11% | NVR |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 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.**

40

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 19 | 4 | 359 | NVR | 0% | 1.11% | Did Not Meet Target | N/A |

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

YES

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

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

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

LEAs were notified that the LEA had disproportionate representation in identification (over the Indiana defined risk ratio threshold of 2.0 for each of three years), and the annual data analysis reflected possible noncompliance for this indicator. Each LEA was required to participate in a policy and procedure review, which included the following information:  
  
Detailing how LEA responds to requests for educational evaluations, including how a parent or agency may request the initial evaluation and the procedures for reevaluations  
  
Describing how a multidisciplinary team will be assigned to conduct educational evaluations  
  
Ensuring that assessments and evaluation materials are provided in the student’s native language or other mode of communication  
  
Ensuring that assessments and evaluation materials are provided in a form most likely to yield accurate information on what the student knows and can do academically, developmentally, and functionally  
  
Ensuring that assessments and evaluation materials are selected and administered so as not to be discriminatory on a racial or cultural basis  
  
Ensuring that assessments and evaluation materials are used for the purposes for which the assessments or measures are valid and reliable  
  
Ensuring that assessments and evaluation materials are administered by trained personnel and in accordance with the evaluation/assessment protocol  
  
Ensuring that assessments and evaluation materials include those tailored to assess specific areas of educational need and not merely those designed to provide a single general IQ  
  
Ensuring that assessments and evaluation materials are selected and administered to ensure that the assessment accurately reflects the student’s achievement rather than reflect the student’s impaired sensory, manual, or speaking skills (unless the instrument is designed to assess those areas)  
  
Ensuring that the student is assessed (or that information is collected) in all areas related to the suspected disability  
  
Ensuring that assessment tools and strategies provide relevant information that directly assists the case conference committee (CCC) in determining the student’s eligibility for special education  
  
Requiring the multidisciplinary team to use a variety of assessment tools and strategies to gather required and relevant information about the student  
  
Ensuring that the multidisciplinary team includes the requisite qualified professionals  
  
Requiring the multidisciplinary team to review existing evaluation data on the student, obtain input from the student’s parent, identify the suspected disability, and determine additional data needed to determine the student’s eligibility for special education services  
  
Ensuring that the evaluation report for a student with the suspected disability of Autism Spectrum Disorder includes assessment results and other information collected as aligned to the characteristics of Autism Spectrum Disorder  
  
Ensuring the evaluation report for a student with the suspected disability of Specific Learning Disability includes the elements described in Indiana Administrative Code  
  
Ensuring that the CCC does not determine that a student is eligible for special education if the determinant factor is the lack of instruction in reading or math or the student’s limited English proficiency  
  
Ensuring that the CCC does not determine that a student is eligible for special education if the student does not meet the eligibility criteria for the disability  
  
Ensuring that the CCC does not determine the student eligible for special education when the student’s only need is a related service  
  
Ensuring that the CCC includes the requisite members  
  
Ensuring that at least one of the qualified professionals from the multidisciplinary team attends the initial CCC meeting  
  
Each LEA was required to participate in a file review (practices) (minimum of five files). Topics/areas reviewed:  
  
1. General Initial Evaluation Requirements  
1.1 Written notice of evaluation.  
1.2 Signed parental consent for evaluation.  
1.3 Written notice prior to the initial CCC containing:  
(1) A description and overall findings of each:  
(A) evaluation;  
(B) procedure;  
(C) assessment;  
(D) record; or  
(E) report;  
that the school used as a basis for any proposed action.  
(2) A description of action that the school may propose.  
(3) An explanation of why the school may propose an action.  
1.4 Educational evaluation conducted by a multidisciplinary team that includes, but is not limited to: (1) At least one teacher licensed in or other specialist with knowledge in, the area of suspected disability; (2) A school psychologist except for suspected disabilities of DD, LI, SI; (3) For suspected SLD, the student's general education teacher; (4) For BLV, DHH, MD, representatives of the state-operated schools.  
1.5 Findings of the evaluation compiled into an educational evaluation report and provided to the parent prior to or at the CCC.  
1.6 Educational evaluation report contains information collected or considered for all areas addressed during the evaluation.  
1.7 Notice of CCC meeting.  
1.8 Notice of ineligibility or proposed IEP.  
  
2. Disability-Specific Evaluation Requirements  
Evaluation included the necessary components given the suspected area(s) of disability. Consider the requirements for the relevant suspected disability(ies). (Information on specific eligibility requirements in rubric available upon request)  
  
3. Eligibility Determination  
3.1 Parent participation as a member of the CCC.  
3.2 Required members of the CCC were present including at least one of the qualified professionals from the evaluation team.  
3.3 The CCC considered all information contained in the educational evaluation report when determining eligibility.  
3.4 The CCC did not rely on any single measure of assessment as the sole criterion for determining eligibility or services.  
3.5 CCC must not determine that a student is eligible if the determinant factor is lack of appropriate instruction in reading or math.  
3.6 CCC must not determine that a student is eligible if the determinant factor is limited English proficiency.  
3.7 Evaluation results support the eligibility decision made by the CCC.  
  
If policies, procedures and/or practices were determined to be inappropriate, findings of noncompliance were issued.

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 6 | 0 | 2 | 4 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that, after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment, and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that, after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment, and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. The IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 8 | 4 | 4 |
| FFY 2016 | 2 | 1 | 1 |
| FFY 2013 | 1 | 0 | 1 |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that, after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment, and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that, after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment, and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this Indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**FFY 2017**

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

**Actions taken if noncompliance not corrected**

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

**FFY 2016**

**Findings of Noncompliance Verified as Corrected**

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that, after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment, and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

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

Addressing Prong 1 of the requirements in the OSEP Memo 09-02 included verification of the LEA correction (when possible to correct) of student level noncompliance as soon as possible, but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that, after reviewing their file review feedback, they were required to review and revise their policies, procedures, and practices relating to the development and implementation of IEPs and procedural safeguards to ensure that these policies, procedures, and practices comply with the IDEA (Prong 2).   
  
In addition, each LEA created a corrective action plan (CAP) based on the IDEA Data Center’s Success Gap Tool (SGT) that Indiana adapted. The SGT provided a framework for LEAs to review specific data in regard to the file review and a root cause analysis of five key focus areas (data, instruction, cultural competence, assessment, and interventions) completed by the LEA team in order to inform the CAP. Included was the review of evidence of student-level correction and a review of policies, procedures, and practices, resulting in revisions as appropriate. Technical assistance and training were provided virtually and/or on-site by the Indiana Disproportionality Resource Center and/or Virtuoso Education Consulting for LEA administration, teachers, and other special education staff. If a student was no longer within the jurisdiction of the LEA, individual correction was not made.  
  
Progress on this indicator was monitored through the regularly scheduled contacts between the LEA and an IDOE specialist to address the specific reason(s) of noncompliance. IDOE maintained communication and technical assistance via phone calls and e-mails with the LEA until all findings of noncompliance were corrected. In addition, the LEAs identified with noncompliance were informed that they could work with the appropriate Indiana Resource Network technical assistance provider(s). IDOE verified the correction of all noncompliance. This verification process included a review of updated policies, procedures, and practices (Prong 2) and confirmation of correction of each individual case of noncompliance that had been identified previously (Prong 1). IDOE also collected and verified the data by obtaining a new randomized sample to ensure that the individual and systemic noncompliance had been resolved.

**FFY 2016**

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

**Actions taken if noncompliance not corrected**

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

**FFY 2013**

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

**Actions taken if noncompliance not corrected**

IDOE has imposed Special Conditions on one LEA for the grant award under Part B to ensure that the LEA General Supervision system (including monitoring, complaints, hearings, etc.) corrects noncompliance as required. These special conditions were initially imposed because:  
  
1. The failure of the LEA to implement requirements to evaluate and determine students eligible within 50 instructional days;  
2. The failure of the LEA to implement requirements for Part C to Part B transition services;  
3. The failure of the LEA to implement requirements for secondary transition services;  
4. The failure of the LEA to implement requirements for discipline procedures;  
5. The failure of the LEA to implement requirements for significant discrepancy in suspensions and/or expulsions;  
6. The failure of the LEA to implement requirements for disproportionate representation in identification of students with disabilities based on race/ethnicity;  
7. The failure of the LEA to implement requirements for Least Restrictive Environment;  
8. The failure of the LEA to implement requirements for Maintenance of Effort;  
9. The failure of the LEA general supervision system to timely correct noncompliance; and  
10. The failure of the LEA to provide an appropriately certified sign language interpreter.   
  
It should be noted that the LEA, though still under special conditions, has worked with the State and the Indiana IEP Resource Center throughout the APR reporting year to identify ways to increase compliance and has corrected some but not all of the failures identified above. The State took over the academics and finances of the LEA in FFY 2017, and this takeover resulted in a series of turnovers in administrative and management positions (including special education) throughout FFY 2019. As a result of these staffing changes, the lack of progress with some of the identified noncompliance areas, and lack of fidelity with internal data and data reporting, it has been determined appropriate that this LEA remain on special conditions.  
  
We would like to further note that as of January 2021, this LEA has been released from it's Indicator 10 Special Conditions based on correction of #6 above. All findings of noncompliance for FFY 2013 were corrected and correction verified unless the students moved or are no longer attending school within the district. Indiana has verified through a review of data submitted in our RDA Planning Tool and one-on-on technical assistance meetings and other support with the Assistant Director of the Office of Special Education that this district with a finding of noncompliance reflected in the FFY 2013 data reported for this indicator has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district or LEA consistent with OSEP Memorandum 09-02. IDOE has verified that each individual instance of noncompliance was corrected. IDOE has also verified by reviewing updated data that the LEA is implementing the requirements related to identification for this indicator.

## 10 - Prior FFY Required Actions

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

**Response to actions required in FFY 2018 SPP/APR**

IDOE met numerous times with their state assigned technical assistance center as well as their OSEP state contact. The misunderstanding was uncovered and a more explicit definition was provided with the FFY 2019 submission.

## 10 - OSEP Response

## 10 - Required Actions

Because the State reported less than 100% compliance for FFY 2019 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. The State must demonstrate, in the FFY 2020 SPP/APR, that the four districts identified in FFY 2019 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.  
  
Further, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining four districts identified in FFY 2018, the remaining four districts identified in FFY 2017, the remaining one district identified in FFY 2016, and the remaining one district identified in FFY 2013 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification, are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311. In demonstrating the correction of the noncompliance identified in FFY 2018, FFY 2017, FFY 2016, and FFY 2013, the State must report, in the FFY 2020 SPP/APR, that the State verified that each district with noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018, FFY 2017, FFY 2016, and FFY 2013: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Indicator 11: Child Find

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

a. # of children for whom parental consent to evaluate was received.

b. # of children whose evaluations were completed within 60 days (or State-established timeline).

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 78.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.26% | 98.71% | 98.46% | 98.72% | 98.34% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 23,013 | 22,125 | 98.34% | 100% | 96.14% | Did Not Meet Target | Slippage |

**Provide reasons for slippage**

IDOE tracked noncompliance for 2019-2020 for reasons relating to the COVID-19 pandemic and for traditional reasons for noncompliance. Of the 888 noncompliant evaluations listed here, 675 were due to reasons relating to COVID-19. The number of evaluations was also reduced from prior years owing in part to COVID-19, making the calculation more sensitive to slippage. Rates of compliance, although not meeting the target, were consistent with the previous year when looked at separately from COVID-19 delays. IDOE has encouraged schools to use whatever means, including virtual evaluations where possible, to meet timeline compliance.

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

888

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

The total number of students that were evaluated outside of the timelines for Indiana is 888 students. Timelines were missed for a variety of reasons identified as follows: staff shortages, volume of referrals, scheduling conflicts, timeline errors, inadequate timeline tracking, improper documentation and LEA staff errors, and COVID-19 related delays (see slippage explanation above).  
  
Indicated below are the ranges of days for evaluations that were beyond the state designated timeline of 50 instructional days:  
  
1-5 days beyond the timeline- 371 students  
6-10 days beyond the timeline- 151 students  
Greater than 10 days beyond the timeline- 366 students

**Indicate the evaluation timeline used:**

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

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

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

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

State database that includes data for the entire reporting year

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

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

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 123 | 48 | 0 | 75 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to review and revise their policies, procedures, and practices relating to the process of conducting the initial evaluation within timeline parameters. Each LEA created a targeted action plan through the submission of a RDA Planning Tool. The planning tool included LEA-specific data in regard to the file review and a tab to create a targeted action plan to be completed by the staff of the LEA. In addition, the LEAs identified with noncompliance were informed that they were required to work with IDOE staff and/or appropriate Indiana Resource Network technical assistance provider(s). Progress on this indicator was monitored through the contacts between the LEA and IDOE specialist or resource center staff to address the specific reason(s) of noncompliance.  
  
To verify correction of LEAs out of compliance for their first year, IDOE staff reviewed three (3) months (March 30 through June 30) of data for the following year. Those months were pulled and reviewed for each LEA to ensure 100% compliance was achieved. This data was accessed through the IDOE data collection systems via the DOE-EV report (evaluation report). If LEAs were out of compliance for more than one consecutive year, IDOE staff pulled a full year of data to review corrections for full compliance.

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

The LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to correct each individual case of non-compliance identified in the file review unless the student was no longer under the jurisdiction of the LEA. (Prong 1 in OSEP Memo 09-02) Specifically, the LEAs worked with OSE staff and identified those individual cases of non-compliance that were due to factors other than a student receiving services within the 50 day timeline. For example, the specific reason(s) of noncompliance included improper documentation, staff errors, inadequate tracking, scheduling conflicts, staff shortage, timeline errors, and volume of referrals. The OSE staff then verified each of the Prong 1 files were corrected by a review of each student STN (the student unique identifier) associated with the noncompliance.  
  
The LEAs worked with IDOE staff to address the specific reason(s) of noncompliance. The LEAs that were issued findings were assigned an IDOE specialist and required to develop a targeted action plan in order to identify the root cause(s) of noncompliance and to change and update policies, procedures, and practices in order to correctly implement all regulatory requirements of the indicator. The IDOE specialist collected the updated policies, procedures, and practices from LEAs and verified that the appropriate changes were made. Pursuant to OSEP Memorandum 09-02, IDOE verified that, unless the child no longer remained under the jurisdiction of the initiating LEA, all outstanding noncompliant initial evaluations were completed, although late. IDOE verified completion of the outstanding non-compliant timelines by collecting and reviewing updated evaluation information from LEAs on each individual case through the State's data system and verified the LEA achieved the 100% percent compliance requirement. (Prong 2 in OSEP Memo 09-02)

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

LEAs identified as not meeting the required timeline for compliance were required to develop a Corrective Action Plan (CAP) in coordination with an education specialist at IDOE during FFY2014. The LEAs that were unable to verify correction of policies and procedures received intensified consultation from an assigned IDOE consultant and participated in state required corrective action. Additional monitoring and data submissions were required as a part of the CAP. One LEA that still had not corrected by FFY 2018 showed significant progress and substantial compliance by achieving 99% in both FFY 2017 and FFY 2018; the other LEA showed progress by achieving 96% and is receiving in-person targeted support on Indicator 13 as part of Indiana's RDA monitoring. Because of this longstanding noncompliance, IDOE will continue to collect, review, and verify subsequent data obtained by a new randomized sample to ensure that the LEAs are correctly implementing the regulatory requirements by achieving 100% compliance.   
  
The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact compliance on eligibility timelines. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address questions the team has. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2014 | 2 | 0 | 2 |
|  |  |  |  |
|  |  |  |  |

**FFY 2014**

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

**Actions taken if noncompliance not corrected**

LEAs identified as not meeting the required timeline for compliance were required to develop a Corrective Action Plan (CAP) in coordination with an education specialist at IDOE during FFY2014. IDOE verified that all specific cases of noncompliance are corrected, however systemic change has not yet occurred. The LEAs that were unable to verify correction of policies and procedures received intensified consultation from an assigned IDOE consultant and participated in state required corrective action. Additional monitoring and data submissions were required as a part of the CAP. One LEA that still had not corrected by FFY 2018 showed significant progress and substantial compliance by achieving 99% in both FFY 2017 and FFY 2018; the other LEA also showed progress and is receiving one-on-one Indicator 11 targeted support as part of Indiana's RDA monitoring. Because of this longstanding noncompliance, IDOE will continue to collect, review, and verify subsequent data obtained by a new randomized sample to ensure that the LEAs are correctly implementing the regulatory requirements by achieving 100% compliance.   
  
The IDOE specialist and/or resource center staff will continue working with the LEA Director to address the issues that are continuing to impact compliance on eligibility timelines. This may include visits (in-person or virtual) to the districts to work with the evaluation teams regarding expectations and the provision of technical assistance to address questions the team has. Pursuant to OSEP Memorandum 09-02, IDOE will continue to verify that, unless the child no longer remains under the jurisdiction of the initiating LEA, all outstanding non-compliant initial evaluations will be completed.

## 11 - Prior FFY Required Actions

None

## 11 - OSEP Response

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining 75 uncorrected findings of noncompliance identified in FFY 2018 and the remaining two uncorrected findings of noncompliance identified in FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018 and FFY 2014: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
   
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# 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.

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 95.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.25% | 100.00% | 99.43% | 97.39% | 99.68% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 3,284 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 433 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 2,255 |
| 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. | 402 |
| 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 2,255 | 2,449 | 99.68% | 100% | 92.08% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Indiana Department of Education investigated all instances of noncompliance and was able to determine the number of cases of noncompliance in timelines that were due to issues related to COVID-19 and those for traditional reasons. Indiana school buildings were closed for access by order of the Governor of Indiana from late March to the end of the 2019-2020 school year, which left many LEAs unable to have students evaluated and IEPs in place by the child's third birthday. Of the 194 non-compliant evaluations, 176 were delayed due to COVID-19 related issues. The remaining 18 were due to reasons not related to COVID-19. The compliance rate not factoring in these COVID-19 issues, while not meeting the target of 100%, would not have seen slippage from last year's rate. IDOE has encouraged LEAs to use virtual methodologies for evaluation where possible, though this has proven more difficult for preschool than school-aged students.

**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**

194

**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.**

194 total students that were evaluated outside of the timelines for Indiana. Timelines were missed for a variety of reasons identified as follows: staff shortages, volume of referrals, scheduling conflicts, timeline errors, inadequate timeline tracking, improper documentation, LEA staff errors, and COVID-19 related delays (see slippage explanation above).  
  
Indicated below are the ranges of days for evaluations that were beyond the state designated timeline of 50 instructional days:  
  
1-5 days beyond the timeline: 10 students  
6-10 days beyond the timeline: 3 students  
Greater than 10 days beyond the timeline: 181 students

**Attach PDF table (optional)**

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

State database that includes data for the entire reporting year

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

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

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

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 7 | 4 | 0 | 3 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to review and revise their policies, procedures, and practices relating to the process of conducting the initial evaluation within timeline parameters. Each LEA created a targeted action plan through the submission of a RDA Planning Tool. The planning tool included LEA-specific data in regard to the file review and a tab to create a targeted action plan to be completed by the staff of the LEA. In addition, the LEAs identified with noncompliance were informed that they were required to work with IDOE staff and/or appropriate Indiana Resource Network technical assistance provider(s). Progress on this indicator was monitored through the contacts between the LEA and IDOE specialist or resource center staff to address the specific reason(s) of noncompliance.  
  
To verify correction of LEAs out of compliance for their first year, IDOE staff reviewed three (3) months (March 30 through June 30) of data for the following year. Those months were pulled and reviewed for each LEA to ensure 100% compliance was achieved. This data was accessed through the IDOE data collection systems via the DOE-EV report (evaluation report). If LEAs were out of compliance for more than one consecutive year, IDOE staff pulled a full year of data to review corrections for full compliance.

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

The LEAs with findings of noncompliance were informed that the noncompliance must be corrected as soon as possible but in no case greater than one year from the date of the issuance of the finding. The LEAs were informed that they were required to correct each individual case of noncompliance identified in the file review unless the student was no longer under the jurisdiction of the LEA. (Prong 1 in OSEP Memo 09-02) Specifically, the LEAs worked with IDOE staff and identified those individual cases of noncompliance that were due to factors other than a student not receiving services within the 50 day timeline. For example, the specific reason(s) of noncompliance included improper documentation, staff errors, inadequate tracking, scheduling conflicts, staff shortage, timeline errors and volume of referrals. IDOE staff then verified each of the Prong 1 files were corrected by a review of each student STN (the student unique identifier) associated with the noncompliance.  
  
The LEAs worked with IDOE staff to address the specific reason(s) of noncompliance. The LEAs that were issued findings were assigned an IDOE specialist and required to develop a targeted action plan in order to identify the root cause(s) of noncompliance and to change and update policies, procedures, and practices in order to correctly implement all regulatory requirements of the indicator. The IDOE specialist collected the updated policies, procedures, and practices from LEAs and verified that the appropriate changes were made. Pursuant to OSEP Memorandum 09-02, IDOE verified that unless the child no longer remained under the jurisdiction of the initiating LEA, all outstanding noncompliant initial evaluations were completed, although late. IDOE verified completion of the outstanding noncompliant timelines by collecting and reviewing updated evaluation information from LEAs on each individual case through the State's data system and verified the LEA achieved the 100% percent compliance requirement. (Prong 2 in OSEP Memo 09-02)

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 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

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining three uncorrected findings of noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
   
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 80.22% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 80.16% | 86.36% | 85.47% | 86.14% | 68.70% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 440 | 582 | 68.70% | 100% | 75.60% | Did Not Meet Target | No Slippage |

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

State monitoring

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

Indiana's Article 7 requires transition plans begin at age 14, prior to the 9th grade, or earlier if determined appropriate by the case conference committee. Indiana Department of Education (IDOE) contracted with the Center on Community Living and Careers (CCLC) at Indiana University to conduct a compliance review of a randomly selected sample of students’ transition IEPs. The review was conducted to ensure that IDOE meets the reporting requirements and is providing ongoing assistance for school corporations with compliance rates below 100%.  
To determine and ensure compliance with Indicator 13, IDOE has developed the Indiana Transition Requirements Checklist based on a data collection tool created by the National Secondary Transition Technical Assistance Center (NSTTAC) and approved by OSEP. The Indiana Secondary Transition Resource Center (INSTRC) at the CCLC, Indiana Institute on Disability and Community at Indiana University has created an online version of Indiana’s data collection tool that was used to analyze Indiana’s student records to determine compliance with Indicator 13. The 10-item Indiana Transition Requirements Checklist was utilized to assess if there was evidence in a student’s IEP that the student had been provided the appropriate transition services to prepare him/her to successfully transition from secondary school to a post-secondary education and/or training program and to employment at an accuracy rate of 100%.  
IDOE provided CCLC with a population database of students who were receiving special education services and met the Indiana transition IEP age criteria for the monitored school year and whose local school districts are part of the monitoring cycle. The database included the student identification number and the Corporation Code Number. To generate the sample, CCLC used Microsoft Excel to run a random sampling program. If the corporation had fewer than 100 students with disabilities, three students were selected for the review. For corporations with more than 500 students, 10 students were selected. Therefore, a minimum of three and maximum of 10 Transition IEPs were reviewed based on the size of the district. In some cases, charter schools had sample sizes of fewer than three students because these schools were serving a limited number of students or did not have large populations of students with disabilities. A report of the review was then provided to IDOE.

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

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

IDOE was proactive in anticipating potential issues with virtual/online instruction negatively impacting the ability to complete transition assessments in order to make updates and changes to the transition plans for students whose annual meeting occurred after Indiana closed all school buildings for the remainder of the 2019-2020 school year. IDOE issued a memo encouraging teachers to send assessments to students or to schedule additional time to complete assessments during the meeting. In addition, IDOE collaborated with Vocational Rehabilitation to discuss how pre-employment transition services (pre-ETS) could continue virtually through a series of webinars to both pre-ETS providers and school personnel. Guidance documents were also created to share resources to assist in administering transition assessments and conducting transition services and activities virtually. This resulted in minimal interruption to transition planning for students throughout the pandemic thus far.

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 98 | 98 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

IDOE issued 98 Indicator 13 findings of noncompliance with regard to regulatory requirements. These new findings were identified through an assessment by CCLC using the Indiana Transition IEP Checklist. All 98 of those LEAs demonstrated correction within a year by achieving 100% compliance on current IEPs using the Indiana IIEP Requirements Checklist. IDOE verified the correction of all noncompliance in those 98 LEAs. To verify correction, IDOE reviewed updated policies, procedures, and practices (prong 2) and confirmed correction of each individual non-compliant transition IEP that had been identified previously (prong 1). IDOE collected and verified the data by obtaining a new, randomized sample of youth with IEPs aged 14 and above, using Indiana's Transition Requirements Checklist which comes from the National Technical Assistance Center on Transition (NTACT) to ensure that the individual and systemic noncompliance had been resolved. IDOE also maintained monthly communication via emails and phone calls, providing resources and technical assistance on transition activities and services and annual goal writing to the LEA until noncompliance was corrected. Depending on the corrective action plan generated by the LEA, IDOE provided one-on-one training and technical assistance on site and/ or virtual or through regional training. Both LEA administrative and teaching personnel attended those opportunities.

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

IDOE verified correction of all individual cases of noncompliance by using the Indiana Transition Requirements Checklist to ensure that each individual case had been corrected based on the review of each IEP in the Indiana IEP system. IDOE also verified the enrollment status of a student with a non-compliant IEP if an LEA advised that the student was no longer enrolled due to graduation, transfer, withdrawal, etc. Correction was not required if the student was no longer enrolled.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 1 | 1 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

IDOE verified correction of all sources of noncompliance by reviewing the policies and procedures that the LEA was using to write Transition IEPs and to conduct Case Conference Committee meetings. IDOE reviewed IEPs using the Indicator 13 Transition IEP Checklist developed by NTACT to ensure all IEPs were meeting the compliance requirements for transition IEPs. IDOE worked one-on-one with teachers and administrators in small groups to provide technical assistance in writing appropriate transition services and annual goals.

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

All individual cases of noncompliance for FFY 2017 were corrected and correction verified within one year of notification of noncompliance. IDOE has verified, based on review of subsequent student-specific data submitted, that each district with a finding of noncompliance reflected in the FFY 2017 data reported for this indicator is correctly implementing the regulatory requirements and has achieved 100% compliance on updated data consistent with OSEP Memorandum 09-02.

## 13 - Prior FFY Required Actions

None

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

A. Percent enrolled in higher education = [(# 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 2020 on students who left school during 2018-2019, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2018-2019 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

**I. *Definitions***

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

*Competitive employment* as used in measures B and C: States have two options to report data under “competitive employment” in the FFY 2019 SPP/APR, due February 2021:

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2009 | Target >= | 36.80% | 37.30% | 37.80% | 38.30% | 38.80% |
| A | 34.30% | Data | 35.68% | 30.00% | 31.15% | 36.22% | 25.00% |
| B | 2009 | Target >= | 64.00% | 64.50% | 65.00% | 65.50% | 66.00% |
| B | 49.10% | Data | 62.81% | 65.71% | 70.49% | 63.78% | 63.89% |
| C | 2009 | Target >= | 78.00% | 78.50% | 79.00% | 79.50% | 86.20% |
| C | 86.10% | Data | 83.92% | 87.14% | 86.07% | 88.19% | 83.33% |

**FFY 2019 Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 39.00% |
| Target B >= | 66.00% |
| Target C >= | 86.00% |

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 600 |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 145 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 241 |
| 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) | 24 |
| 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). | 45 |

| **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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 145 | 600 | 25.00% | 39.00% | 24.17% | Did Not Meet Target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 386 | 600 | 63.89% | 66.00% | 64.33% | Did Not Meet Target | No Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 455 | 600 | 83.33% | 86.00% | 75.83% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **C** | Based on the report from the Center of Community Living and Careers (CCLC), it was determined the COVID virus negatively impacted leavers from being able to obtain or maintain employment due to fears of the virus itself or due to layoffs because of lockdowns and restrictions. This resulted in slippage in the number of leavers who would be counted under Target C. |

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

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

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used? | YES |
| If yes, has your previously-approved sampling plan changed? | YES |
| If yes, provide sampling plan. |  |

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

IDOE implemented sampling procedures to ensure a random selection of a minimum of 3 percent of leavers per LEA were surveyed. Knowing that there are LEAs for whom 3 percent of the leavers would have been fewer than 3 leavers due to the size of the LEA, oversampling was employed, and CCLC sought to interview a minimum of 3 leavers or 3 percent of leavers, whichever was greater, so that all LEAs had Indicator 14 postsecondary outcomes data to review. IDOE used random sampling methods to determine the sample of 2019 leavers to be surveyed. After receipt of the student contact information from IDOE, CCLC calculated the total number of leavers per LEA. CCLC then calculated 3 percent of the total leavers per LEA. IDOE anticipated they would likely have lower response rates due to an inability to be fully engaged with families and student leavers prior to data collection in 2020. Therefore, an oversampling strategy was used to address low response rates and to attempt to ensure that each LEA has a minimum of 3 or 3 percent of its leavers, whichever was greater, surveyed. To determine the total number of records to be selected for surveying, including oversampling, IDOE assumed a response rate of 20 percent (the 2015-2016 IDOE Indicator 14 data report by the Systems Improvement Group indicated that they had a 26 percent response rate). Then, the total number of needed responses was taken and multiplied by 5 to determine the total number of randomly selected student records needed per LEA to ensure that 3 percent of leavers responded to the survey. Next, the list of student and family contact information for the 2019 leavers provided by the IDOE was used to assign each student record a random number. IDOE then filtered the data sheet by LEA and sorted the filtered records by the assigned random number so that the order of the records was randomized. Last, IDOE selected the total number of records needed per LEA, starting at the top of the randomized list.

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used? | YES |
| If yes, is it a new or revised survey? | YES |
| If yes, attach a copy of the survey | Indiana\_Indicator14\_Survey |

**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.**

Working collaboratively with CCLC, IDOE collected the following demographic information as part of the post school outcome survey:  
Gender: 375 leavers (62.5%) identified as male, and 220 leavers (36.7%) identified as female. One leaver (0.17%) identified as transgender. Three leavers (0.5%) chose not to respond to this question. This data is compared to the Pew Research Center data that reports 67 percent of disabled students are male and 33 percent are female in the 2017-18 school year (2020).  
  
Race and Ethnicity: 78.8 percent were reported as White alone, 8 percent Black or African American, 4.2 percent Hispanic/Latino, 0.33 percent American Indian or Alaskan Native, 0.33 percent Asian American,3.5 percent as multi-racial, and 4.86 percent identified as other, no response, or unknown. This data closely reflects the demographics of Indiana. According to the 2019 U.S Census report, the majority of Indiana's population is: White alone (78.4%), African American (9.9%), Hispanics/Latino (7.3%), American Indian and Alaskan Native (0.4%), Asian-American (2.6%), and two or more races/multi-racial (2.2%) (U.S. Census, 2019).   
  
Disability: Specific Learning Disability (37.7%) was the highest reported disability of the leavers, followed by Autism (15.2%), Other Health Impairments (11%), Emotional Disturbance (7.2%), and Intellectual Disability (6.7%). Pew Research Center (2020) reports: “In 2017-18, about a third (34%) of disabled students had a specific learning disability, 20 percent had a speech or language impairment, and 14 percent had a chronic or acute health problem that adversely affected their educational performance.” Pew also reported students with autism were 10 percent of the school population and those with an intellectual disability were 6 percent.

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

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

Indiana conducted tests of representativeness of survey respondents on two domains: race/ethnicity, and primary disability category. The distribution of survey respondents were compared to the distribution of transition-age students exiting special education in the state. Indiana established a threshold of plus or minus five percentage points from each category in the overall population of students with disabilities to establish representativeness. Based on this threshold, the data are overall representative in the primary disability domains and not representative in the race/ethnicity domain. Indiana has underrepresentation in the subcategories of Black/African American and Hispanic, and overrepresentation in the White subcategory. The overrepresentation in the white category is determined to be a function of the underrepresentation of the Black/African American and Hispanic subcategories.  
  
Indiana is adopting strategies to address the lack of representativeness. One strategy is to reach out to LEAs where there are a larger population of Black/African American and Hispanic students and confirm Indiana has the most up to date contact information based on the last known contact information they have for the student and/or family. Another strategy is to have the interviewers conduct additional reach-outs in the subcategories identified. Additionally, Indiana is notifying all LEAs of their response rate and offering technical assistance to those whose response rate currently shows underrepresentation in any of the subcategories. Finally, Indiana will train interviewers to make initial contact in the student and family’s primary language.

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

Indiana's state agencies collaborated together to ensure leavers from 2019 and students who were graduating or exiting in 2020 were provided resources to assist them in their post-secondary pursuits in light of the COVID pandemic. IDOE collaborated with Vocational Rehabilitation to provide a webinar series for pre-employment transition service providers and school personnel to encourage transition services and activities to continue for students over the summer to assist students in the transition from high school to postsecondary opportunities. In addition, IDOE provided insight into what resources vocational rehabilitation should make available to 2019 leavers to assist them.

## 14 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether the FFY 2019 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

**Response to actions required in FFY 2018 SPP/APR**

Beginning with the FFY 2019 SPP/APR IDOE began collecting data by LEA. This resulted in an increase of respondents from 108 (FFY 2018) to 600 (FFY 2019). The increase in sample size enabled IDOE to be able to have a better representative of demographics of youth no longer in secondary school and had IEPs in effect at the time they left school. IDOE contracted CCLC to survey respondents. In CCLC's analysis of the respondents they reported information about gender, race and ethnicity, and disability. In terms of gender, 375 leavers (62.5%) identified as being male, and 220 leavers (36.7% identified as being female. One leaver (.17%) identified as being transgender. Three leavers decided to not respond. Pew Research Center data reports 67% of disabled students are male and 33% are female in the 2017-2018 school year. When looking at race and ethnicity, 78.8% reported as White alone, 8% Black or African American, 4.2% Hispanic/Latino, .33% American Indian or Alaskan Native, .33% Asian American, 3.5% as multi-racial, and 4.86% identified as other, no response, or unknown. According to the 2019 US Census report: The majority of Indiana's population is White alone (78.4%), followed by African Americans (9.9%), Hispanics/Latinos (7.3%), American Indians or Alaskan Natives (.4%), Asian Americans (2.6%), and two or more races/multi-racial (2.2%). In regards to Disability, Specific Learning Disability (37.7%), Autism (15.2%), Other Health Impairment (11%), Emotional Disability (7.2%), and Intellectual Disability (6.7%). Pew Research Center reported in the 2017-2018 school year, 34 percent of disabled students has a specific learning disability, 20 percent had a speech or language impairment, and 14 percent had a chronic or acute health problem. Autism was reported as 10 percent and intellectual disability was reported as 6 percent. In all three demographic areas, the data was consistent with outside sources.

## 14 - OSEP Response

The State submitted a revised sampling plan for this indicator with its FFY 2019 SPP/APR. An evaluation of the sampling plan indicated that it could yield valid and reliable data for this indicator for FFY 2019.

## 14 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether the FFY 2020 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

## 14 -State Attachments

 

# 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, targets and improvement activities, and report on them in the corresponding SPP/APR.

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

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

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

## 15 - Indicator Data

Select yes to use target ranges

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 70 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1(a) Number resolution sessions resolved through settlement agreements | 12 |

**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**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 30.20% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 73.00% | 73.50% | 74.00% | 74.50% | 75.00% |
| Data | 82.61% | 50.94% | 35.09% | 20.00% | 36.51% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 75.50% |

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 12 | 70 | 36.51% | 75.50% | 17.14% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Of the 86 due process complaints filed, 70 resolution meetings were held which resulted in 12 written agreements (17.14%). This is a decrease from the previous year where 36.51% of the resolution sessions resulted in a written agreement. In Indiana, parent attorneys increasingly advise their clients to go to the resolution meeting but not to agree to anything or to sign a written agreement. Parent and school attorneys then continue to negotiate after the resolution meeting, and in most cases, the parties do resolve the issues. In FFY 2019, 61 (87.14%) of all due process complaints were actually dismissed after the parties settled. That percentage of overall settlement, although not all agreements were technically reached during the resolution session period, is above the FFY 2019 target.

**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 resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline, targets and improvement activities, and report on them in the corresponding SPP/APR.

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

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

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

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1 Mediations held | 42 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.a.i Mediations agreements related to due process complaints | 5 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.b.i Mediations agreements not related to due process complaints | 23 |

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

NO

**Targets: Description of Stakeholder Input**

In preparation for the target setting for FFY 2013 through FFY 2018 SPP, IDOE engaged in historical analysis, prepared trend data information for each of the indicators, and developed recommended targets based upon that data. The stakeholders reviewed the trend data, discussed the information, and identified the targets for each of the indicators. The stakeholders represent various constituency groups, including individuals with disabilities, parents of children with disabilities, teachers, state and local education officials, program administrators, representatives of various state agencies, representatives of higher education institutions that prepare special education and related service personnel, representatives of nonpublic schools, and representatives of vocational, community, or business organizations concerned with the provision of transitional services to children with disabilities. As targets for specific indicators were revised in subsequent years, specifically including FFY2019, IDOE obtained additional stakeholder input utilizing the same stakeholder groups and procedure identified above to make those revisions.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 75.00% | 75.50% | 76.00% | 76.50% | 77.00% |
| Data | 100.00% | 88.33% | 90.48% | 85.71% | 81.63% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 77.50% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 5 | 23 | 42 | 81.63% | 77.50% | 66.67% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

The percent of mediations held that resulted in mediation agreements dropped from 81.63% to 66.67%. While we have no control over whether agreements are reached, Indiana did lose three of our most experienced and successful mediators. One was hired by IDOE as a complaint investigator, one retired, and one took another full-time position. Three new mediators were added under contract. Additionally, in the last 3.5 months of the reporting year (mid-March through June 30, 2020), some parents indicated that they were not comfortable with virtual mediation sessions required due to state shelter in place orders related to COVID-19, and this likely reduced the percent of mediations held that resulted in mediation agreements.

**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



# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

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

**Name:**

Traci Hackleman, Esq.

**Title:**

IDOE Assistant Director, Office of Special Education

**Email:**

thackleman@doe.in.gov

**Phone:**

317-232-9062

**Submitted on:**

04/28/21 9:51:29 AM

# Ed Attachments

  

1. Data suppressed due to privacy protection [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection [↑](#footnote-ref-3)