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

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

**For reporting on
FFY 2020**

**Minnesota**



**PART B DUE February 1, 2022**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

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

Some of the indicators summarized in this report were impacted by the COVID-19 pandemic, while others remained unaffected. Statements of pandemic impact are included with each indicator. MDE anticipates that the COVID-19 pandemic will continue to impact data and data collections during the 2021-22 school year and beyond and will affect SPP/APR reporting in future years.

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

501

**General Supervision System:**

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

The Minnesota Department of Education (MDE) implements a comprehensive, multifaceted system of general supervision to ensure compliance with the Individuals with Disabilities Education Act (IDEA, 2004) and to improve services and outcomes for students with disabilities. MDE’s system includes special education program and fiscal compliance monitoring, a comprehensive and effective dispute resolution system, and the provision of technical assistance and professional development to support stakeholders.

In FFY2020, MDE initiated revision of its monitoring process and contracted for development of an online system (“Stepwell MN”) for conducting program monitoring, including an annual statewide record review for indicator data collection. Development allowed MDE to shift from its Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at end-of-life for reliability, as well as the cyclical monitoring process used in the past, which did not differentiate monitoring based on LEA needs. The new Stepwell MN system will generate a random statewide sample from the most recent enrollment data reported through the Minnesota Automated Reporting Student System (MARSS) for Minnesota’s indicator data collection. Beginning in FFY2021, indicator data collection record reviews will be completed entirely through the new Stepwell MN online system. Correction of noncompliance also will be completed and tracked via the Stepwell MN system.

Outside of indicator data collection, MDE is moving towards a risk-based, cyclical monitoring process. LEAs have been divided into five cohorts and MDE will annually analyze risk data to identify LEAs with greater need for support and assistance. Those LEAs identified as needing less support will complete a targeted record review, receive universal technical assistance and may complete other monitoring activities as needed. The primary focus of monitoring activities will be on those LEAs identified with greater needs. Once an LEA has been identified as needing additional program monitoring, the LEA will enter a three-phase monitoring process. First, MDE will gather additional data from the LEA to better understand the current policies, practices and procedures of the LEA. In the second phase, the monitoring activities will include additional record reviews, site visits, facility reviews, and staff interviews, as needed. The monitoring activities in the second phase will be differentiated based on the needs identified through the risk analysis and initial data collection and review activities completed during the first phase of the monitoring process. The third and final phase of the monitoring process will involve completion of corrective actions designed to address any identified noncompliance as well as targeted technical assistance and support to the LEA.

MDE’s fiscal monitors work to ensure that Part B funds are appropriately administered and used to serve eligible children. The fiscal team is also transitioning to the new Stepwell MN online system. An annual risk assessment is completed to determine if an LEA is considered low, medium, or high risk and an LEA’s risk level determines yearly activities. Low risk entities benefit from regular training opportunities, online resources, and open communication with the fiscal team. Medium risk entities have targeted monitoring on one topic area that is considered higher risk across the state. High risk entities receive a full, on-site review covering all seven major topic areas and online interviews with staff. Once the LEAs have been striated into an appropriate risk category, the fiscal monitors utilize data from the Electronic Data Reporting System (EDRS) and MARSS to select samples related to time and effort, procurement, and transportation. Information is also requested from LEAs for inventory management. Corrective action by the LEA takes place in the year following fiscal monitoring and may include documenting processes, changing documents to contain appropriate data, or making corrections within the EDRS or MARSS systems for accuracy. MDE reserves the right to reclaim funds if deemed used for ineligible purposes.

In addition, the fiscal monitoring team receives fiscally-based complaints and conducts targeted reviews. When complaints are received, the review is led by the fiscal supervisor and assisted by the fiscal monitor. A complaint can be filed about any entity that provides publicly funded intervention services directly to eligible children and families. Before filing a complaint, MDE encourages the complainant to first contact the LEA’s special education director to attempt resolution. Once a fiscal review is opened, documentation on the nature of the complaint is requested. Interviews with staff and an on-site visit may be conducted. If a violation is found and corrective action is necessary, a corrective action plan is developed and completed within a specified timeframe. MDE ensures that corrective action plans are implemented and completed within one year.

MDE also administers a comprehensive dispute resolution system for the state. Parents and school staff can use mediation or facilitated team meetings to address issues of conflict. Parents and LEAs are entitled to an impartial due process hearing to resolve disputes over identification, evaluation, education placement, or provision of FAPE to an infant, toddler or student with a disability. Parents and LEAs are encouraged to use mediation, facilitated team meetings, conciliation, or some other mutually agreed upon alternative process before proceeding to a hearing. Information about the hearing system is available on MDE’s website including a hearing request form, information on free or low-cost legal resources, and Minnesota’s procedural safeguards notice. While the majority of due process hearing requests are settled or resolved without a hearing, if a hearing is requested, MDE forwards the request to the Office of Administrative Hearings, which conducts the hearings. MDE provides oversight of the due process hearing system and provides training to administrative law judges as well as to the Minnesota Special Education Mediation Service (MNSEMS) mediators and facilitators.

The special education complaint system is designed to ensure that all children with disabilities are provided FAPE. A complaint can be filed about any entity that has allegedly violated a state or federal special education law or rule when providing publicly-funded intervention services directly to families and children with disabilities. Before filing a complaint, MDE encourages parties to first contact the LEA’s special education director for possible resolution and also suggests parties consider mediation. Sample complaint forms are available on the MDE website.

When MDE receives a complaint, an investigator reviews the written complaint to determine the issues to be investigated. The complainant is contacted and the issues, claims and facts are discussed. MDE has 60 calendar days from the date the complaint is received to investigate and resolve the complaint. If the LEA is found to be in violation and a corrective action is deemed necessary, a CAP is developed. Through active follow-up, MDE ensures that CAPs are appropriately implemented and individual correction occurs within one year.

**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.**

Divisions across MDE provide leadership, technical assistance (TA) and oversight to LEAs that provide services to children and youth with disabilities that support the goals of family- and student-identified priorities, emphasize the strengths of students with IEPs, and honor the culture of each family. Below is an overview of the types of services and systems provided.

Special Education

The Division of Special Education’s mission is to provide leadership that ensures a high quality education for Minnesota’s children and youth with disabilities. To achieve this mission, special education staff provide training, information and resources, TA, and policy development through a variety of projects and grants to assist LEAs in their planning, service delivery, program implementation, evaluation, and problem solving. Staff provide direction and oversight on a number of programs designed to improve outcomes for students with IEPs, including Positive Behavioral Interventions and Supports, Coordinated Early Intervening Services and Comprehensive Coordinated Early Intervening Services, Alternative Delivery of Specialized Instructional Services (providing academic and behavioral supports to students so they can be successful in the general education environment), and the State Systemic Improvement Plan. In addition, the Division of Special Education coordinates and collaborates with multiple divisions across MDE to provide the most coordinated information to LEAs, parents, and providers in support of students with IEPs. And, special education staff partner with LEAs, LEA leadership, and regional staff to identify new opportunities for TA, program implementation, and problem solving.

Furthermore, over the past 14 years, MDE has collaborated with the State Implementation and Scaling-Up of Evidence-based Practices (SISEP) Center in an effort to bridge the science-to-service gap and build capacity to implement and scale-up effective education innovations to ensure that every student can benefit from the intended outcomes. MDE’s collaboration with the SISEP Center to use principles of implementation science on state educational initiatives, including the Part B State Systemic Improvement Plan. Division of Special Education staff are significantly involved in providing leadership in this work.

Assistance and Compliance

This division has a prescribed protocol for managing the receipt and transfer of phone calls and emails requesting assistance providing special education and related services. The protocol ensures that requestors receive timely delivery of high quality, evidence-based TA and support. The Division of Assistance and Compliance website provides information on a range of special education topics and sample due process forms. MDE program monitors are assigned to specific LEAs to provide consistent application of due process standards and an appropriate level of TA. Through this process, monitors develop relationships with LEAs to obtain a broad understanding of their special education and early intervention programs and are better able to support LEAs in meeting legal requirements and working to ensure students with disabilities receive a free and appropriate public education.

Early Learning Services

MDE uses a variety of mechanisms to provide TA to Early Childhood Special Education (ECSE) leaders and providers. The website is a source of information for families, administrators, and direct service providers. MDE hosts biannual forums to provide TA to local program leaders. Each fall, a three-day leadership conference is held in partnership with the Minnesota Division for Early Childhood of the Council for Exceptional Children. A one-day leadership forum is held each spring with an option to participate in the forum virtually. Members of the ECSE team hold monthly TA calls for program leaders and provide individualized TA requested by local programs. MDE has established a general ECSE email to allow local programs to receive timely, high quality answers to their technical questions from the most appropriate source.

Student Access and Opportunity

This division is responsible for providing leadership, support, and programmatic accountability to school districts under the Elementary and Secondary Education Act (ESEA) as reauthorized under the Every Student Succeeds Act (ESSA). ESSA provides supplementary educational funds for disadvantaged learners, professional development of teachers and principals, and English language acquisition. The division’s work includes managing programs under McKinney-Vento, neglected and delinquent programs, foster care, migrant and English learner education programs, rural education programs, and federal accountability and data reporting. The Division of Student Access and Opportunity shares pertinent information and timelines with district-designated contacts through an electronic newsletter, program listservs, meetings, conferences and trainings, live and recorded modules, and MDE’s website. Student access and opportunity staff collaborates with other MDE divisions on topics and projects involving federal programs authorized under ESSA.

School Finance

This division provides resources to schools and districts to help improve or maintain financial health. Division work includes managing data collection and information on aid entitlements and levies related to general education, special education, and student accounting, as well as managing budget audits, facilities, transportation, payments, Uniform Financial Accounting and Report Standards, and monitoring. The division implements state and federal education funding policies and provides assistance to districts and schools to understand and implement these policies at the local level. Division staff are responsible for the oversight of special education funding and provide financial management assistance and professional development opportunities throughout the year. Staff also regularly attend Special Education Directors’ Forums to provide updates, training, and TA providing policymakers relevant data and analysis.

School and Educator Support

This division builds capacity and supports educators and student support personnel to improve student achievement in the areas of equity, school climate, social-emotional learning, student health, continuous use of data, teacher collaboration to improve student learning, continuous improvement processes, leadership capacity, active implementation frameworks, professional development, fair and transparent evaluations, and stakeholder engagement. This support is provided through the Regional Centers of Excellence, School Climate Center, and other professional development opportunities. The division also provides support for districts and schools in the areas of full-service community schools, multi-lingual learner programs, family engagement, and interventions for students at risk of not graduating in four years.

Academic Standards, Instruction and Assessment

This division is responsible for developing the Minnesota Assessment System administered to public students statewide to: 1) measure student achievement on the Minnesota Academic Standards and Minnesota standards for English language development; 2) meet district and school accountability requirements under ESEA as reauthorized under ESSA; and, 3) provide information for Minnesota graduates related to career and college readiness as required by Minnesota Statute §120B.30. In addition, the division provides resources, support, and training to LEAs and schools as they administer statewide assessments and share results with their community members. The Divisions of Special Education and Academic Standards, Instruction and Assessment collaborate in the development of assessments for students with disabilities and accommodation policies and procedures.

**Professional Development System:**

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

Divisions within MDE responsible for the implementation of quality special education services provide a wide range of professional development opportunities and services to address the needs of LEA and interagency staff, stakeholders, and families of students with disabilities. Activities, organized by division, include the following:

Special Education

Regional Low Incidence Projects (RLIP)
RLIP staff assist school districts across the state to fulfill IDEA requirements in implementation, ensuring quality of service and the availability of high quality staff in the low incidence areas of special education. Training and technical assistance are provided through the coordination of MDE representatives, 11 low incidence projects, disability specialists and agencies serving students with disabilities and their families.

School-Wide Positive Behavioral Intervention and Supports (SW-PBIS)
SW-PBIS provides an evidence-based framework for preventing problem behavior, providing instruction and support for positive and prosocial behaviors, and supporting social, emotional and behavioral needs for all students. Since initial implementation in 2005, training cohort numbers have steadily increased over the years representing an expanding number and diverse types of districts. In 2009, MDE moved to a regional training model to accommodate the growth of SW-PBIS implementation, dividing the state into three regions to coordinate training, coaching and evaluation of new schools. Presently, over 800 schools are implementing SW-PBIS across Minnesota.

State Personnel Development Grant (SPDG)
In 2015, Minnesota was awarded a SPDG, and again in 2020. Both projects provide staffing, training and implementation support that aligns with our SSIP. MDE invests in building the capacity of LEAs through the use of implementation science and evidence-based practices that improve outcomes for students with disabilities. These grants support division goals to improve graduation rates for American Indian and Black students with disabilities through MDE-district partnerships. PACER, Minnesota’s designated Parent Training and Information Center, also supports partner districts to increase effective parent involvement to improve student outcomes. The 2015 grant also supported implementation of the Early Interaction Model and Autism Navigator to support early identification and increase capacity of early intervention providers to better serve infants and toddlers with ASD and their families.

Other vehicles for professional development in the Division of Special Education include:
-Special Education Directors’ Forums held four times per year; since March 2020, virtual forums have been held monthly to provide information and support in response to the COVID-19 pandemic;
-Support of and presentations at the Minnesota Administrators for Special Education (MASE) conferences, Slice of Collaboration meetings, and New Leaders Training;
-An Assistive Technology (AT) Teams Project that supports LEA teams to learn and implement strategies to improve educational outcomes for students with disabilities through the use of AT;
-An Employment Community of Practice in collaboration with Minnesota’s Department of Employment and Economic Development and Department of Human Services to provide training and technical assistance to 53 LEAs; and
-A variety of other cross-divisional trainings including webinars, workshops, brown-bags, and institutes that address a range of topics including transition, funding formula changes, Minnesota’s Olmstead Plan, and implementation science.

Assistance and Compliance

The division provides training on a variety of topics including restrictive procedures and positive behavior supports; student discipline compliance; prior written notice and progress reporting; eligibility guidelines for determining student participation in alternate assessments and how to document that determination in the IEP; special education for general education teachers and in nonpublic schools; and common misconceptions in special education. The division’s website includes a variety of online trainings including IEP short- and long-term goals and objectives, progress reporting on IEP goals and objectives, secondary transition, positive intervention strategies, and uniform grant guidance. The division’s fiscal and program monitoring teams have initiated targeted training a year in advance of an LEA being monitored in order to allow the LEA to make corrections prior to MDE arrival. The teams also provide multiple trainings a year available to all business managers and special education directors throughout the state, often traveling outstate to accommodate needs. Most recently, the fiscal team expanded training to include cross-divisional topics with the Divisions of Special Education and School Finance while the program team collaborated with the Division of Early Learning Services to provide LEAs with topic-specific guidance. The trainings are provided at MDE-sponsored events and at other professional organization-sponsored events.

Early Learning Services

The Early Childhood Special Education (ECSE) team has participated in a variety of initiatives related to improving special education services to preschool students. Participation in federal grants and partnerships with national technical assistance centers have supported ECSE’s ability to launch regionalized professional development focused on selected evidence-based practices; implement the Pyramid Model, an evidence-based practice for building social-emotional competence; implement the Division for Early Learning Services’ revised recommended practices after receiving intensive technical assistance from the Early Childhood Technical Assistance center; enhance the collection and use of data at the state and local levels through participation in the ECTA/DaSy Child Outcomes Local Data Use Cohort; and receive support by the Early Childhood Personnel Center to enhance our Comprehensive System of Professional Development.

Regional Centers of Excellence (RCE)

The RCEs are a collaborative effort between MDE and six regional service cooperatives to provide a statewide system of intensive, on-site technical assistance to schools identified for support and improvement under ESSA. The RCEs were developed to provide a statewide infrastructure to support aligned and cohesive TA that builds the capacity of schools and LEAs to utilize best practices in education. The support and TA includes the application of the principles of effective practice and key components of implementation resulting in sustained and improved outcomes for all students. The RCEs are staffed by a director and content area specialists including math, reading, English language development, equity, special education, graduation, and implementation science. Representatives from a variety of divisions identify resources, develop and prepare materials, and provide TA guidance resulting in research-based, coordinated support that can be contextualized by RCE staff to meet the specific needs of school leadership implementation teams. The RCEs also have specialists who support LEAs and schools in the area of school climate, provide coaching to principals, and help with engaging schools’ and LEAs’ American Indian communities.

**Broad Stakeholder Input:**

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

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

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

YES

**Number of Parent Members:**

13

**Parent Members Engagement:**

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

Parent feedback was integral to MDE’s plan to obtain feedback, however MDE did not solicit feedback from parents as a separate group. Instead, MDE asked meeting participants to share if they were the parent or guardian of a child with a disability. Of the 30 participants at the October meeting, 13 individuals were a parent or guardian of a child with a disability. MDE also believes that participants at the November and December meetings were also parents or guardians of a child with a disability, although exact counts are not known at this time. In addition, it is unclear how many parents or guardians of a child with a disability were included in the special education directors’ listserv or MDE staff.

As participants in the stakeholder and community member meetings, parents had the same opportunities to provide feedback on proposed targets and suggest strategies as all other participants. At the beginning of each meeting, parents had the opportunity to ask clarifying questions about the contents of the Indicator Guide, including data, data sources, and targets. Next, parents were asked to give feedback on the targets, suggest improvements to the targets, or propose alternative targets. In addition, parents were encouraged to share any other thoughts thy might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and pandemic and post-pandemic considerations.

MDE gathered limited demographic information on meeting participants: their gender and race/ethnicity. Fifty-two people participated in MDE’s SPP/APR meetings in October, November, and December. Of the 52, 10 were men and 42 were women. And the 52 participants included 1 person of Hispanic/Latinx descent, 1 person of Southeast Asian descent, 5 people of Black or African American descent, 15 members of tribal nations (9 from Chippewa tribes, 4 from Ojibwe tribes, and 2 from Sioux tribes), and 22 people of White or European descent. An additional 8 participants have unknown descent or declined to self-identify.

Although no demographic information was gathered about the special education directors or MDE staff, those individuals tend to be White or of European descent and female.

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

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

MDE’s primary strategy for engaging with parents is ongoing conversations with SEAP and members of the PACER Center. SEAP members typically serve for 2 years and, during the onboarding and orientation process, members are given an introduction to MDE’s work, including the Division of Special Education and the APR. That initial conversation gets new SEAP members familiar with the indicators, other data that MDE collects, and the federal reporting processes. Later conversations about the APR and MDE initiatives allow for more in-depth conversations, including nuances in the data, activities and their implementation, progress made, and feedback and suggestions from SEAP members. This gradual approach to building capacity allows SEAP members, including parents, to gradually build their skill set.

It is important to note that one member of SEAP is also a member of PACER. PACER, the federally funded parent technical assistance center in Minnesota, has connections with a wide range of parents of students with IEPs not only in Minnesota, but across the U.S. In addition, MDE has a contract with PACER to engage parents and obtain feedback from them. MDE’s partnership with PACER allows MDE to gather feedback and insights from a wide range of parents. And conversations between PACER and parents also provides parents with opportunities to build their skill set(s). PACER also convenes regular meetings of parent advocacy organizations in Minnesota and MDE regularly has agenda time to present information and get feedback from the group.

MDE also engages in outreach with targeted parent groups (e.g., Somali American Parent Association, Coalition of Asian-American Leaders, Minnesota Indian Affairs Council) on an as-needed basis. Those meetings are also an opportunity for MDE to build capacity of parents and community members and for MDE to build their capacity on issues that face communities in Minnesota.

MDE and SEAP have a positive working relationship and engage in iterative conversations about all facets of special education. At any SEAP meeting, MDE staff from a wide range of divisions report on progress they have made, gather feedback and suggestions from SEAP, and/or brainstorm solutions to challenges or barriers. In addition, MDE may approach SEAP with a specific request on a topic, or SEAP may approach MDE with a specific request. The open communication and mutual respect between SEAP and MDE allows both groups to build capacity on special education topics, including implementation activities.

In addition, the Division of Special Education has identified three overarching themes that cluster across APR indicators: education in the most integrated setting (indicators B5, B6), equitable outcomes (indicators B3, B4, B8, B9, B10), and graduation/postsecondary success (indicators B1, B2, and B14). The Division of Special Education has developed three Focus Area Teams whose membership crosses divisional units to develop strategies and district partnerships to improve statewide results in each of the focus areas and APR indicators. Although the work of the Focus Area Teams is just beginning, teams plan to connect with parents and parent organizations for insights, feedback, and suggestions on evidence-based and emerging practices that may have the potential to contribute to improved outcomes for students with IEPs. As the staff in the Focus Area Teams begin their outreach with parents and parent organizations, staff will have the opportunity to also build the capacity of diverse parents to support implementation activities.

Last, MDE’s commitment to engaging with parents and the public is not limited to the APR. Often, community members and especially parents want to take a slightly different approach to data or implementation programs than what MDE reports in the APR. For example, Minnesota’s State Systemic Improvement Plan focuses on improving the 6-year cohort graduation rate among American Indian and Black students with IEPs. However, the APR emphasizes federal definitions of race and ethnicity. In conversations with MDE, staff in MDE’s Office of American Indian Education, members of the Minnesota Indian Affairs Council, and members of the Tribal Nations Education Committee expressed concerns that using only federal definitions of race and ethnicity masks outcomes for students of American Indian and other ancestry (i.e., Hispanic/Latinx; Two or more races). As a result, MDE has opened up the conversation about the 6-year cohort graduation rate among American Indian and Black students with IEPs to any and all American Indian or Black students with IEPs, even if students’ federally identified race or ethnicity is not American Indian or Black. MDE’s approach of responding to the data needs or desires of parents and community members has led to richer conversations about the data and implementation approaches and has helped to build the capacity of parents and community members.

**Soliciting Public Input:**

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

MDE made the Indicator Guide, including proposed targets, available to the public on this page of the MDE website: https://education.mn.gov/MDE/dse/sped/fed/plan/ . The page also includes a form through which members of the public could make comment on any or all of the initially proposed targets.

**Making Results Available to the Public:**

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

MDE will continue to engage with parents, community members, and stakeholders with regular cycles of updated information, progress reporting, problem-solving and gathering feedback to refine strategies through the span of this APR package. During the engagement meetings, MDE will share feedback and suggestions (e.g., improvement strategies) that were shared in prior meetings and engage participants in conversations about how the feedback and suggestions were used and progress made. This iterative process – engage with stakeholders, making adjustments, and updating stakeholders – has already begun. In a January meeting with SEAP, MDE shared feedback from earlier engagement meetings and shared how that feedback led to modifications of some targets. SEAP members were also encouraged to share additional feedback that could be incorporated into this APR. At the end of the conversation, SEAP members shared that they appreciated hearing the feedback that MDE had received and learning how the feedback led to adjustments in the targets. And SEAP members and MDE will discuss the outcomes of the APR (e.g., target not met, no slippage) in a future meeting. Once again, MDE will gather feedback and input, including possible improvement strategies, during that conversation. Last, MDE may also update the Indicator Guide with summaries of the feedback MDE received and an explanation of how the feedback was used to change targets and/or approaches to the indicators. The updated Indicator Guide could then be shared on MDE’s website to keep the public informed of MDE’s work and the results of public engagement. Once concern about the Indicator Guide is that it is already lengthy and may be too cumbersome for effectively communicating the results of public engagement (e.g., suggestions for improvement strategies). MDE will consider that concern and alternative formats to effectively communicate to parents, community members, and stakeholders the results of MDE’s public engagement efforts.

MDE has not yet established a timeline for gathering public and parent feedback and sharing the results with stakeholders. The timeline will be developed in the coming months and reported in the FFY2021 APR.

**Reporting to the Public**

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

MDE makes an annual determination on the performance of Local Educational Agencies (LEAs) against specific criteria. MDE reviews all LEA performance against selected targets in the Annual Performance Report (APR) and determines whether each LEA met the requirements of Part B of the IDEA. MDE publicly reports special education data for each district in its Data Center website on the Data Reports and Analytics page under the Special Education District Profiles section: https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=10

A link to Minnesota’s current Part B Profile on the Office of Special Education Programs’ (OSEP) SPP/APR public reporting website is located on MDE’s website under the Special Education section of the site: https://education.mn.gov/MDE/dse/sped/fed/

## Intro - Prior FFY Required Actions

None

## Intro - OSEP Response

## Intro - Required Actions

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

## 1 - Indicator Data

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

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 85.72% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 90.00% | 90.00% | 90.00% | 90.00% | 90.00% |
| Data | 61.14% | 60.76% | 61.18% | 62.30% | 63%[[2]](#footnote-3) |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 86.00% | 86.50% | 87.00% | 87.50% | 88.00% | 88.50% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 7,139 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 73 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 652 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 7,139 | 7,864 | 63%[[3]](#footnote-4) | 86.00% | 90.78% | Met target | N/A |

**Graduation Conditions**

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

A student’s graduation status is decided at the LEA level in Minnesota: there is no state diploma and there are no alternatives (e.g., certificate, alternative diploma) to the LEA-granted diploma. In order to graduate and receive a diploma, students must attain credits in the following areas: English language arts (4 credits); mathematics (3 credits); science (3 credits); social studies (3.5 credits); arts (1 credit); and electives (minimum of 7 credits). The specifics of how credits are granted are subject to local decision-making and control.

Students who pass the general educational development test(s) or obtain a GED are not included in Minnesota’s counts of students who graduate.

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

YES

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

In Minnesota, graduation requirements for students with disabilities have been established through Minnesota Statute §120B.024 and the definition of a diploma was established through by Minnesota Statute §125A.04. Minnesota Statute §125A.04 specifies that, “upon completion of secondary school or the equivalent, a pupil with a disability who satisfactorily attains the objectives in the pupil’s Individualized Education Program must be granted a high school diploma that is identical to the diploma granted to a pupil without a disability.”

Additional information and technical assistance regarding graduation requirements for students with disabilities can be found here: https://education.mn.gov/MDE/dse/sped/caqa/grad/046628. And information regarding the educational expectations and graduation requirements for students in Minnesota can be found here: https://www.revisor.mn.gov/statutes/cite/120B.02

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

Minnesota strives to ensure every student, including students with disabilities, receives the support they need in order to obtain a high school diploma. While many students can fulfill the graduation requirements in a typical four-year timeframe, some students need additional time. During the development of Minnesota’s Every Child Succeeds Act (ESSA) plan, community members expressed a desire to include a seven-year graduation rate into the state’s accountability system. The goal was to include students who were most likely to need additional time—students with disabilities, recently arrived English learners, and at-risk students—in the counts of students who had graduated. Prior to the development and approval of Minnesota’s ESSA plan, the state reported 4-, 5-, and 6-year graduation rates; now, published graduation rates include the 7-year rate for schools, LEAs, and the state.

MDE has some concerns that the COVID-19 pandemic may have impacted the graduation rate during the FFY2020 school year. The 2020-21 school year experienced multiple interruptions as LEAs and students transitioned between distance, hybrid (attending class in person and distance learning on alternate days so that half of the classroom’s students were in person on a given day), and in person learning as a result of the COVID-19 pandemic. It is possible that the interruptions in instruction resulted in disruptions in learning and may have interfered with students’ plans to graduate.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

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

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

**Measurement**

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

**Instructions**

*Sampling is not allowed.*

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

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

OPTION 1:

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

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

OPTION 2:

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

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

Options 1 and 2:

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

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

## 2 - Indicator Data

**Historical Data[[4]](#footnote-5)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2019 | 10.33% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 4.25% | 4.25% | 4.20% | 4.15% | 4.15% |
| Data | 4.34% | 4.60% | 4.80% | 4.82% | 4.42% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 10.00% | 9.70% | 9.40% | 9.10% | 8.80% | 8.50% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

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

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 7,139 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 73 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 652 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to dropping out** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 652 | 7,864 | 4.42% | 10.00% | 8.29% | Met target | N/A |

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

In Minnesota, dropouts are defined as any secondary students (in grades 9-12) who:
--were enrolled in school at some time during the previous school year and were not enrolled by October 1 of the following year;
--were not enrolled on October 1 of the current school year, although expected to be in membership (i.e., were not reported as dropouts the year before);
--do not have any of the following exclusionary conditions:
 \*transfer to another public school district, private school, or state- or LEA-approved education program;
 \*temporary absence due to suspension or school-approved illness; or
 \*death.

As part of all enrollment records, Minnesota collects the reasons why an enrollment record required an update. For example, the student may have transferred to a nonpublic school, moved, graduated, or been referred for other services or sites, and each would have a unique “status end code” to reflect the reason for an enrollment change. The status end codes are updated periodically and old or unused codes are retired and new codes are added, as needed (e.g., as of the 2019-20 school year, leaving school due to pregnancy was removed as a status end code).

A small number of status end codes are used to identify students who have dropped out. They are:
--Student left school after reaching compulsory attendance age without written election (M.S. §120A.22 subd. 8 requires student and parent to meet with school staff prior to withdrawal).
--Student left school after reaching compulsory attendance age with written election.
--Student was expelled and didn’t return during the school year.
--Student withdrew, no transcript required, or transferred to a non-approved public school.
--For grades K-12, student left school for reasons unknown; for grade EC, attempts to contact unsuccessful.

There is an additional code, “student withdrawn after 15 consecutive days absence,” which becomes a dropout code if the student doesn’t return to the LEA or another public LEA. Enrollment vs. dropout status is verified with fall enrollment data in the following school year.

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

NO

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

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

In anticipation of requiring all states to use Option 1 in the calculation of dropout rates, Minnesota has made the shift to Option 1 this year. In anticipation of this change, Minnesota re-examined previously submitted EDFacts FS009 files and calculated drop-out rates using the Option 1 guidance. When using the Option 1 calculation method is applied to previous years’ data, the dropout rates were:
FFY2017: 11.81%
FFY2018: 12.07%
FFY2019: 10.33%
FFY2020: 13.65%

FFY2020 dropout data includes students who would have dropped out during the 2019-20 school year, a school year that was impacted by the COVID-19 pandemic (mandatory school closures occurred in March 2020 in Minnesota). Minnesota has concerns that the COVID-19 pandemic may have impacted the rate of students dropping out during the FFY2020 school year. As a result, MDE has elected to use the pre-pandemic FFY2019 dropout rate of 10.33% as the baseline for this indicator.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

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

## 2 - Required Actions

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 81.11% |
| Reading | B | Grade 8 | 2020 | 68.36% |
| Reading | C | Grade HS | 2020 | 56.30% |
| Math | A | Grade 4 | 2020 | 80.79% |
| Math | B | Grade 8 | 2020 | 67.59% |
| Math | C | Grade HS | 2020 | 48.42% |

**Targets**

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/30/2022

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 11,249 | 10,289 | 9,640 |
| b. Children with IEPs in regular assessment with no accommodations | 7,631 | 5,801 | 4,505 |
| c. Children with IEPs in regular assessment with accommodations | 873 | 585 | 293 |
| d. Children with IEPs in alternate assessment against alternate standards | 620 | 648 | 629 |

**Data Source:**

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

**Date:**

03/30/2022

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 11,243 | 10,287 | 9,415 |
| b. Children with IEPs in regular assessment with no accommodations | 6,618 | 4,822 | 3,395 |
| c. Children with IEPs in regular assessment with accommodations | 1,868 | 1,476 | 537 |
| d. Children with IEPs in alternate assessment against alternate standards | 617 | 655 | 627 |

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

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 9,124 | 11,249 |  | 95.00% | 81.11% | N/A | N/A |
| **B** | Grade 8 | 7,034 | 10,289 |  | 95.00% | 68.36% | N/A | N/A |
| **C** | Grade HS | 5,427 | 9,640 |  | 95.00% | 56.30% | N/A | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 9,103 | 11,243 |  | 95.00% | 80.97% | N/A | N/A |
| **B** | Grade 8 | 6,953 | 10,287 |  | 95.00% | 67.59% | N/A | N/A |
| **C** | Grade HS | 4,559 | 9,415 |  | 95.00% | 48.42% | 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.**

Minnesota makes assessment results available in two locations. The Minnesota Report Card (https://rc.education.mn.gov/#assessmentsParticipation/orgId--999999000000\_\_groupType--state\_\_test--allAccount\_\_subject--M\_\_accountabilityFlg--FOC\_NONE\_\_year--trend\_\_grade--all\_\_p--23) allows users to view a dashboard of assessment results, add/remove filters, and compare educational entities. While the dashboard is primarily visual, it does include numerical information (counts and percentages) to facilitate understanding and comparison.

Minnesota also provides a ‘flat,’ tab-delimited file of all assessment results (https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=1). This tab-delimited file provides results at the state, county, district, and school levels and provides additional information (e.g., average scores, standard deviations, and strand scores) that are unavailable in the Minnesota Report Card.

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

Data for indicator 3A has been impacted by the pandemic. Minnesota’s rate of participation in statewide assessments of both general and special education students reached historic lows during the FFY2020 testing window. And, with COVID-19 cases beginning to climb again in Minnesota and increasing numbers of Minnesota parents opting their students out of testing, it’s unclear when or if participation rates will recover.

## 3A - Prior FFY Required Actions

None

## 3A - OSEP Response

The State has revised the baseline for this indicator using data from FFY 2020, and OSEP accepts the baselines for Reading groups A, B, and C, and Math groups B and C. OSEP cannot accept the baseline revision for Math group A (4th grade) because the State's FFY 2020 baseline data reported in the Historical Data table is not consistent with the State's FFY 2020 data reported in the FFY 2020 SPP/APR Data table.

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

## 3A - Required Actions

The State has revised the baseline for this indicator using data from FFY 2020, but OSEP cannot accept the baseline revision for Math group A (4th grade) because the State's FFY 2020 baseline data reported in the Historical Data table is not consistent with the State's FFY 2020 data reported in the FFY 2020 SPP/APR Data table. With the FFY 2021 SPP/APR, the State must provide a baseline for Math group A using accurate data.

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3B - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 25.41% |
| Reading | B | Grade 8 | 2020 | 16.57% |
| Reading | C | Grade HS | 2020 | 20.77% |
| Math | A | Grade 4 | 2020 | 30.64% |
| Math | B | Grade 8 | 2020 | 10.78% |
| Math | C | Grade HS | 2020 | 8.29% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 25.41% | 26.00% | 27.00% | 28.00% | 29.00% | 30.00% |
| Reading | B >= | Grade 8 | 16.57% | 17.00% | 18.00% | 19.00% | 20.00% | 21.00% |
| Reading | C >= | Grade HS | 20.77% | 21.00% | 22.00% | 23.00% | 24.00% | 25.00% |
| Math | A >= | Grade 4 | 30.64% | 31.00% | 32.00% | 33.00% | 34.00% | 35.00% |
| Math | B >= | Grade 8 | 10.78% | 11.00% | 12.00% | 13.00% | 14.00% | 15.00% |
| Math | C >= | Grade HS | 8.29% | 9.00% | 10.00% | 11.00% | 12.00% | 13.00% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 8,508 | 6,386 | 4,800 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 2,094 | 1,010 | 969 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 68 | 48 | 28 |

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 8,490 | 6,299 | 3,933 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 2,372 | 620 | 303 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 229 | 59 | 23 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 2,162 | 8,508 |  | 25.41% | 25.41% | N/A | N/A |
| **B** | Grade 8 | 1,058 | 6,386 |  | 16.57% | 16.57% | N/A | N/A |
| **C** | Grade HS | 997 | 4,800 |  | 20.77% | 20.77% | N/A | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 2,601 | 8,490 |  | 30.64% | 30.64% | N/A | N/A |
| **B** | Grade 8 | 679 | 6,299 |  | 10.78% | 10.78% | N/A | N/A |
| **C** | Grade HS | 326 | 3,933 |  | 8.29% | 8.29% | 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.**

Minnesota makes assessment results available in two locations. The Minnesota Report Card (https://rc.education.mn.gov/#assessmentsParticipation/orgId--999999000000\_\_groupType--state\_\_test--allAccount\_\_subject--M\_\_accountabilityFlg--FOC\_NONE\_\_year--trend\_\_grade--all\_\_p--23) allows users to view a dashboard of assessment results, add/remove filters, and compare educational entities. While the dashboard is primarily visual, it does include numerical information (counts and percentages) to facilitate understanding and comparison.

Minnesota also provides a ‘flat,’ tab-delimited file of all assessment results (https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=1). This tab-delimited file provides results at the state, county, district, and school levels and provides additional information (e.g., average scores, standard deviations, and strand scores) that are unavailable in the Minnesota Report Card.

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

Minnesota experienced historic lows in the number of special education students participating in statewide assessments against grade standards. At this time, it is unclear which students did not participate in the assessments using grade standards: those students with a history of performing well on the assessments, those students with a history of performing poorly on the assessments, or a combination of both. In addition, COVID-19 cases are climbing in Minnesota as we approach the FFY2021 testing window. With COVID-19 cases climbing and increasing numbers of Minnesota parents opting their students out of statewide assessments, it is unclear if proficiency rates among special education students will improve.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

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

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

## 3B - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

of testing.

## 3C - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 58.71% |
| Reading | B | Grade 8 | 2020 | 70.83% |
| Reading | C | Grade HS | 2020 | 72.97% |
| Math | A | Grade 4 | 2020 | 70.02% |
| Math | B | Grade 8 | 2020 | 68.40% |
| Math | C | Grade HS | 2020 | 50.24% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 58.71% | 59.00% | 60.00% | 61.00% | 62.00% | 63.00% |
| Reading | B >= | Grade 8 | 70.83% | 71.00% | 72.00% | 73.00% | 74.00% | 75.00% |
| Reading | C >= | Grade HS | 72.97% | 73.00% | 74.00% | 75.00% | 76.00% | 77.00% |
| Math | A >= | Grade 4 | 70.02% | 71.00% | 72.00% | 73.00% | 74.00% | 75.00% |
| Math | B >= | Grade 8 | 68.40% | 69.00% | 70.00% | 71.00% | 72.00% | 73.00% |
| Math | C >= | Grade HS | 50.24% | 51.00% | 52.00% | 53.00% | 54.00% | 55.00% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

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-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

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MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 620 | 648 | 629 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 364 | 459 | 459 |

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 617 | 655 | 627 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 432 | 448 | 315 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 364 | 620 |  | 58.71% | 58.71% | N/A | N/A |
| **B** | Grade 8 | 459 | 648 |  | 70.83% | 70.83% | N/A | N/A |
| **C** | Grade HS | 459 | 629 |  | 72.97% | 72.97% | N/A | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 432 | 617 |  | 70.02% | 70.02% | N/A | N/A |
| **B** | Grade 8 | 448 | 655 |  | 68.40% | 68.40% | N/A | N/A |
| **C** | Grade HS | 315 | 627 |  | 50.24% | 50.24% | 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.**

Minnesota makes assessment results available in two locations. The Minnesota Report Card (https://rc.education.mn.gov/#assessmentsParticipation/orgId--999999000000\_\_groupType--state\_\_test--allAccount\_\_subject--M\_\_accountabilityFlg--FOC\_NONE\_\_year--trend\_\_grade--all\_\_p--23) allows users to view a dashboard of assessment results, add/remove filters, and compare educational entities. While the dashboard is primarily visual, it does include numerical information (counts and percentages) to facilitate understanding and comparison.

Minnesota also provides a ‘flat,’ tab-delimited file of all assessment results (https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=1). This tab-delimited file provides results at the state, county, district, and school levels and provides additional information (e.g., average scores, standard deviations, and strand scores) that are unavailable in the Minnesota Report Card.

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

Students in grades 8 and in high school performed reasonably well on the MTAS in FFY2020. Despite the COVID-19 pandemic, participation of students with IEPs in tests against alternative achievement standards remained high for all grades and test subjects. Those participation rates were:
Grade 4 Reading (95.22% in FFY2018 and 92.68% in FFY2020); Grade 4 Math (95.12% in FFY2018 and 94.05% in FFY2020)
Grade 8 Reading (95.90% in FFY2018 and 90.88% in FFY2020); Grade 8 Math (96.80% in FFY2018 and 92.25% in FFY2020)
High School Reading (94.35% in FFY2018 and 89.09% in FFY2020); High School Math (95.88% in FFY2018 and 88.81% in FFY2020)

And while the pandemic did impact the proficiency rates of students taking the tests against grade standards, grade 8 and high school students taking the test against alternative standards performed as well as or better than their peers who completed the tests in FFY2018.
Grade 8
 Reading 68.4% in FFY2018 vs. 70.8% in FFY2020, an improvement of 2.4%
 Math: 68.2% in FFY2018 vs. 68.4% in FFY2020, an improvement of 0.2%

High school
 Reading: 68.7% in FFY2018 vs. 73.0% in FFY2020, an improvement of 4.3%
 Math: 47.6% in FFY2018 vs. 50.2% in FFY2020, an improvement of 2.6%

Students in grade 4 had lower performance on both the reading and math alternative assessments compared to their peers. However, students in grade 4 were taking the assessment for the first time: Typically, students begin statewide testing in third grade but, for the FFY2020 fourth grade students, their typical third grade tests were cancelled due to the pandemic. It is possible that some of the dip in proficiency rates among the fourth grade students could be attributed to their unfamiliarity with the tests and how responses are made.

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

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

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

## 3C - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3D - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 23.81 |
| Reading | B | Grade 8 | 2020 | 32.81 |
| Reading | C | Grade HS | 2020 | 37.29 |
| Math | A | Grade 4 | 2020 | 22.95 |
| Math | B | Grade 8 | 2020 | 28.66 |
| Math | C | Grade HS | 2020 | 32.95 |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 23.81 | 23.00  | 22.00 | 21.00 | 20.00 | 19.00 |
| Reading | B <= | Grade 8 | 32.81 | 32.00 | 31.00 | 30.00 | 29.00 | 28.00 |
| Reading | C <= | Grade HS | 37.29 | 37.00 | 36.00 | 35.00 | 34.00 | 33.00 |
| Math | A <= | Grade 4 | 22.95 | 22.00 | 21.00 | 20.00 | 19.00 | 18.00 |
| Math | B <= | Grade 8 | 28.66 | 28.00 | 27.00 | 26.00 | 25.00 | 24.00 |
| Math | C <= | Grade HS | 32.95 | 32.00 | 31.00 | 30.00 | 29.00 | 28.00 |

**Targets: Description of Stakeholder Input**

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**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 52,095 | 49,131 | 40,542 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,508 | 6,386 | 4,800 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 25,547 | 24,188 | 23,477 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 95 | 72 | 64 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 2,094 | 1,010 | 969 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 68 | 48 | 28 |

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 51,878 | 48,292 | 32,961 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,490 | 6,299 | 3,933 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 27,539 | 18,974 | 13,550 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 260 | 73 | 42 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 2,372 | 620 | 303 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 229 | 59 | 23 |

**FFY 2020 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 25.41% | 49.22% |  | 23.81 | 23.81 | N/A | N/A |
| **B** | Grade 8 | 16.57% | 49.38% |  | 32.81 | 32.81 | N/A | N/A |
| **C** | Grade HS | 20.77% | 58.07% |  | 37.29 | 37.29 | N/A | N/A |

**FFY 2020 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 30.64% | 53.59% |  | 22.95 | 22.95 | N/A | N/A |
| **B** | Grade 8 | 10.78% | 39.44% |  | 28.66 | 28.66 | N/A | N/A |
| **C** | Grade HS | 8.29% | 41.24% |  | 32.95 | 32.95 | N/A | N/A |

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

The COVID-19 pandemic has impacted indicator 3D. In many cases the achievement gap between the proficiency rates among general and special education on the grade-level achievement standards tests has decreased in FFY2020 compared to FFY2018. However, much of the decrease in the achievement gap is attributed to the greater decline in proficiency rates among general education students when compared to special education students. For example, the gap in fourth grade reading decreased from 26.9% in FFY2018 to 23.8% in FFY2020. However, when that data is more fully explored, the decrease in the gap is largely due to the 6.10% decrease in general education proficiency rates versus the 3.30% decrease in special education proficiency rates. Similarly, while there was an 8.2% reduction in the gap between general education and special education students’ proficiency rates for grade 8 math, that decrease is largely attributed to the 15.5% decrease in proficiency among general education students (vs. 7.3% decrease among special education students.

At this time it is unclear if or when proficiency rates among general and/or special education students will rebound. Minnesota is again experiencing climbing rates of COVID-19. LEAs and schools are taking appropriate measures to ensure students and instructional and support staff remain safe in the classroom, which may include a return to distance learning. The return to distance learning may impact the FFY2021 testing process.

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

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

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

## 3D - Required Actions

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 4.43% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 1.35% | 4.43% | 4.20% | 4.00% | 4.00% |
| Data | 1.01% | 4.43% | 5.01% | 5.46% | 4.58% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 4.55% | 4.35% | 4.15% | 3.95% | 3.75% | 3.55% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**FFY 2020 SPP/APR Data**

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

YES

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

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| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 22 | 483 | 4.58% | 4.55% | 4.55% | Met target | No Slippage |

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

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

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

Definition of significant discrepancy: An LEA is considered to have significant discrepancy in suspensions and expulsions (count of students with IEPs who have more than 10 days of suspensions and expulsions combined) if the LEA’s rate is equal to or greater than the state’s suspension and expulsion rate + 1.75 standard deviations (i.e., the state’s cut point).

Methodology: In concordance with OSEP’s 2016 requirements for Indicator 4A, LEAs are included in Minnesota’s calculations when the LEA has a minimum N-size of 10 children with IEPs. For FFY2020, 484 LEAs met the minimum N-size and were included in the calculations while 15 LEAs did not and were excluded from analysis. The calculations for significant discrepancy were as follows: a) the total number of children with IEPs who were suspended or expelled for more than 10 days in Minnesota was divided by the total number of children with IEPs in the state; b) the state’s standard deviation was also calculated and 1.75 times the standard deviation was added to the state’s suspension and expulsion rate to establish a cut point; c) LEA suspension and expulsion rates were calculated (count of children with IEPs who were suspended or expelled for more than 10 days divided by the number of children with IEPs enrolled); and d) each LEA’s suspension and expulsion rate was compared to the state’s cut point. LEAs whose suspension and expulsion ratio equaled or exceeded the cut point were identified as having numerical significant discrepancy. Any LEAs identified as having numerical significant discrepancy underwent a review of policies, procedures, and practices (see also next section).

For FFY2020, the calculations were as follows:
 Number of children with IEPs suspended or expelled for more than 10 days in the state = 320
 Number of children with IEPs ages 6 to 21 years = 126,692
 Statewide suspension and expulstion rate > 10 days for children with IEPs = 0.002763
 Standard deviation = 0.004533
 Minnesota cut point = 0.002763+1.75\*0.004533 = 0.0107; or 1.0696%

Using the above methodology, 22 LEAs were identified as having numerical significant discrepancy and underwent a policy, practice, and procedure review (see next section for specifics).

It is important to note that most LEAs in Minnesota do not have any children with IEPs who are suspended or expelled for greater than 10 days. Of the 484 LEAs with 10 or more children with IEPs, only 93 of the LEAs (19.21%) have one or more children with IEPs who have been suspended or expelled for greater than 10 days. The remaining 391, or 80.79%, of the LEAs have zero/no children with IEPs who have been suspended or expelled for greater than 10 days.

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

Data for Indicator 4A was collected during the 2019-20 school year. In March 2020, all LEAs and schools in Minnesota transitioned to distance learning in response to the global COVID-19 pandemic and per the governor’s emergency executive order. There was an overall decrease in the number of disciplinary incidents beginning in late March, 2020. Although Minnesota’s statewide cut scores for the number of students suspended or expelled for more than 10 days has been decreasing since FFY2017 (statewide cut score = 2.615% vs. the FFY2020 cut score of 1.070%), there was a much larger drop between the FFY2019 and FFY2020 statewide cut scores (1.839% in FFY2019 and 1.070% in FFY2020, a decrease of 0.769%) than observed in prior years (FFY2018’s statewide cut score was 2.108% and was only 0.269% larger than the FFY2019 statewide cut score of 1.839%). It is therefore very likely that the pandemic and distance learning decreased the total number of students suspended or expelled for more than 10 days. And, because Minnesota schools were using distance learning and hybrid learning models for much of the 2021-22 school year, it is also very likely that the pandemic will also impact the Indicator 4A data that will be reported in FFY2021.

In addition, MDE has adjusted the FFY2020 target to 4.55%, up from 4.00% in FFY2019. Although the cut score for identifying LEAs for significant discrepancy has decreased, the percent of LEAs identified as being significantly discrepant essentially been stable and fluctuated between 4.43 and 5.46%. MDE would like to use this opportunity to establish new targets that may be more attainable in the future.

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

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

The review of a LEA’s 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 compliance with the IDEA are included in MDE’s compliance monitoring process.

For LEAs identified with significant discrepancies in FFY2020 (based on 2019-20 discipline data), MDE reviewed all monitoring data to identify any policies, procedures, or practices thay may contribute to the significant discrepancy. MDE also identified any LEAs whose policies, procedures, or practices do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedures. As a result of this review, in FFY2020 no LEAs with numerical significant discrepancy were found to have policies, procedures, or practices that contributed to the significant discrepancy. In addition, none of the LEAs with numerical significant discrepancy were found to be in noncompliance with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedures.

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

In FFY 2020, MDE initiated revision of its monitoring process and contracted for development of an online system (“Stepwell MN”) for conducting program monitoring, including an annual statewide record review for indicator data collection. Development allowed MDE to shift from its Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at “end of life” for reliability, as well as the cyclical monitoring process used in the past, which did not differentiate monitoring based on LEA needs. The new Stepwell MN system will generate a random statewide sample from the most recent enrollment data reported through the Minnesota Automated Reporting Student System (MARSS) for Minnesota’s indicator data collection. Beginning in FFY2021, indicator data collection record reviews will be completed entirely through the new Stepwell MN online system. Correction of noncompliance also will be completed and tracked via the Stepwell MN system.

Outside of indicator data collection and beginning in FFY2021, MDE is moving towards a risk-based, cyclical monitoring process. LEAs have been divided into five cohorts and MDE annually will analyze risk data to identify LEAs with greater need for support and assistance. Those LEAs identified as needing less support will complete a targeted record review, receive universal technical assistance and may complete other monitoring activities as needed. The primary focus of monitoring activities will be on those LEAs identified with greater needs. Once identified as in need of additional program monitoring, the first phase of the monitoring process will involve gathering additional data from the LEAs to better understand the current policies, practices, and procedures of the LEA. The monitoring activities, taking place during the second phase, will include additional record reviews, site visits, facility reviews, and staff interviews as needed. The monitoring activities will be differentiated based on the needs identified through the risk analysis and initial data collection and review activities completed during the first phase of the monitoring process. The third and final phase of the monitoring process will involve completion of corrective actions designed to address any identified noncompliance as well as targeted technical assistance and support to the LEA.

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

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

## 4A - Required Actions

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

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

YES

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

23

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy, by race or ethnicity** | **Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 52 | 0 | 474 | 0.00% | 0% | 0.00% | Met target | No Slippage |

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

YES

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

Definition of significant discrepancy: An LEA is considered to have significant discrepancy in suspensions and expulsions (count of students with IEPs who have more than 10 days of suspensions and expulsions combined) if the LEA’s rate for a racial/ethnic group is equal to or greater than the state’s suspension and expulsion rate + 1.75 standard deviations (i.e., the state’s cut point).

Methodology: In concordance with OSEP’s 2016 requirements for Indicator 4B, LEAs are included in Minnesota’s calculations when the LEA has a minimum N-size of 10 children with IEPs in the racial/ethnic group of analysis. For FFY2020, 475 LEAs met the minimum N-size for one or more racial or ethnic groups and were included in the calculations while 24 LEAs were excluded from analysis. The calculations for significant discrepancy were as follows: a) the total number of children with IEPs who were suspended or expelled for more than 10 days in Minnesota was divided by the total number of children with IEPs in the state; b) the state’s standard deviation was also calculated and 1.75 times the standard deviation was added to the state’s suspension and expulsion rate to establish a cut point; c) LEA suspension and expulsion rates for each racial or ethnic group meeting the minimum N size were calculated (count of children with IEPs in a racial or ethnic group who were suspended or expelled for more than 10 days divided by the number of children with IEPs in the same racial or ethnic group enrolled); and d) the suspension and expulsion rate for each LEA’s racial or ethnic group was compared to the state’s cut point. LEAs whose suspension and expulsion ratio for a racial or ethnic group equaled or exceeded the cut point were identified as having numerical significant discrepancy and underwent a review of policies, procedures, and practices (see also next section).

For FFY2020, the calculations were as follows:
 Number of children with IEPs suspended or expelled for more than 10 days in the state = 320
 Number of children with IEPs ages 6 to 21 years = 126,692
 Statewide suspension and expulstion rate > 10 days for children with IEPs = 0.002763
 Standard deviation = 0.004533
 Minnesota cut point = 0.002763+1.75\*0.004533 = 0.0107; or 1.0696%

Using this methodology, 52 LEAs were identified for significant discrepancy for one or more racial or ethnic groups: 42 LEAs were identified for one racial or ethnic group, six LEAs were identified for two racial or ethnic groups, and four LEAs were identified for three racial or ethnic groups (a total of 66 instances of significant discrepancy were found). In addition, 20 instances of significant discrepancy were found for Black or African American students, 14 instances for American Indian or Alaska Native students, 12 instances for Hispanic or Latino students, 10 instances for Two or More Races students, nine for White students, and one for Asian students. There were no identifications of significant discrepancy found for Native Hawaiian or Pacific Islander students. Last, 18 LEAs were identified with significant discrepancy for both Indicators 4A and 4B.

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

It is important to note that most LEAs in Minnesota do not have any children with IEPs in any racial or ethnic group who are suspended or expelled for greater than 10 days. Of the 483 LEAs with 10 or more children with IEPs, only 93 of the LEAs (19.21%) have one or more children with IEPs who have been suspended or expelled for greater than 10 days. The remaining 391, or 80.79%, of the LEAs have zero/no children with IEPs who have been suspendended or expelled for greater than 10 days.

In addition, data for Indicator 4B was collected during the 2019-20 school year. In March 2020, all LEAs and schools in Minnesota transitioned to distance learning in response to the global COVID-19 pandemic and per the governor’s emergency executive order. There was an overall decrease in the number of disciplinary incidents beginning in late March, 2020. Although Minnesota’s statewide cut scores for the number of students suspended or expelled for more than 10 days has been decreasing since FFY2017 (statewide cut score = 2.615%), there was a much larger drop between the FFY2019 and FFY2020 statewide cut scores (1.839% in FFY2019 and 1.070% in FFY2020, a decrease of 0.769%) than observed in prior years (FFY2018’s statewide cut score was 2.108% and was only 0.269% larger than the FFY2019 statewide cut score of 1.839%). Indeed, the total number of LEAs identified with numerical significant discrepancy decreased from 55 in FFY2019 to 52 in FFY2020.

While the statewide cut score and the number of LEAs identified with numerical significant discrepancy both decreased, there was one increase in the number of numerical significant discrepancy identifications. Although the total number of LEAs identified for numerical significant discrepancy decreased from FFY2019 to FFY2020 among Black (25 down to 20 LEAs), Hispanic (14 down to 10 LEAs), Two or more races (14 down to 10 LEAs) and White (11 down to 9 LEAs), there was an increase in the number of LEAs identified for numerical significant discrepancy for American Indian students: from 11 LEAs in FFY2019 to 14 LEAs in FFY2021. Prior to FFY2020, the number of LEAs identified for numerical significant discrepancy for American Indian students was relatively stable, and varied between 13 LEAs (FFY2017) to 11 (FFY2016 and FFY2019).

Because Minnesota schools were using distance learning and hybrid learning models for much of the 2021-22 school year, it is also very likely that the pandemic will also impact the data that will be reported in FFY2021. MDE will continue to monitor the statewide cut scores and the number of LEAs identified in for numerical significant discrepancy and the number of LEAs identified for each of the racial/ethnic groups to determine if the FFY2020 observations and data represented a momentary uptick, or if there is a systematic increase in the number of LEAs suspending or expelling American Indian students form more than 10 days.

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

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

The review of a LEA’s 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 compliance with the IDEA are included in MDE’s compliance monitoring process.

For LEAs identified with significant discrepancies in FFY2020 (based on 2019-20 discipline data), MDE reviewed all monitoring data to identify any policies, procedures, or practices thay may contribute to the significant discrepancy. MDE also identified any LEAs whose policies, procedures, or practices do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedures. As a result of this review, in FFY2020 no LEAs with numerical significant discrepancy were found to have policies, procedures, or practices that contributed to the significant discrepancy. In addition, none of the LEAs with numerical significant discrepancy were found to be in noncompliance with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedures.

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

In FFY 2020, MDE initiated revision of its monitoring process and contracted for development of an online system (“Stepwell MN”) for conducting program monitoring, including an annual statewide record review for indicator data collection. Development allowed MDE to shift from its Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at “end of life” for reliability, as well as the cyclical monitoring process used in the past, which did not differentiate monitoring based on LEA needs. The new Stepwell MN system will generate a random statewide sample from the most recent enrollment data reported through the Minnesota Automated Reporting Student System (MARSS) for Minnesota’s indicator data collection. Beginning in FFY2021, indicator data collection record reviews will be completed entirely through the new Stepwell MN online system. Correction of noncompliance also will be completed and tracked via the Stepwell MN system.

Outside of indicator data collection and beginning in FFY2021, MDE is moving towards a risk-based, cyclical monitoring process. LEAs have been divided into five cohorts and MDE annually will analyze risk data to identify LEAs with greater need for support and assistance. Those LEAs identified as needing less support will complete a targeted record review, receive universal technical assistance and may complete other monitoring activities as needed. The primary focus of monitoring activities will be on those LEAs identified with greater needs. Once identified as in need of additional program monitoring, the first phase of the monitoring process will involve gathering additional data from the LEAs to better understand the current policies, practices, and procedures of the LEA. The monitoring activities, taking place during the second phase, will include additional record reviews, site visits, facility reviews, and staff interviews as needed. The monitoring activities will be differentiated based on the needs identified through the risk analysis and initial data collection and review activities completed during the first phase of the monitoring process. The third and final phase of the monitoring process will involve completion of corrective actions designed to address any identified noncompliance as well as targeted technical assistance and support to the LEA.

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

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

## 4B- Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target >= | 61.00% | 61.50% | 62.00% | 62.50% | 62.50% |
| A | 62.30% | Data | 60.45% | 60.71% | 60.91% | 61.16% | 61.28% |
| B | 2020 | Target <= | 9.50% | 9.50% | 9.50% | 9.50% | 9.50% |
| B | 10.10% | Data | 10.08% | 10.07% | 10.04% | 9.98% | 9.92% |
| C | 2020 | Target <= | 4.00% | 4.00% | 4.00% | 4.00% | 4.00% |
| C | 3.90% | Data | 4.15% | 4.11% | 4.17% | 4.13% | 4.21% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 62.30% | 62.80% | 63.30% | 63.80% | 64.30% | 64.80% |
| Target B <= | 10.10% | 9.90% | 9.80% | 9.70% | 9.60% | 9.50% |
| Target C <= | 3.90% | 3.85% | 3.80% | 3.75% | 3.70% | 3.65% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 132,571 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 82,605 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 13,383 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 4,855 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 66 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 230 |

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

NO

**FFY 2020 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 5 (kindergarten) through 21 served** | **Total number of children with IEPs aged 5 (kindergarten) through 21** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 82,605 | 132,571 | 61.28% | 62.30% | 62.31% | N/A | N/A |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 13,383 | 132,571 | 9.92% | 10.10% | 10.09% | N/A | N/A |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 5,151 | 132,571 | 4.21% | 3.90% | 3.89% | N/A | N/A |

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

While there was a considerable increase in Minnesota’s data for 5A, from 61.28% in FFY2019 to 62.31% in FFY2020, the increase is most likely due to a shift in data collection strategies in Minnesota. Up to FFY2019, the educational environment of all 5-year-olds with an IEP, regardless of grade, was categorized in the same way as the educational environment of 3- and 4-year-olds. However, Minnesota changed data collection guidance to LEAs to align with the new reporting requirements for FFY2020. As a result, the increase in the percent of students in 5A is likely due to the shift in data collection and is probably not indicative of a major shift in students’ educational environment. In addition, the COVID-19 pandemic has impacted enrollments in Minnesota public schools, especially for students enrolled in early childhood, pre-kindergarten, and kindergarten. At this time, it is unclear the degree to which the pandemic has impacted the educational environment of 5-year-olds in kindergarten.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

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

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

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A** | Target >= | 53.60% | 53.90% | 54.20% | 54.50% | 54.50% |
| **A** | Data | 56.66% | 58.20% | 59.32% | 58.28% | 59.09% |
| **B** | Target <= | 18.30% | 18.20% | 18.10% | 18.00% | 18.00% |
| **B** | Data | 16.63% | 15.07% | 14.42% | 15.10% | 14.29% |

**Targets: Description of Stakeholder Input**

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**Targets**

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

Individual Targets

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

Target Range not used

**Baselines for Individual Targets option (A, B, C)**

| **Part** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- |
| **A1, age 3** | 2020 | 40.23% |
| **A2, age 4** | 2020 | 58.42% |
| **A3, age 5** | 2020 | 64.33% |
| **B1, age 3** | 2020 | 29.25% |
| **B2, age 4** | 2020 | 17.99% |
| **B3, age 5** | 2020 | 10.74% |
| **C1, age 3** | 2020 | 12.69% |
| **C2, age 4** | 2020 | 3.74% |
| **C3, age 5** | 2020 | 3.02% |

**Individual Targets – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1, age 3 >= | 45.30% | 46.50% | 47.70% | 48.90% | 50.10% | 51.30% |
| Target B1, age 3 <= | 30.00% | 29.70% | 29.40% | 29.10% | 28.80% | 28.50% |
| Target A2, age 4 >=  | 59.00% | 60.30% | 61.60% | 62.90% | 64.20% | 65.50% |
| Target B2, age 4 <= | 18.00% | 17.40% | 16.80% | 16.20% | 15.60% | 15.00% |
| Target A3, age 5 >=  | 64.25% | 64.75% | 65.25% | 65.75% | 66.25% | 66.75% |
| Target B3, age 5 <=  | 10.70% | 10.60% | 10.50% | 10.40% | 10.30% | 10.20% |

**Individual Targets – 6C**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C1, age 3 <= | 6.70% | 6.65% | 6.60% | 6.55% | 6.50% | 6.45% |
| Target C2, age 4 <= | 1.95% | 1.90% | 1.85% | 1.80% | 1.75% | 1.70% |
| Target C3, age 5 <= | 0.95% | 0.94% | 0.93% | 0.92% | 0.91% | 0.90% |

**Prepopulated Data**

**Data Source:**

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

**Date:**

07/07/2021

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 3,326 | 5,876 | 2,719 | 11,921 |
| a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 1,398 | 3,433 | 1,749 | 6,580 |
| b1. Number of children attending separate special education class | 957 | 1,037 | 284 | 2,278 |
| b2. Number of children attending separate school | 15 | 20 | 8 | 43 |
| b3. Number of children attending residential facility | 1 | 0 | 0 | 1 |
| c1**.** Numberof children receiving special education and related services in the home | 422 | 204 | 82 | 708 |

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

NO

**FFY 2020 SPP/APR Data for Age 3**

| **Preschool Environments** | **Number of children with IEPs aged 3 served** | **Total number of children with IEPs aged 3** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 1,398 | 3,326 |  | 45.30% | 42.03% | N/A | N/A |
| B1. Separate special education class, separate school or residential facility | 973 | 3,326 |  | 30.00% | 29.25% | N/A | N/A |
| C1. Home | 422 | 3,326 |  | 6.70% | 12.69% | N/A | N/A |

**FFY 2020 SPP/APR Data for Age 4**

| **Preschool Environments** | **Number of children with IEPs aged 4 served** | **Total number of children with IEPs aged 4** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A2. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 3,433 | 5,876 |  | 59.00% | 58.42% | N/A | N/A |
| B2. Separate special education class, separate school or residential facility | 1,057 | 5,876 |  | 18.00% | 17.99% | N/A | N/A |
| C2. Home | 204 | 5,876 |  | 1.95% | 3.47% | N/A | N/A |

**FFY 2020 SPP/APR Data for Age 5**

| **Preschool Environments** | **Number of children with IEPs aged 5 served** | **Total number of children with IEPs aged 5** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A3. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 1,749 | 2,719 |  | 64.25% | 64.33% | N/A | N/A |
| B3. Separate special education class, separate school or residential facility | 292 | 2,719 |  | 10.70% | 10.74% | N/A | N/A |
| C3. Home | 82 | 2,719 |  | 0.95% | 3.02% | N/A | N/A |

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

It is important to note that the impact of COVID-19 in the location of a child for the receipt of virtual services (if relevant to the district) had some impact on all setting locations and age levels. Initially, Minnesota chose to recalculate FFY2019 data for each age and setting category because of the COVID-19 pandemic. Both stakeholders and MDE staff felt that the FFY2019 data was more reflective of the landscape of educational environments in Minnesota than the FFY2020 data. Unfortunately, OSEP did not accept the FFY2019 baseline data. Minnesota has updated the baselines to reflect FFY2020 pandemic-impacted counts, including the Home setting across all age categories. The rigorous targets at each age and setting remain unchanged because it is a priority to return to more inclusive program settings in the coming school years.

Throughout the stakeholder engagement, it was evident that the context of our preschool programming for general education students needed to be a consideration in the setting of targets, specifically when addressing home as a setting. This recommendation was based in part on the fact that in Minnesota we do not have a universal preschool program available for all children age three until enrollment to kindergarten. Of significance, many of our LEAs have policies in place that require students participating in district preschool programs to be three years old on or before September 1 of that school year. This would mean that children who were not three on September 1st would not have a preschool program with peers available to receive services within (instead these students are often served within their childcare settings and often within the home). We also have two state-funded preschool programs that are designed specifically for students that are a year prior to kindergarten eligibility and have several requirements based on risk factors to be able to participate in these free or reduced-cost programs. Additionally, those programs cannot enroll a child that would otherwise have been eligible to enroll in Kindergarten. If a parent chooses not to enroll in Kindergarten when eligible, it means that peer settings that are free of cost would be more limited in availability. It is also important to note that: A) LEAs are not required to create programs that are not otherwise made available to general education peers, and B) families/caregivers have the ability to make decisions whether or not their children participate in childcare or preschool programs as Minnesota does not have compulsory attendance requirements until age seven.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

The State has revised the baseline for sub-indicator 6A, using data from FFY 2020. However, but OSEP cannot accept that revision because there is a discrepancy in the FFY 2020 data for A1: The FFY 2020 baseline data reported for A1 is 40.23%, but the FFY 2020 data reported for A1 in the SPP/APR table is shows as 42.03%.

The State has revised the baseline for sub-indicator 6B, using data from FFY 2020 and OSEP accepts that revision.

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts the targets for sub-indicators 6B and 6C, but OSEP cannot accept the targets for sub-indicator 6A because OSEP cannot determine whether the State's end targets for sub-indicator 6A reflect improvement over the State's baseline data, given that the State's established baseline for sub-indicator 6A cannot be accepted, as noted above. The State must ensure its FFY 2025 targets for sub-indicator 6A reflect improvement.

## 6 - Required Actions

If, in the FFY 2021 SPP/APR, the State chooses to revise baseline, using FFY 2020 data, the State must ensure that the FFY 2020 data reported in the baseline table is consistent with the FFY 2020 data in the SPP/APR data table.

The State did not provide targets for Indicator 6A, as required by the measurement table. The State must provide the required targets for FFY 2020 through FFY 2025 in the FFY 2021 SPP/APR.

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

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

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

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

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

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

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

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

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

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

**Instructions**

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

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A1 | 2018 | Target >= | 71.50% | 71.60% | 71.80% | 72.00% | 66.03% |
| A1 | 65.93% | Data | 69.84% | 68.38% | 69.08% | 65.93% | 63.05% |
| A2 | 2018 | Target >= | 59.00% | 60.00% | 61.00% | 62.00% | 51.48% |
| A2 | 51.38% | Data | 55.46% | 54.17% | 53.19% | 51.38% | 48.40% |
| B1 | 2018 | Target >= | 71.90% | 72.00% | 72.20% | 72.40% | 67.94% |
| B1 | 67.84% | Data | 71.96% | 70.25% | 69.54% | 67.84% | 65.42% |
| B2 | 2018 | Target >= | 55.10% | 55.30% | 55.50% | 55.70% | 49.95% |
| B2 | 49.85% | Data | 54.70% | 52.80% | 51.94% | 49.85% | 46.13% |
| C1 | 2018 | Target >= | 72.70% | 72.80% | 73.00% | 73.20% | 67.74% |
| C1 | 67.64% | Data | 70.66% | 69.10% | 70.06% | 67.64% | 65.50% |
| C2 | 2018 | Target >= | 66.60% | 66.70% | 66.80% | 66.90% | 61.75% |
| C2 | 61.65% | Data | 64.89% | 63.45% | 62.78% | 61.65% | 59.62% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 63.00% | 63.90% | 64.80% | 65.70% | 66.60% | 67.50% |
| Target A2 >= | 48.50% | 49.50% | 50.50% | 51.50% | 52.50% | 53.50% |
| Target B1 >= | 65.50% | 66.30% | 67.10% | 67.90% | 68.70% | 69.50% |
| Target B2 >= | 46.00% | 47.30% | 48.60% | 49.90% | 51.20% | 52.50% |
| Target C1 >= | 65.50% | 66.30% | 67.10% | 67.90% | 68.70% | 69.50% |
| Target C2 >= | 59.50% | 60.30% | 61.10% | 61.90% | 62.70% | 63.50% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**FFY 2020 SPP/APR Data**

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

6,013

**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 | 13 | 0.22% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,759 | 29.26% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,357 | 22.58% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,406 | 23.39% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,476 | 24.55% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 2,763 | 4,535 | 63.05% | 63.00% | 60.93% | Did not meet target | Slippage |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,882 | 6,011 | 48.40% | 48.50% | 47.95% | Did not meet target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 14 | 0.23% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,804 | 30.13% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,435 | 23.97% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,719 | 28.71% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,015 | 16.95% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 3,154 | 4,972 | 65.42% | 65.50% | 63.44% | Did not meet target | Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,734 | 5,987 | 46.13% | 46.00% | 45.67% | Did not meet target | No Slippage |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 21 | 0.35% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,516 | 25.25% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 971 | 16.17% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,594 | 26.54% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,903 | 31.69% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.*Calculation:(c+d)/(a+b+c+d)*  | 2,565 | 4,102 | 65.50% | 65.50% | 62.53% | Did not meet target | Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 3,497 | 6,005 | 59.62% | 59.50% | 58.23% | Did not meet target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A1** | In addition to the COVID-19 pandemic, MDE has identified a number of factors that may have contributed to slippage. They are: -There was a scoring issue in the item-level data submissions associated with the Desired Results Developmental Profile (DRDP). There were concerns that the DRDP was inappropriately cross-walked to three child outcome scores. The technical issue is being investigated and, as soon as the source of the issue is identified, MDE will work to resolve it. In the meantime, the affected profiles have been removed from the analysis.-There were errors in how a students’ “status end code” was recorded in the student information reporting system. The “status end code” is used to record how students ended a school year (e.g., moved, exited Part C). Analysis of individual child-level enrollment records suggests that an additional 8% of enrollment records should have been collected by LEAs and submitted to MDE, but were not. -LEAs can use one of four assessment tools that have been cross-walked to the child outcome summary (COS), and MDE has encouraged LEAs to send MDE item-level data for students for analysis and reporting. Since implementing this initiative, MDE has observed a steady decline in the scores of students exiting Part B/619. Analysis is ongoing, but initial findings suggest that outcomes for students with MDE-calculated scores are significantly lower than outcomes for students whose assessments have been scored manually. For instance, for question 1, there is a discrepancy between MDE-calculated and manually scored assessments of 25%. That discrepancy increased to 38% for question 2. Analysis, and strategies to address identified issues, are ongoing. -Last, the pandemic may have had a differential impact on Minnesota’s Black, indigenous, and persons of color children (BIPOC). In FFY2020, BIPOC children have significantly reduced outcomes compared to their White peers. And, for Indicator B7A.1, 10-15% fewer BIPOC children are achieving “substantially increased rates of growth.” |
| **B1** | In addition to the COVID-19 pandemic, MDE has identified a number of factors that may have contributed to slippage. They are: -There was a scoring issue in the item-level data submissions associated with the Desired Results Developmental Profile (DRDP). There were concerns that the DRDP was inappropriately cross-walked to three child outcome scores. The technical issue is being investigated and, as soon as the source of the issue is identified, MDE will work to resolve it. In the meantime, the affected profiles have been removed from the analysis.-There were errors in how a students’ “status end code” was recorded in the student information reporting system. The “status end code” is used to record how students ended a school year (e.g., moved, exited Part C). Analysis of individual child-level enrollment records suggests that an additional 8% of enrollment records should have been collected by LEAs and submitted to MDE, but were not. -LEAs can use one of four assessment tools that have been cross-walked to the child outcome summary (COS), and MDE has encouraged LEAs to send MDE item-level data for students for analysis and reporting. Since implementing this initiative, MDE has observed a steady decline in the scores of students exiting Part B/619. Analysis is ongoing, but initial findings suggest that outcomes for students with MDE-calculated scores are significantly lower than outcomes for students whose assessments have been scored manually. For instance, for question 1, there is a discrepancy between MDE-calculated and manually scored assessments of 25%. That discrepancy increased to 38% for question 2. Analysis, and strategies to address identified issues, are ongoing. -Last, the pandemic may have had a differential impact on Minnesota’s Black, indigenous, and persons of color children (BIPOC). In FFY2020, BIPOC children have significantly reduced outcomes compared to their White peers. And, for Indicator B7B.1 10-15% fewer BIPOC children are achieving “substantially increased rates of growth.” |
| **C1** | In addition to the COVID-19 pandemic, MDE has identified a number of factors that may have contributed to slippage. They are: -There was a scoring issue in the item-level data submissions associated with the Desired Results Developmental Profile (DRDP). There were concerns that the DRDP was inappropriately cross-walked to three child outcome scores. The technical issue is being investigated and, as soon as the source of the issue is identified, MDE will work to resolve it. In the meantime, the affected profiles have been removed from the analysis.-There were errors in how a students’ “status end code” was recorded in the student information reporting system. The “status end code” is used to record how students ended a school year (e.g., moved, exited Part C). Analysis of individual child-level enrollment records suggests that an additional 8% of enrollment records should have been collected by LEAs and submitted to MDE, but were not. -LEAs can use one of four assessment tools that have been cross-walked to the child outcome summary (COS), and MDE has encouraged LEAs to send MDE item-level data for students for analysis and reporting. Since implementing this initiative, MDE has observed a steady decline in the scores of students exiting Part B/619. Analysis is ongoing, but initial findings suggest that outcomes for students with MDE-calculated scores are significantly lower than outcomes for students whose assessments have been scored manually. For instance, for question 1, there is a discrepancy between MDE-calculated and manually scored assessments of 18%. Analysis, and strategies to address identified issues, are ongoing. -Last, the pandemic may have had a differential impact on Minnesota’s Black, indigenous, and persons of color children (BIPOC). In FFY2020, BIPOC children have significantly reduced outcomes compared to their White peers. And, for Indicator B7C.1, 5-10% fewer BIPOC children are achieving “substantially increased rates of growth.” |
| **C2** | In addition to the COVID-19 pandemic, MDE has identified a number of factors that may have contributed to slippage. They are: -There was a scoring issue in the item-level data submissions associated with the Desired Results Developmental Profile (DRDP). There were concerns that the DRDP was inappropriately cross-walked to three child outcome scores. The technical issue is being investigated and, as soon as the source of the issue is identified, MDE will work to resolve it. In the meantime, the affected profiles have been removed from the analysis.-There were errors in how a students’ “status end code” was recorded in the student information reporting system. The “status end code” is used to record how students ended a school year (e.g., moved, exited Part C). Analysis of individual child-level enrollment records suggests that an additional 8% of enrollment records should have been collected by LEAs and submitted to MDE, but were not. -LEAs can use one of four assessment tools that have been cross-walked to the child outcome summary (COS), and MDE has encouraged LEAs to send MDE item-level data for students for analysis and reporting. Since implementing this initiative, MDE has observed a steady decline in the scores of students exiting Part B/619. Analysis is ongoing, but initial findings suggest that outcomes for students with MDE-calculated scores are significantly lower than outcomes for students whose assessments have been scored manually. For instance, for question 1, there is a discrepancy between MDE-calculated and manually scored assessments of 18%. Analysis, and strategies to address identified issues, are ongoing. -Last, the pandemic may have had a differential impact on Minnesota’s Black, indigenous, and persons of color children (BIPOC). In FFY2020, BIPOC children have significantly reduced outcomes compared to their White peers. And, for B7C.1, 5-10% fewer BIPOC children are achieving “substantially increased rates of growth.” |

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

YES

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

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

YES

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

In Minnesota, LEAs can use a variety of sources to inform ratings on each child’s COS: norm-referenced tools administered as part of a child’s initial evaluation, parent information or report, and professional observations. All of the sources are used to complete an age-anchored, criterion-referenced assessment tool. This work is informed and supported by careful use of crosswalk documents developed by the Early Childhood Outcomes Center. In addition, MDE requires that assessments be made within a month of a child’s date of program entry and/or exit. And, when a child is exiting Part C and transitioning into early childhood special education services under Part B, the child’s Part C exit rating becomes their Part B entrance rating. If the child transitions locations at the same time, the Part C and Part B teams must reach consensus on an accurate Part C exit/Part B entrance rating.

FFY2018 was the first year that LEAs had an alternative to the COS form and process. LEAs were able to assess children using one of four pre-approved tools: COR Advantage, Desired Results Developmental Profile, Teaching Strategies GOLD, and the Work Sampling System (approved for use at Part C exit only). LEAs enter item-level data into a specially formatted spreadsheet and send the information to MDE using secure methods. MDE developed a method to transform students’ item-level data to a COS rating between 1 and 7, and aligns the submitted data to MDE early learning standards, the Early Childhood Indicators of Progress (ECIP). Although item-level data was submitted for less than 10% of the children in FFY2018, item-level data submissions increased to 13% (FFY2019) and 19% (FFY2020). MDE continues to analyze systems, capacity, and logistics of this data sharing system to ensure it is meeting MDE’s initial expectations and to calibrate the process, as needed.

The tools and processes described above have been adopted for use across the state’s school-based early learning programs and substantial investment has been made in training, development, and infrastructure for ongoing collection and analysis of child outcomes in Minnesota. MDE continues to track the use of item-level data submissions, the calibration of MDE- versus manually-scored assessments, the accuracy of the cross-walked files, and the training provided to LEAs and their staff to ensure reliability and validity in either reporting method.

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

For Indicator 7, stakeholder engagement and feedback indicated keeping targets starting at data points from 2019 and making modest incremental change. The reasons included continued uncertainty with COVID-19, refining of the COS collection and practices in order to better support the unique needs of home, community and school environments for young children, and recognition that the current COS system utilizing exit C scores as entrance B scores, varying methods for determining outcome ratings (state calculated based on item level assessment data, manual entry and batch uploads of team determined rating) creates significant variability within the system.

The pandemic likely had some impact on overall data quality as well as child outcomes. First, there was a significant period of time during the 2020-21 school year in which all students, regardless of age, were provided instruction virtually. While instructional mode did shift over the course of the school year, MDE is just beginning to understand how virtual instruction impacts large groups of students. Second, LEAs experienced interruptions to general education preschool program availability and the ability of LEAs to provide services within community child care and/or Head Start program locations: Often, COVID-19 mitigation requirements restricted access to these locations and/or reduced the number of students who could be served.

In addition, MDE has concerns about data quality for a significant number of LEAs. MDE is reviewing all early childhood data submissions and examining turn-around reports (data that is shared by MDE back out to districts) to better determine the level of assistance needed to support improvements in data quality. While the review is just beginning, MDE will provide significant support to those LEAs and/or programs identified with significant data quality issues which, in turn, will help improve statewide TA efforts.

MDE will also review themes from the stakeholder and community engagement meetings and prioritize next steps. Some of the next steps may include developing TA webinars and providing coaching to LEAs with data quality issues. In addition, MDE will continue monitoring the data collections processes that have been established to ensure LEAs are submitting complete spreadsheets to MDE. When issues are identified, MDE staff can provide immediate support to improve the completeness of submitted data. In addition, MDE will establish workgroups to examine when and how data is reported, the frequency of reporting data to MDE, the use of Part C exit outcomes as Part B entrance scores, and whether or not MDE can continue using item-level assessment data. MDE will include stakeholders, community members, and national experts to provide suggestions, feedback and TA to the workgroup.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

## 8 - Indicator Data

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2007 | 71.30% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 71.00% | 71.50% | 72.00% | 72.00% | 72.00% |
| Data | 64.54% | 71.89% | 70.19% | 70.38% | 70.37% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 70.50% | 71.00% | 71.50% | 72.00% | 72.00% | 72.00% |

**FFY 2020 SPP/APR Data**

| **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 353 | 472 | 70.37% | 70.50% | 74.79% | Met target | No Slippage |

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

Minnesota collects data for only one parent engagement survey; preschool children are included in the sampling procedure. See sampling methodology for more information.

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

2,385

**Percentage of respondent parents**

19.79%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 25.78% | 19.79% |

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

Minnesota’s overall process of survey administration and outreach strategies has proven successful in increasing response rates from typically underrepresented families and survey response rates overall. At least once during the survey deployment, survey responses are retrieved and the demographics of students whose families responded vs. not responded are compared via statistical tests (Chi-squares). Any statistically significant findings are noted and a group or groups of students consistent with those findings are identified for outreach. The goal of the outreach is to improve response rates among families with low response rates. Often, this means outreach for American Indian and Black students, and non-English speaking families, and, occasionally, students from specific primary disability groups (e.g., emotional disturbance). Typical outreach includes phone calls from Hmong, Somali, and Spanish interpreters (contracted for the outreach) during the evening hours when families are more likely to be available. In addition, some MDE Special Education staff may also attempt phone calls during the workday or evenings from the MDE offices. However, the COVID-19 pandemic has negatively affected all outreach activities. In both FFY2019 and FFY2020 administrations of the parent survey, MDE’s offices were closed, which prevented hiring interpreters for telephone outreach. In addition, the COVID-19 pandemic required new technical assistance from Special Education staff to LEAs and charters, so MDE staff were unavailable to phone families in both FFY2019 and FFY2020. Minnesota hopes to reinstitute telephone outreach by interpreters and MDE staff as soon as practicable.

While the COVID-19 pandemic has had a negative impact on MDE’s ability to complete outreach activities in both FFY2019 and FFY2020, MDE will continue to implement and improve outreach efforts to increase response rates for underrepresented families, especially for families of students who are American Indian or Black, and whose home primary language is not English. In addition, MDE anticipates that implementation of a new compliance monitoring and survey management system in FFY2021 will provide LEAs more advanced notice of when they will participate in the annual survey. This may help LEAs do additional planning and outreach in anticipation of survey administration.

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

Historically, MDE’s parent survey overall response rate has hovered between 20 and 25%; in FFY2020, however, there was a dip down to 19.79%. In preparation for this submission, MDE examined the response rates disaggregated by student demographic characteristics. In general, the response rates for student gender, home primary language, primary disability, and age (3-5 year olds; 6-11 year olds; 12-16 year olds; 17-21 year olds) were relatively consistent both before (FFY2016 to FFY2018) and during (FFY2019 and FFY2020) the pandemic. Deviations of the response rates, in general, were largely within 7% of the overall survey response rate. There is one noteable exception, however: student’s race and ethnicity. Historically, MDE has received fewer surveys from families whose students are American Indian or Alaska Native. The differences between the overall response rate and the response rate for American Indian families has often exceeded 10%. Surprisingly, this year, American Indian and Alaska Native students’ families had a response rate of 16.90% which was only a 3% different than the overall response rate of 19.79%. But in FFY2020 MDE observed a dramatic drop in the response rate of families whose students were Black or African American. Typically, families of Black and African American students responded within ±7% of the overall response rate but in FFY2020 that difference was 11.13%. At this time, it’s unclear if the drop in the response rate for families of Black or African American students is a temporary dip or is indicative of an emerging pattern. However, MDE will work with LEA contacts for both American Indian and Black students to identify strategies to improve the response rates in future survey deployments.

At the present time, MDE does not have the means to investigate nonresponse bias, largely because of current software limitations. First, the existing survey software limits analysis of nonresponse bias to five demographics: federal race/ethnicity, primary disability, home primary language, gender, and age. And all of those demographic characteristics are currently used in analyses of representativeness. In addition, parents can complete the engagement survey via paper, and mail the survey back to MDE in a postage-paid envelope, or complete the survey electronically. Having two possible response modes adds additional challenges to any investigation of nonresponse bias. The online survey software presents the survey only in English and does not allow the completion time to be downloaded with the survey responses. Second, more than 60% of the parents elect to return the paper survey. But paper surveys are often delayed at a central mail sorting facility for state agencies and then, when received at MDE, may have to wait several days before being entered into the survey software. So, although MDE knows the date the paper survey was entered, we do not know the date the paper survey was completed, mailed, or received. As a result, comparisons between “early” and “late” survey responders are essentially meaningless because MDE does not have accurate information about when a survey was completed (vs. entered into the computer system). MDE is updating the survey deployment software in FFY2021. The new software will allow us to view and use timestamps of the electronically completed surveys. In addition, the new software will also allow electronic surveys to be available in three languages other than English: Hmong, Somali, and Spanish. And, in FFY2022, new survey monitoring software will be available for use. The new monitoring software will allow for the retrieval of additional student demographic characteristics that can be used in an analysis of nonresponse bias.

Although Minnesota does not currently have the data infrastructure for a full investigation of nonresponse bias, analyses that Minnesota has conducted to determine the representativeness of the respondents may give some insights in to nonresponse bias. First, MDE conducts a logistic regression between survey responders and nonresponders with regard to student age, sex, race or ethnicity, home primary language, and primary disability classification. While the logistic regression found no statistically significant differences beween responding and nonresponding families for most of the demographic characteristics, there was a statistically significant difference with regard to student race or ethnicity. Specifically, families of students who are Black or African American responded to the survey at lower rates (8.7%) than did families of students who were of other races or ethnicities (13.1 to 22.9%). The results of the logistic regression suggest that, although the sample invited to complete the FFY2020 survey was representative of the statewide population of students with IEPs, the survey responders may not be representative of the Black or African American students with IEPs in the state. Generalizations of the survey results should proceed cautiously with respect to student race/ethnicity.

For FFY2021 reporting, MDE will attempt to identify additional processes that could expand the demographics available for the analysis of nonresponse bias. Then, in FFY2022, the new survey monitoring software will be available for use and MDE will be able to fully investigate nonresponse bias for the parent involvement survey.

Last, as the COVID-19 pandemic wanes, Minnesota hopes to return to previously established outreach processes. As in-person meetings and work is made possible, MDE will resume telephone outreach to improve survey response rates, especially among nonresponding or historically marginalized groups.

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

Minnesota does not collect parents’ demographic information but does utilize students’ demographics in the construction of a survey sample. In addition, MDE analyzes survey responses based on students’ demographics after survey data collection is completed.

After survey data collection has finished, MDE uses a logistic regression to compare the demographics of survey responders and non-responders. Given that the overall sample is representative of the population of students with disabilities ages 3-21 in the state, an examination of the response rate by subgroup (responders vs. non-responders) sheds light on whether the survey responses received are representative of the state population. MDE uses five key demographic characteristics of students: age, gender, federal race/ethnicity, home primary language (English vs. not English), and primary disability classification (Autism, emotional disturbance, intellectual disabilities, other health impairments, specific learning disability, speech or language impairment, and all other disabilities combined into a low incidence category) in the logistic regression.

The results of the logistic regression of the FFY2020 survey responses indicated no statistically significant differences between families that did and did not respond to the survey with regard to student age, sex, home primary language, or primary disability classification. There was, however, a statistically significant difference with regard to student race or ethnicity. Families of students who are Black or African American responded to the survey at much lower rates (8.7%) than did families of students who were of other races or ethnicities (13.1 to 22.9%). The results of the logistic regression suggest that, although the sample invited to complete the FFY2020 survey was representative of the statewide population of students with IEPs, the survey responders may not be representative of the Black or African American students with IEPs in the state. Generalizations of the survey results should proceed cautiously with respect to student race/ethnicity.

In addition, as described above, MDE will continue to monitor the response rates for both American Indian and Black students and, when practicable, re-introduce outreach to non-responding families to increase response rates. As was done in the past, MDE will focus on outreach to groups with statistically significantly low response rates. And MDE will work with LEA contacts supporting American Indian and Black students (e.g., American Indian liaisons; Office of Black Student Achievement) when possible to raise awareness of the family survey and its importance to the state and LEAs in planning and student outcomes.

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

NO

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

Minnesota does not collect the demographic data of parents responding to the parent survey. However, based on analyses described above, there is sufficient evidence to conclude that the demographics of the survey sample matched the demographics of the statewide population of students with an IEP between the ages of 3 and 21. In addition, the demographics of the survey responders matched the demographics of the statewide population of students with an IEP between the ages of 3 and 21 with respect to age, gender, home primary language (English vs. not English) and primary disability classification. However, there were discrepancies between the statewide population of students with an IEP between the ages of 3 and 21 and the sample with regard to race/ethnicity. Families of students who are Black or African American responded to the survey at lower rates than did students who were of other races or ethnicities.

Minnesota will continue to explore ways to improve response rates from students in all demographic categories. Those strategies may include resuming outreach to families as soon as practicable, collaboration with LEA contacts supporting American Indian and Black students (e.g., American Indian liaisons; Office of Black Student Achievement), the Special Education Advisory Panel, and external advocacy groups to encourage families to return the surveys.

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

Minnesota uses multiple strategies to ensure that survey results can be generalized to students with IEPs statewide. First, as described above, a representative sample is selected to be within ±1% of the characteristics of the state based on students’ federal race/ethnicity, primary disability, age, and instructional setting. Second, logistic regression is used to determine if there are systematic differences in the demographics of the students whose families did and did not respond to the survey. For the logistic regression, students’ federal race/ethnicity, primary disability, age, gender, and home language are used to test for differences. Last, average survey responses are compared via t-tests or ANOVAs (as appropriate) to determine if family perceptions of school engagement systematically vary based on students’ federal race/ethnicity, primary disability, age, and home language. (Instructional setting is not used in the logistic regression or the t-tests/ANOVAs because of the very small numbers of students in some of the settings.)

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

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

MDE engages in multiple strategies to confirm that the survey outcome is both valid and reliable, including: identifying a representative sample and monitoring representativeness of survey responders during survey deployment.

Representative Sample

Before survey deployment, MDE uses a computerized sampling engine to select a stratified random sample of students to participate in the survey. In 2005, all of Minnesota’s LEAs and charters were assigned to one of five groups, or sampling frame, to participate in the statewide parent survey on a five-year cycle. LEAs were divided in such a way that each group of LEAs and charters collectively enrolled students that represented the state at large. Each survey sampling frame is made up of approximately 80-100 LEAs and charters and approximately 15-35% of the state’s students with IEPs between the ages of 3 and 21. MDE’s sampling method was approved by OSEP and continues to be used by MDE with adjustments made as LEAs merge or charters open or close. Because charters enroll a relatively small proportion of Minnesota’s students, fluctuations in charter enrollments have little overall impact on the representativeness of each year’s sampled students. In FFY2020, 15,844 students from 92 LEAs and charters were included in the sampling frame.

Students are randomly selected from the sampling frame to match the statewide distribution of students with IEPs between the ages of 3 and 21 for four key demographics: federal race/ethnicity, primary disability, instructional setting, and student age (in age ‘bands’). The process is iterative and the sampling engine will add and remove students as needed until the students included in the sample reflect statewide students with IEPs between the ages of 3 and 21. Once a sample is generated, MDE staff compare the distribution of the demographics of the sample to the distribution of the demographics in the state. MDE uses a ±1% criterion to determine if the sample is acceptable: if the sample and the state are within ±1% for a given demographic (e.g., Autism, instructional setting 3) for all of the demographic characteristics, the sample is accepted and survey deployment preparations are made. However, if the sample and the state are outside the ±1% tolerance, then a completely new sample is generated. This process continues until the sample meets the ±1% tolerance. The number of samples that are generated varies from year-to-year but, typically, 3-5 sample-review iterations are needed to identify an appropriate sample. In FFY2020, one sample was generated, compared, and then accepted.

The number of students in a sample varies between 1,500 and 2,500 students each survey year and represents between 10-20% of the students in the sampling frame. In FFY2020, 2,492 students were sampled and represented 15.7% of the students with IEPs in the sampling frame.

Monitoring During Survey Deployment

At least once during the survey deployment, survey responses are retrieved and the demographics of students whose families responded vs. not responded are compared via statistical tests (Chi-squares). Any statistically significant findings are noted and a group or groups of students consistent with those findings are identified for outreach. The goal of the outreach is to improve response rates among families with low response rates. Often, this means outreach for American Indian students, students of color and non-English speaking families, and, occasionally, students from specific primary disability groups (e.g., emotional disturbance). Typical outreach includes phone calls from Hmong, Somali, and Spanish interpreters (contracted for the outreach) during the evening hours when families are more likely to be available. In addition, some MDE Special Education staff may also attempt phone calls during the workday or evenings from the MDE offices. However, the COVID-19 pandemic has negatively affected all outreach activities. In both FFY2019 and FFY2020 administrations of the parent survey, MDE’s offices were closed, which prevented hiring interpreters for telephone outreach. In addition, the COVID-19 pandemic required new technical assistance from Special Education staff to LEAs and charters, so MDE staff were unavailable to phone families in both FFY2019 and FFY2020. Minnesota hopes to reinstitute telephone outreach by interpreters and MDE staff as soon as practicable.

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

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

During community and stakeholder engagement sessions, some concerns were raised about the B8 targets: Although stakeholders want higher rates of parents reporting that their student’s school facilitated parental involvement, stakeholders also understood the difficulty in making substantial or sizeable improvements, especially during a pandemic. During the feedback sessions, community members and stakeholders agreed that the new target of 70.5% was practical but stakeholders also expressed their desire that MDE identify ways to raise that rate over the span of the SPP/APR package.

The percent of Minnesota parents reporting schools facilitated their involvement has remained relatively stable, between 70-72%. Unfortunately, MDE has limited options for outreach to parents because the COVID-19 pandemic has interfered with outreach by MDE staff and/or interpreters. The pandemic has also placed increasing pressure on LEAs and limited their resources to encourage parents to complete the survey. However, MDE is changing the software used to extract a sample and manage deployment and outreach. When the new software is available, LEAs will be better able to anticipate their participation and will be poised to better communicate with parents about the survey and its importance. MDE estimates that the new software will be used for the parent engagement survey submitted in FFY2022. The feedback from community members, the shift in software, and the COVID-19 pandemic resulted in MDE lowering the targets for indicator B8 in the FFY2020 APR.

MDE uses the 25-item National Center on Special Education Accountability and Monitoring Part B Survey with three additional items on perceptions of transition planning, interagency coordination, and access to mental health services. Families respond to all 28 items using a six-point, Likert-type scale which MDE converts to a numeric value for analysis (value is the number in parentheses): very strongly disagree (1), strongly disagree (2), disagree (3), agree (4), strongly agree (5), and very strongly agree (6). Families may also skip any survey items they feel are not applicable and ‘not applicable’ responses are not assigned a value. An average survey response is calculated for each respondent (numeric response values are summed and divided by the number of items to which families responded). Families were identified as reporting the “school facilitated parental involvement” when the average response was equal to or greater than 4.000, as was used in previous administrations of the family engagement survey. Of the 472 families that responded to the FFY2020 family engagement survey, 353 or 74.8% reported that their school facilitated parent involvement as a means of improving services and results for students with disabilities.

Statistical analyses (t-tests or one-way ANOVAs, as appropriate) were conducted to determine if there were systematic differences in parent perceptions of engagement. Average survey scores were compared by student age (3-5 years vs. 6-21 years), student race/ethnicity (students of color or American Indian students vs. White students), home primary language (English vs. not English), and primary disability (Autism, emotional disturbance, intellectual disabilities, other health impairments, specific learning disability, speech or language impairment, and all other disabilities combined into a low incidence category). No statistically significant differences were observed for student age, race/ethnicity, or primary disability. However, no comparisons could be made for home language because the number of families with a home primary language other than English was too small for a viable statistical analysis.

MDE uses three commonly used statistical analyses to assess the reliability and validity of the survey results: Cronbach’s alpha, confidence interval, and margin of error. All three analyses are industry best practices for estimating or assessing the reliability and validity of a survey and survey results. Cronbach’s alpha is commonly used to estimate the internal consistency of a series of related items or questions and insight into how well the items in a survey are measuring the same concept or construct. Reliability estimates can range from 1.0 to 0.0 (zero). The closer the Cronbach’s alpha is to 1 the higher the likelihood that the analyzed items measure the same construct or concept, while values close to 0 suggest that the analyzed items measure different concepts or constructs. Good surveys have Cronbach’s alphas between 0.8 and 0.9 and very good surveys have Cronbach alphas greater than 0.9. The Cronbach’s alpha analysis indicated an inter-item reliability of 0.931 suggesting the survey has a high to very high level of reliability.

A confidence interval estimates how frequently the same survey conducted with the same respondents would have the same result: it’s a measure of consistency. Good surveys have a confidence interval of 95-99% and Minnesota’s FFY2020 survey has a confidence interval of 97.0%. Last, the margin of error establishes upper and lower boundaries of where the true value of the survey results would be. Unlike Cronbach’s alpha and the confidence interval where ‘bigger is better,’ the smaller the margin of error is, the more likely the survey has accurately captured respondent’s true feelings and perceptions and the less likely the survey outcomes are anomalous. Good surveys have margins of error in the 4-8% range. Minnesota’s FFY2020 parent survey has a margin of error of 4.99%, meaning that the percent of parents with favorable experiences with schools is 74.8% ±4.99%, or is between 69.8 and 79.8%.

## 8 - Prior FFY 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.

**Response to actions required in FFY 2019 SPP/APR**

## 8 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

The State did not analyze the response rate to identify potential non-response bias.

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

## 8 - Required Actions

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

In the FFY 2021 SPP/APR, the State must analyze the response rate to identify potential non-response bias, including steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities, as required by the Measurement Table.

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

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

YES

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

78

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 6 | 0 | 423 | 0.00% | 0% | 0.00% | N/A | N/A |

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

YES

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

Minnesota defines ‘disproportionate representation’ as any LEA identified with risk ratio(s) exceeding 2.800 and policies, practices, or procedures that are noncompliant.

In alignment with OSEP’s FFY2016 changes to this indicator, Minnesota has continued to use a minimum cell-size of 20 students with IEPs in the racial/ethnic category of interest for a LEA to be included in calculations for Indicator 9. Of Minnesota’s 501 LEAs in the 2020-21 school year, 78 did not meet the minimum enrollment criteria for any of the Indicator 9 calculations (i.e., did not enroll a minimum of 20 students with IEPs in any of the seven racial/ethnic groups). The remaining 423 LEAs met the minimum enrollment criteria for one or more Indicator 9 calculations.

Minnesota uses a four-step process to identify and address disproportionate representation due to inappropriate identification: Calculate risk ratios; LEA self-review; Correction; and Validation of correction. Step 1, Calculate risk ratios, is summarized below and steps 2, 3, and 4 are summarized in the next section.

Step 1: Calculate risk ratios

LEA-level child count data for the 2020-21 school year were used in risk ratio calculations to identify LEAs with numerical disproportionate representation. And only one year of child count data is used to identify LEAs who exceed the threshold for numerical disproportionate representation. Minnesota uses three risk ratio calculations: the risk ratio, the weighted risk ratio, and the alternate risk ratio. The risk ratio equation compares the special education rates for one racial/ethnic group with the special education rates for students of all other racial/ethnic groups in the LEA:

Risk Ratio = ((number of students in a racial/ethnic group with an IEP / number of students in the same racial/ethnic group enrolled) x 100) / ((number of students in all other racial/ethnic groups with an IEP / number of students in all other racial/ethnic groups enrolled) x 100)

The weighted risk ratio is similar but integrates statewide racial/ethnic group distributions. The risk ratio and the weighted risk ratio are used when the LEA meets the minimum enrollment criteria (cell-size = 20) and the LEA has at least 10 students in the comparison group. If the LEA meets the minimum enrollment criteria (cell-size = 20) but has fewer than 10 students in the comparison group, the alternate risk ratio is used. With the alternate risk ratio, statewide values are substituted for the LEA’s comparison group. The risk ratio equations and calculations are consistent with guidance provided by the IDEA Data Center in their technical assistance guide.

LEAs are identified as having met the numerical threshold for disproportionate representation if: a) both the risk ratio and weighted risk ratio meet or exceed 2.800, or b) the alternate risk ratio meets or exceeds 2.800. Note that both the risk ratio and weighted risk ratio must meet or exceed 2.800; if only one value meets or exceeds 2.800, then numerical disproportionate representation is not identified. In addition, Minnesota uses one year of enrollment data to identify disproportionate representation.

Using the above method, Minnesota identified 6 LEAs with numerical disproportionate representation. Four were identified using the risk ratio and weighted risk ratio and the remaining 2 LEAs were identified using the alternate risk ratio. All 6 LEAs were forwarded to the next step in the process.

Steps 2 (LEA self-review), 3 (Correction), and 4 (Validation of correction) are summarized in the section immediately below.

**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.**

Step 2: LEA self-review

In FFY2020 MDE’s Division of Assistance and Compliance implemented a new policies and procedures review (PPR) to be completed by each LEA identified as meeting the numerical threshold for disproportionate representation. Following a thorough analysis of the state’s data, the Division of Assistance and Compliance was notified of the LEAs that met the numerical threshold for disproportionate representation. Next, MDE’s Division of Compliance staff notified the LEAs of meeting the data threshold and provided a policies and procedures self-review form to be completed by a team of the LEA’s appropriate stakeholders. This new PPR process allows MDE to ask targeted questions of identified LEAs, guide meaningful conversations within LEAs, and partner with LEAs to address any issues of disproportionate representation. The self-review included a series of questions designed to review LEA, policies, procedures, and practices and, once completed, the self-review form was returned to the Division of Assistance and Compliance. A team of MDE program monitoring staff reviewed the LEA’s submitted self-review. If MDE program monitoring staff identified any instances of noncompliance, the LEA would advance to Step 3 (below). In FFY2020 none of the 6 LEAs advanced to Step 3.

Step 3: Correction

LEAs identified in Step 2 would receive a formal notification of findings and work with MDE to develop corrective action plan (CAP) designed to achieve compliance and improve results. MDE’s Division of Assistance and Compliance would provide technical assistance in the development of the CAP. Once developed, LEAs complete the CAP within one year of the notification of findings of noncompliance.

Step 4: Validation of correction

Once the LEA has completed a CAP, the LEA submits evidence of completion to MDE for review. MDE’ Division of Assistance and Compliance staff reviews the evidence of completion to verify the LEA has revised policies, practices, and procedures and is now in compliance consistent with OSEP Memo 09-02.

In FFY 2020, all 6 LEAs identified with disproportionate representation related to this indicator completed the PPR. For the 6 LEAs that completed the PPR self-assessment, none of the LEAs were identified with noncompliant policies, practices, or procedures by MDE staff. MDE has therefore concluded that none of the disproportionate representation identified was the result of inappropriate identification.

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

Overall, Minnesota saw a slight decline in the number of students with IEPs enrolled in the state from the 2019-20 to the 2020-21 school years. This was likely due to the COVID-19 pandemic and its impact on the ability of LEAs to plan for and hold in-person learning (vs. remote instruction) during the 2020-21 school year. However, for school-aged children (5-year-olds in kindergarten and 6- through 21-year-olds), Minnesota saw a slight increase in the number of students with IEPs enrolled in the state. Therefore, it appears that the COVID-19 pandemic impacted the enrollment of students with IEPs who were 3-years-old, 4-years-old, and 5-years-old but not enrolled in kindergarten.

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

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

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 0% | 0% | 0% | 0% | 0% | 0% |

**FFY 2020 SPP/APR Data**

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

YES

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

220

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 16 | 0 | 281 | 0.00% | 0% | 0.00% | N/A | N/A |

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

YES

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

Minnesota defines ‘disproportionate representation in specific disabilities’ as any LEA identified with risk ratio(s) exceeding 3.000 and with policies, practices, or procedures that are noncompliant.

In alignment with OSEP’s FFY2016 changes to this indicator, Minnesota has continued to use a minimum cell-size of 20 students with IEPs in the racial/ethnic category of interest and with a specific disability (e.g., Native Hawaiian or Pacific Islander students with intellectual disabilities; Asian students with orthopedic impairments) for a LEA to be included in calculations for Indicator 10. Of Minnesota’s 501 LEAs in the 2020-21 school year, 220 did not meet the minimum enrollment criteria for any of the Indicator 10 calculations (i.e., did not enroll a minimum of 20 students with the disability in a specific racial/ethnic group). The remaining 281 LEAs met the minimum enrollment criteria for one or more Indicator 10 calculations.

Minnesota uses a four-step process to identify and address disproportionate representation in specific disabilities due to inappropriate identification: Calculate risk ratios; LEA self-review; Correction; and Validation of correction. Step 1 is summarized below and the remaining steps are summarized in the next section.

Step 1: Calculate risk ratios

LEA-level child count data for the 2020-21 school year were used in risk ratio calculations to identify LEAs with numerical disproportionate representation in specific disabilities; note that only one year of child count data is used in the calculations. Minnesota uses three risk ratio calculations: the risk ratio, the weighted risk ratio, and the alternate risk ratio. The risk ratio equation compares the rates of students with a specific type of IEP for one racial/ethnic group with the special education rates for students with the same type of IEP for all other racial/ethnic groups in the LEA:

Risk Ratio = ((number of students in a racial/ethnic group with a specific type of IEP / number of students in the same racial/ethnic group enrolled) x 100) / ((number of students in all other racial/ethnic groups with a specific type of IEP / number of students in all other racial/ethnic groups enrolled) x 100)

The weighted risk ratio is similar but integrates statewide racial/ethnic group distributions. The risk ratio and the weighted risk ratio are used when the LEA meets the minimum enrollment criteria (cell-size = 20) and the LEA has at least 10 students in the comparison group. If the LEA meets the minimum enrollment criteria (cell-size = 20) but has fewer than 10 students in the comparison group, the alternate risk ratio is used. With the alternate risk ratio, statewide values are substituted for the LEA’s comparison group. The risk ratio equations and calculations are consistent with guidance provided by the IDEA Data Center in their technical assistance guide.

LEAs are identified as having met the numerical threshold for disproportionate representation in specific disability categories if: a) both the risk ratio and weighted risk ratio meet or exceed 3.000, or b) the alternate risk ratio meets or exceeds 3.000. Note that both the risk ratio and weighted risk ratio must meet or exceed 3.000; if only one value meets or exceeds 3.000, then numerical disproportionate representation in the specific disability category is not identified. In addition, Minnesota uses one year of enrollment data to identify disproportionate representation in each of the disability categories.

Using the above method, Minnesota identified 16 LEAs with numerical disproportionate representation in specific disabilities. Seven were identified using the risk ratio and weighted risk ratio and the remaining nine LEAs were identified using the alternate risk ratio. All 16 LEAs were forwarded to the next step in the process.

Step 2: LEA self-review, Step 3: Correction, and Step 4: Validation of correction are summarized in section immediately below.

**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.**

Step 2: LEA self-review

In FFY2020 MDE’s Division of Assistance and Compliance implemented a new policies and procedures review (PPR) to be completed by each LEA identified as meeting the numerical threshold for disproportionate representation. Following a thorough analysis of the state data, the Division of Assistance and Compliance was notified of the LEAs that met the threshold for disproportionate representation. In turn, MDE’s Division of Assistance and Compliance notified the LEAs of meeting the data threshold and provided a policies and procedures self-review form to be completed by a team of appropriate stakeholders. This new PPR process allows MDE to ask targeted questions of identified LEAs, guide meaningful conversations within LEAs, and partner with LEAs to address any issues of disproportionate representation. The self-review form included a series of questions designed to review LEA policies, procedures, and practices and, once completed, the self-review form is returned to the Division of Assistance and Compliance. A team of MDE program monitoring staff reviewed the LEA self-review. If MDE program monitoring staff identified any instances of noncompliance, the LEA would advance to Step 3 (below). IN FFY2020, no LEAs advanced to Step 3.

Step 3: Correction

LEAs identified in Step 2 would receive a formal notification of findings and work with MDE to develop corrective action plan (CAP) designed to achieve compliance and improve results. MDE’s Division of Assistance and Compliance would provide technical assistance in the development of the CAP. Once developed, LEAs complete the CAP within one year of the notification of findings of noncompliance.

Step 4: Validation of correction

Once the LEA has completed a CAP, the LEA submits evidence of completion to MDE for review. MDE’ Division of Assistance and Compliance staff reviews the evidence of completion to verify the LEA has revised policies, practices, and procedures and is now in compliance consistent with OSEP Memo 09-02.

In FFY 2020, all sixteen LEAs identified with disproportionate representation related to this indicator completed the PPR. For the sixteen LEAs that completed the PPR self-assessment, none of the LEAs were identified with noncompliant policies, practices, or procedures by MDE staff. MDE has therefore concluded that none of the disproportionate representation in specific disabilities identified was the result of inappropriate identification.

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

Overall, Minnesota saw a slight decline in the number of students with IEPs enrolled in the state from the 2019-20 to the 2020-21 school years. This was likely due to the COVID-19 pandemic and its impact on the ability of LEAs to plan for and hold in-person learning (vs. remote instruction) during the 2020-21 school year. However, for school aged children (5-year-olds in kindergarten and 6- through 21-year-olds), Minnesota saw a slight increase in the number of students with IEPs enrolled in the state. In addition, a comparison of enrollment counts for children from the seven racial/ethnic groups and IEPs in the specific disability categories for 2019-20 and 2020-21 school years shows little variation. Most groups of students had 2020-21 enrollments that were within ±5% of the 2019-20 enrollment counts. Therefore, it appears that the COVID-19 pandemic impacted the enrollment of students with IEPs who were 3-years-old, 4-years-old, and 5-years-old but not enrolled in kindergarten and had little impact on school-aged children.

Minnesota has elected to update the baseline year for indicator B10 because of the substantial revisions made to processes after LEAs have been identified with numerical disproportionate representation. Community members and stakeholders expressed no concerns with this change.

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

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

## 10 - Required Actions

# Indicator 11: Child Find

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 96.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 97.52% | 98.14% | 96.28% | 96.31% | 95.56% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

| **(a) Number of children for whom parental consent to evaluate was received** | **(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 75 | 72 | 95.56% | 100% | 96.00% | N/A | N/A |

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

3

**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.**

Those children included in (a) but not included in (b) represent three records found not to be in compliance for failure to complete the evaluation within 30 school days as required by Minnesota Rule. Citations were issued to LEAs for these three individual student records and correction has been tracked and verified by MDE.

**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).**

The state timeline for evaluations comes from Minnesota Rule 3525.2550 which states the team shall conduct an evaluation for special education purposes within a reasonable time not to exceed 30 school days from the date the district receives parental permission to conduct the evaluation or the expiration of the 14-calendar day parental response time in cases other than initial evaluation, unless a conciliation conference or hearing is requested.

**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.**

MDE has been using online software, the Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, as part of the monitoring process for several years. The MNCIMP software has been determined to be at “end of life” for reliability and usability and is in the process of being replaced. In FFY2020, MDE initiated a revision of monitoring processes and contracted with an external vendor to develop an online system that will support annual statewide record review for indicator data collection. In addition, the new software will better support differential monitoring processes based on LEA needs. However, due to delays in development of the new software, the online system was not yet ready for launch in time to complete the record review for FFY2020. As a result, MDE completed the record review outside of the online system. The process for FFY2020 included generating a random statewide sample for each of the indicators. For Indicator B11, the sample pulled records from the Minnesota Automated Reporting Student System, MDE’s database of all student enrollment records. Records were selected from the most recent statewide enrollment data for students identified as having recently undergone an evaluation or change in special education status. Once the sample was finalized, LEAs were notified and asked to complete a paper review of the record and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. LEAs with identified noncompliance were then formally notified of the noncompliance.

Data for this indicator are gathered from examining records of students newly identified as receiving special education and related services and determining whether the initial evaluation was completed in a timely manner. The FFY2020 data are based on 75 records reviewed from 55 LEAs, comprised of 65 individual districts. The rationale and explanation for the smaller number of records reviewed is provided in the next section.

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

MDE has elected to revise its baseline data at this time because of the substantial changes in MDE’s monitoring process and methodology for data collection. There are concerns that the data collection methods and monitoring process is sufficiently different from those used in the past that it would be difficult to make meaningful comparisons between earlier B11 findings and B11 outcomes moving forward and that the baseline for B11 should be updated so that meaningful year-to-year comparisons can be made. MDE held virtual listening sessions with district leadership and parent advocate stakeholders to gather input on resetting baselines and discuss strategies to increase statewide compliance with this indicator. Stakeholders approved the new baseline and offered suggestions on ways MDE can assist districts with training and implementation to increase compliance as well as raise awareness among parents of compliance affecting student outcomes.

In addition, the data collection for B11 was impacted by the COVID-19 pandemic. To lessen the burden on LEAs, MDE conducted a limited review of records, resulting in a significantly smaller sample size than in years’ past. And while not identified specifically as the reason for noncompliance in the records identified above, LEAs have reported to MDE numerous ways in which the pandemic has impacted child find. LEAs have noted that students switching between synchronous and asynchronous learning has resulted in delaying identification of concerns, conducting interventions and completing evaluations in a timely manner.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 10 | 10 | 0 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

LEAs with identified noncompliance were required to correct all individual student noncompliance and complete Corrective Action Plans (CAPs) as necessary, with a subsequent review of student records, in order to demonstrate the LEA is now correctly implementing Minn. R. 3525.2550, subp. 2(C). As part of the CAP, the LEAs tracked timelines for a minimum of three months to verify the LEA is in 100% compliance with the timeline. The LEAs submitted Letters of Assurance, along with information on the student records that were reviewed, assuring that the LEA is now in compliance. In FFY2019, MDE considered a variety of factors in determining the steps the LEAs must take to demonstrate correction of noncompliance including whether the noncompliance was extensive or found in only a small percentage of files and whether the noncompliance represented an isolated incident in the LEA or reflected a long-standing failure to meet the IDEA requirements. Most of the LEAs with identified noncompliance in FFY2019 had only isolated incidents of noncompliance. One LEA was ordered a CAP for systemic noncompliance with this requirement. MDE has reviewed additional data from subsequent student record reviews conducted as part of the CAP to verify that the LEA is now correctly implementing Minn. R. 3525.2550, subp. 2(C). The LEA with the CAP successfully completed the CAP within the required one year timeframe to demonstrate the LEA is in compliance and now correctly implementing the requirements.

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

Although MDE is currently updating and modernizing the program monitoring software used by LEAs and the state, all record review data from FFY2019 was collected through MDE’s MNCIMP web-based data system. Once noncompliance was identified, it was tracked through the same web-based data system which included a compliance tracking system. For evaluation timelines, when record reviews were completed and data entered into the MNCIMP system, both the date the evaluation was due and the date the evaluation was completed were entered into the system. This allowed MDE to verify that the evaluations had been completed, although they may have been late. If a date the evaluation was completed was missing, MDE required the LEA to submit the Evaluation Report (ER) to demonstrate the evaluation had been completed, although late. If the student was no longer within the jurisdiction of the LEA, the LEA submitted the reason (moved, for example) and the date of the occurrence to MDE in order to release the LEA from further demonstration of correction for that specific student. Based on a review of the data, MDE verified all evaluations had been completed and each LEA with noncompliance reflected in the data the State reported for this indicator had completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

## 11 - Prior FFY Required Actions

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

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

**Response to actions required in FFY 2019 SPP/APR**

In FFY2019, MDE reported 10 findings of noncompliance for B11. In FFY2020, MDE verified that each LEA with identified noncompliance is correctly implementing the specific regulatory requirements as described in the section “Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements” above. MDE also ensured each individual case of noncompliance has been corrected consistent with OSEP Memo 09-02 as described in the section “Describe how the State verified that each individual case of noncompliance was corrected” above.

## 11 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 11 - Required Actions

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

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

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

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

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

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 72.09% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 96.23% | 89.58% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.  | 84 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.  | 3 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.  | 31 |
| 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.  | 31 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays.  | 7 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 31 | 43 | 89.58% | 100% | 72.09% | N/A | N/A |

**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**

12

**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.**

There were a total of twelve records reviewed that were cited for noncompliance because eligibility was not determined and the IEP was not in place prior to the child’s third birthday. Three records were cited solely for not making a timely referral for a Part B evaluation. All evaluations were subsequently completed and all three children are currently receiving Part B services. The LEAs did not provide any additional information other than reporting the LEA did not initiate a timely referral.

There were two records cited in which the eligibility determination was completed late. For one, the eligibility determination was not completed until almost two months after the child’s third birthday. For the other record it was closer to three months after the child’s third birthday when the evaluation was finally completed. Consent for the IEPs were received shortly after the eligibility determinations. As a birth mandate state, the LEAs reported the children continued to receive Part C services until the evaluation was completed. The LEAs also indicated that while the Part B evaluations were initiated in a timely manner, delays occurred in completing the evaluations. Because no additional comments were provided, it is unknown if the delays were due to family or child availability or LEA-related issues.

Finally, the remaining seven records were cited because the IEP was not in place before the child’s third birthday. In all seven instances, the evaluation and eligibility determination was completed and, in most cases, the IEP was developed before the child’s third birthday, but the LEA had yet to receive consent to implement the IEP. The length of the delay ranged from two days to over one hundred days after the child’s third birthday. The LEAs did not identify any specific reasons for the noncompliance. It is possible that some of the delays could have been due to the family simply not providing consent in a timely manner or other family reasons, but the LEAs did not report the delays as such, suggesting the LEAs did not have documentation to support attributing the delay to the family.

**Attach PDF table (optional)**

**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.**

MDE has been using online software, the Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, as part of the monitoring process for several years. The MNCIMP software has been determined to be at “end of life” for reliability and usability and is in the process of being replaced. In FFY2020, MDE initiated a revision of monitoring processes and contracted with an external vendor to develop an online system that will support annual statewide record review for indicator data collection. In addition, the new software will better support differential monitoring processes based on LEA needs. However, due to delays in development of the new software, the online system was not yet ready for launch in time to complete the record review for FFY2020. As a result, MDE completed the record review outside of the online system. The process for FFY2020 included generating a random statewide sample for each of the indicators. For indicator B12 the sample was assembled by extracting records from the Minnesota Automated Reporting Student System, MDE’s database of all student enrollment records. Enrollment records were selected from the most recent statewide enrollment data for children identified as exiting Part C services. Once the sample was finalized, LEAs were notified and asked to complete a paper review of the record and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. LEAs with identified noncompliance were then formally notified of the noncompliance.

Data for this indicator are gathered from examining records of children identified as exiting Part C services. Record reviews included whether the child was referred to Part C fewer than 90 days before their third birthday, if the child was found eligible for Part B services, if the eligibility determination was completed and an IEP in place by the child’s third birthday, and if any delays were due to family or child unavailability. The FFY2020 data are based on reviews of records from 38 LEAs, comprised of 48 individual districts.

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

MDE has elected to revise its baseline data at this time because of the substantial changes in MDE’s monitoring process and methodology for data collection. There are concerns that the data collection methods and monitoring process is sufficiently different from those used in the past that it would be difficult to make meaningful comparisons between earlier B12 findings and B12 outcomes moving forward and that the baseline for B12 should be updated so that meaningful year-to-year comparisons can be made. MDE held virtual listening sessions with district leadership and parent advocate stakeholders to gather input on resetting baselines and discuss strategies to increase statewide compliance with this indicator. Stakeholders approved the new baseline and offered suggestions on ways MDE can assist districts with training and implementation to increase compliance as well as raise awareness among parents of compliance affecting student outcomes.

Furthermore, the data collection for indicator B12 was impacted by the COVID-19 pandemic. To lessen the burden on LEAs, MDE conducted a limited review of records, resulting in a smaller sample size than in years past. And while not identified specifically as the reason for noncompliance in the records identified above, many LEAs reported to MDE that children discontinued Part C or declined Part B services when service delivery shifted from in-person to a virtual platform. Other families declined services because they would be in-person or in a classroom. LEAs also reported children’s, families’ and staff unavailability due to illness or quarantine impacting the ability to meet, complete evaluations or hold IEP meetings.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 5 | 3 | 1 | 1 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

In FFY2019, MDE followed the same process used in previous year, considering a variety of factors in determining the steps the LEAs must take to demonstrate correction of noncompliance including whether the noncompliance was extensive or found in only a small percentage of files and whether the noncompliance represented an isolated incident in the LEA or reflected a long-standing failure to meet the IDEA requirements. All of the LEAs with identified noncompliance in FFY 2019 had only isolated incidents of noncompliance; no LEAs were ordered a CAP for systemic noncompliance with this requirement. A subsequent review of records was only completed if the noncompliance was deemed a systemic issue so in FFY2020, MDE did not complete a review of subsequent records for the five LEAs with identified noncompliance for the purpose of verifying the LEA was correctly implementing the regulatory requirements because MDE believed the LEA was, on the whole, correctly implementing the regulatory requirements. Subsequent clarification of Memo 09-02 has resulted in MDE revising its process to review subsequent data from all LEAs with identified noncompliance. MDE examined data collected in both FFY2020 and FFY2021 for the five LEAs with noncompliance identified in FFY2019. Data was collected from a random sample of student files. A review of the data submitted from each of the five LEAs demonstrated that four of the five LEAs are correctly implementing the regulatory requirements associated with this indicator. MDE is following up with the remaining LEA to ensure compliance.

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

Although MDE is currently updating and modernizing the program monitoring software used by LEAs and the state, all record review data from FFY2019 was collected through MDE’s MNCIMP web-based data system. Once noncompliance was identified, it was tracked through the same web-based data system. For Part C to Part B transition, when record reviews were completed and data entered into the MNCIMP system, both the date the evaluation was completed and the date consent was received for the IEP were entered. This allowed MDE to verify that the evaluations had been completed and the IEPs were in place, although they may have been late. If a date the evaluation was completed or consent was received for the IEP was missing, MDE required the LEA to submit the Evaluation Report (ER), IEP and documentation of consent to demonstrate the evaluation had been completed and the IEP was in place, although late. If the student was no longer within the jurisdiction of the LEA, the LEA must submit to MDE the reason (moved, for example) and the date of the occurrence to release the LEA from further demonstration of correction for that specific student. Based on a review of the data, MDE verified all evaluations had been completed and IEPs in place for each LEA with noncompliance reflected in the data the State reported for this indicator, although late, for any child whose record indicated noncompliance, unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. All correction of individual student record noncompliance was completed within the one year timeframe.

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

## 12 - Prior FFY Required Actions

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

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

**Response to actions required in FFY 2019 SPP/APR**

In FFY2019, MDE reported 5 findings of noncompliance for B12. In FFY2020, MDE verified that four of the five LEAs with identified noncompliance is correctly implementing the specific regulatory requirements as described in the section “Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements” above. MDE is still working with the remaining LEA to demonstrate compliance. MDE also ensured each individual case of noncompliance has been corrected consistent with OSEP Memo 09-02 as described in the section “Describe how the State verified that each individual case of noncompliance was corrected” above.

## 12 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 12 - Required Actions

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

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

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 71.58% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 88.40% | 89.53% | 79.73% | 91.99% | 83.82% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target  | 100% | 100% | 100% | 100% | 100% | 100% |

**FFY 2020 SPP/APR Data**

| **Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition** | **Number of youth with IEPs aged 16 and above** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 68 | 95 | 83.82% | 100% | 71.58% | N/A | N/A |

**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.**

In FFY2020, MDE initiated revision of its monitoring process and contracted development of an online system for conducting an annual statewide record review for indicator data collection, moving away from MDE’s Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system, which was determined to be at “end of life” for reliability. The new software will better support differential monitoring processes based on LEA needs but, due to delays in development, the system was not ready for launch in time to complete the record review for FFY2020. As a result, MDE completed the record review outside of the online system and LEAs were directed to use a paper recording system instead. The process for FFY2020 Indicator 13 record review included generating a random statewide sample from the Minnesota Automated Reporting Student System (MARSS), MDE’s database for student enrollment records. Records were selected from the most recent statewide enrollment data for students identified as enrolled in grade ten or above. Once the sample was finalized, LEAs were notified and asked to complete a paper review of the record and submit the documentation to MDE. MDE reviewed the documentation submitted and verified a random sample of the reviews. LEAs with identified noncompliance were then formally notified of the noncompliance.

Data for this indicator are gathered from examining records of students, grade ten and above, receiving special education and related services and determining whether the IEP includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority. The FFY2020 data are based on reviews of records from 73 districts comprising 67 LEAs.

| **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)**

Minnesota Statute § 125A.08(b)(1) requires that, during grade nine, the student’s IEP must address the student's needs for transition from secondary services to postsecondary education and training, employment, community participation, recreation, and leisure and home living. Compliance for this indicator is determined by examining records for students that have completed grade nine to verify that secondary transition was addressed before the end of grade nine. As a result, because MDE is looking at the grade and not the age of the student, the sample may include students as young as 14 years of age. Prior to FFY2020, MDE gathered data for this indicator through the MNCIMP system and the results were disaggregated by the age of the student. MDE had chosen to include only students ages 16 and up when reporting for this indicator as that was the baseline. For consistency, MDE continued to report only students ages 16 and up even when given the opportunity to change. Now, beginning with FFY2020, as MDE has revised its process for indicator data collection, MDE is choosing to report data better aligned with the requirements for the state and has revised its baseline to reflect the changes. MDE did not analyze data on the ages of the students reviewed for this indicator, but all students have completed the ninth grade. MDE held virtual listening sessions with district leadership and parent advocate stakeholders to gather input on resetting baselines and discuss strategies to increase statewide compliance with this indicator. Stakeholders approved the new baseline and offered suggestions on ways MDE can assist districts with training and implementation to increase compliance as well as raise awareness among parents of compliance affecting student outcomes.

The data for this indicator has been impacted by the COVID-19 pandemic in that the number of records reviewed was significantly fewer than the numbers reviewed in the past. As noted, part of this was due to the change in process but MDE purposely selected a small number of records to be monitored to lessen the burden on LEAs during this time. It is unclear how the actual rate of compliance has been impacted by the COVID-19 pandemic as LEAs did not identify the pandemic as a reason for their noncompliance.

**Correction of Findings of Noncompliance Identified in FFY 2019**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 26 | 24 | 2 | 0 |

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

LEAs with identified noncompliance are required to correct all individual student noncompliance, including develop Corrective Action Plans (CAPs), with a subsequent review of student records as necessary, in order to demonstrate the LEA is now correctly implementing 34 CFR §§300.320(b) and 300.321(b). The LEAs submit Letters of Assurance along with information on the student records that were reviewed, assuring that the LEA is now in compliance. Most LEAs with identified noncompliance in FFY2019 had only one or two records cited and the noncompliance was believed to be an isolated incident. Three LEAs were ordered CAPs to address systemic noncompliance with this requirement. MDE has reviewed additional data from subsequent student record reviews completed by the LEAs and the evidence of completion of CAPs to verify that the LEAs are now correctly implementing 34 CFR §§ 300.320(b) and 300.321(b). Based on a review of the data, all but two of the findings of noncompliance identified in FFY2019 were corrected in FFY2020. Both have subsequently been corrected.

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

Although MDE is currently updating and modernizing the program monitoring software used by LEAs and the state, all record review data from FFY2019 were collected through MDE’s MNCIMP web-based data system. Once noncompliance was identified, it was tracked through the same web-based data system which included a compliance tracking system. For correction of noncompliance, the LEAs needed to submit documentation to MDE as demonstration of correction. Resubmission was required until the LEA could demonstrate correction. If the student was no longer within the jurisdiction of the LEA, the LEA must submit to MDE the reason (moved, for example) and the date of the occurrence to release the LEA from further demonstration of correction for that specific student. Based on a review of the data, all but two of the findings of noncompliance identified in FFY2019 were corrected in FFY2020. For two LEAs, additional submissions were required before correction documentation was accepted by MDE. MDE has since verified that all records with identified noncompliance in FFY2019 were corrected and the LEAs are now in compliance or the student is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

## 13 - Prior FFY Required Actions

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

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

**Response to actions required in FFY 2019 SPP/APR**

In FFY2019, MDE reported 26 findings of noncompliance for B13. In FFY2020, MDE verified that each LEA with identified noncompliance is correctly implementing the specific regulatory requirements as described in the section “Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements” above. MDE also ensured each individual case of noncompliance has been corrected consistent with OSEP Memo 09-02 as described in the section “Describe how the State verified that each individual case of noncompliance was corrected” above.

## 13 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 13 - Required Actions

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

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

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

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

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2013 | Target >= | 25.40% | 25.80% | 26.20% | 26.60% | 26.60% |
| A | 23.39% | Data | 24.86% | 23.24% | 27.14% | 24.49% | 24.82% |
| B | 2009 | Target >= | 66.40% | 66.80% | 67.20% | 67.60% | 67.60% |
| B | 61.90% | Data | 69.25% | 61.71% | 65.67% | 58.75% | 61.12% |
| C | 2009 | Target >= | 78.70% | 79.10% | 79.50% | 79.90% | 79.90% |
| C | 77.60% | Data | 86.78% | 81.14% | 80.05% | 73.62% | 76.58% |

**FFY 2020 Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 18.83% | 20.16% | 21.50% | 22.83% | 24.17% | 25.50% |
| Target B >= | 59.62% | 60.50% | 61.73% | 62.25% | 63.12% | 64.00% |
| Target C >= | 73.43% | 74.69% | 75.96% | 77.22% | 78.49% | 79.75% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 1,478 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 478 |
| Response Rate | 32.34% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school  | 90 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school  | 195 |
| 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) | 14 |
| 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). | 52 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 90 | 478 | 24.82% | 18.83% | 18.83% | Met target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 285 | 478 | 61.12% | 59.62% | 59.62% | Met target | No Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 351 | 478 | 76.58% | 73.43% | 73.43% | Met target | No Slippage |

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

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

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 36.59% | 32.34% |

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

The Post-School Outcomes Survey is currently being deployed using old, out-of-date software and LEAs cannot anticipate or plan for their participation in the Post-School Outcomes Survey. MDE is currently working with a software developer to construct new software that will deploy the Post-School Outcomes Survey. One feature of the new software will be a calendar that allows LEAs to see when they will be scheduled to participate in the Post-School Outcomes Survey. That knowledge, plus additional technical assistance and guidance from MDE, will allow LEAs to anticipate contacting students before the students exit and LEAs will be able to gather student contact information (telephone numbers, social media user names, etc.) to better contact exiters. MDE anticipates that the new software will be deployed for the FFY2023 APR.

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

At the present time, MDE does not have the means to investigate nonresponse bias, largely because of current software limitations. First, the existing survey software limits analysis of survey responses to three demographics: race/ethnicity, primary disability, and gender. And all of those demographic characteristics are currently used in analyses of representativeness. However, MDE is updating the survey deployment software in FFY2023. The new software will allow MDE to examine additional demographic student characteristics for possible instances of nonresponse bias.

It is possible, however, to use some of the students’ demographic characteristics for an examination of nonresponse bias using the Chi-square statistic. Survey responders and non-responders were compared with respect to race and ethnicity\* and for primary disability classification. (\*The population of Native Hawaiian or Pacific Islander students with IEPs in Minnesota is very small: 4 non-responders and 0 responders. Those counts are far too small to be included as an independent group in a Chi-square analysis. As a result, counts of Native Hawaiian or Pacific Islander students were added to the counts of Asian students for the Chi-square test.) While the results of the primary disability classification showed no statistically significant differences between survey responders and non-responders (p>.05), the Chi-square also revealed a statistically significant effect of race or ethnicity on survey response/nonresponse (p<.05). Specifically, very similar response/nonresponse rates were observed for students in most of the racial or ethnic groups (e.g., among Black students, 9.3% were survey responders and 10.5% were survey non-responders) but not among students of American Indian or Alaska Native heritage. Although 3.0% of the American Indian or Alaska Native students were survey responders, American Indian or Alaska Native students were among 6.4% of the survey non-responders.

For FFY2021 reporting MDE will attempt to identify additional processes that could expand the demographics available for the analysis of nonresponse bias. Then, in FFY202, the new survey monitoring software will be available for use and MDE will be able to fully investigate nonresponse bias for the parent involvement survey.

Last, as the COVID-19 pandemic wanes, MDE will work with LEAs to improve their capacity to provide outreach to students during the post-school outcomes survey process. MDE will begin conversations with LEAs to better understand LEAs’ challenges deploying the survey and look for strategies to mitigate those challenges.

**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.**

MDE conducted two sets of statistical tests to determine if: a) the leavers in this year’s sample were representative of the state as a whole, and b) the survey responders were representative of the state as a whole. For both sets of statistical tests, a Chi-square was used with three key demographic characteristics: gender, primary disability, and race/ethnicity. The Chi-square test assesses whether or not two observations (e.g., proportion of the students the state and sample) are independent of each other. If the observations are independent, then there are no systematic differences between the groups of students with respect to the demographic.

Representativeness of the sample

When the demographics of the state’s exiters were compared to the students in the sample, no statistically significant differences were found with respect to student gender, but there were statistically significant outcomes for both race/ethnicity and primary disability. Specifically, more American Indian or Alaska Native and Black or African American students and fewer Asian students were included in the sample pool than would be expected based on statewide proportions (p<.01). In addition, there were more students with emotional or behavioral disorders and other health disabilities and fewer students with autism in the sample pool (p<.01).

Representativeness of the survey respondents

The demographics of the state’s exiters were also compared to the survey responders for gender, race/ethnicity, and primary disability. The Chi-square analyses showed no statistically significant differences between Minnesota’s exiters and the survey responders with respect to gender and primary disability (response rates for both groups included below). However, there was a statistically significant finding for race/ethnicity: there were lower than expected response rates for students who were Asian (state 3.9% vs. 1.9% response rate) and Black or African American (state 13.2% vs. 9.4% response rate) when compared to the distribution of the state’s exiters. There was also a commensurate overrepresentation of White students (71.5% response rate) when compared to White students who exited school (64.7%). The response rates for all racial and ethnic groups is also included below.

Response rates by demographic characteristics
Gender
Female 36.0%; Male 64.0%

Primary Disability
Specific learning disabilities 32.01%; Other health impairments 28.87%; Emotional disturbance 15.27%; Autism 10.88%; Intellectual disability 6.28%; All low incidence disabilities (Deaf and hard of hearing, Orthopedic impairment, Severely multiply impaired, Traumatic brain injury, and Visual impairment combined) 5.86%; and Speech or language impaired 0.84%; no students who were DeafBlind responded to the survey.

Race/Ethnicity
White 71.5%; Hispanic or Latinx 10.5%; Black or African American 9.4%; Two or more races 3.6%; American Indian or Alaska Native 3.1%; Asian 1.9%. No students who were Native Hawaiian or Pacific Islander responded to the survey.

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

NO

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

One challenge with current Post-School Outcomes Survey implementation is the outdated online software being used to deploy the survey. At present, LEAs cannot anticipate when they will participate in the Post-School Outcomes Survey and, as a result, cannot help exiting students anticipate calls during the summer and LEAs cannot gather the most accurate telephone numbers or social media information to connect with students. But, with the new software, LEAs will know when they will be slated for Post-School Outcomes Survey participation. That advanced knowledge will help LEAs prepare for survey deployment in terms of staff capacity, outreach to MDE for support, and maintaining and updating records to contact students after students have left the LEA. MDE will develop expanded technical assistance and supports for LEAs to provide advanced notice to students about the Post-School Outcomes Survey and its importance, allocate staff to deploy the survey, and support staff during deployment. MDE anticipates that the Post-School Outcomes Survey will be deployed using the new software in FFY2023.

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

MDE used a Chi-square test of independence to determine if there were any systematic differences between the state’s exiters and students in the sample pool and between the state’s exiters and survey responders. The Chi-square test assesses whether or not two observations (e.g., proportion of the students the state and sample) are independent of each other. If the observations are independent, then there are no systematic differences between the groups of students with respect to the demographic. Minnesota used the standard p<.05 to identify discrepancies.

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

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

Minnesota’s OSEP-approved sampling frame has been extended to the current SPP/APR. In 2005, all Minnesota LEAs were assigned to one of five groups to participate in the Post-School Outcomes Survey on a five-year cycle. LEAs were divided so that each of the five groups represented the state at-large. As charter LEAs open or close, the membership of the five groups is updated to maintain the representativeness of each group to the state at-large. Because charter LEAs enroll a relatively small proportion of Minnesota students, especially charter LEAs that serve students with IEPs who are 14 years of age or older, there is very little fluctuation in the overall representativeness of the five groups to the state at-large.

Each year, all of the leavers from the LEAs in the survey group are given the opportunity to respond to the Post-School Outcomes Survey. Because leaving students aren’t sampled from the sampling frame, the demographic composition of the leavers may not exactly reflect the demographics of the state. LEA special education directors are responsible for oversight of their LEA’s survey completion. In mid-April of each year, participating LEAs’ special education directors receive student names, demographic information, and placement in the student’s last year of school for all the leavers. Directors also receive detailed instructions to access the online software to contact students, record attempts to administer the survey, and record respondents’ answers.

In FFY2020, a total of 80 LEAs and 1,461 students were included in the Post-School Outcomes Survey sampling frame. Sixty-six (82.5%) of the LEAs had one or more leavers respond to the Post-School Outcomes Survey, with a total of 478 students responding to the survey (32.34% response rate). Of the remaining 983 students, LEA staff made attempts to contact 734 of the students (approximately 50% of the students in the sampling frame), but were unable to reach the students. Fourteen (14) LEAs did not make attempts to contact students and accounted for 249 students (17% of the sampling frame). MDE staff made multiple contacts with LEAs, especially those LEAs who had not recorded any survey completions, in order to provide technical assistance with data collection. As happened in FFY2019, the COVID-19 pandemic may have negatively impacted LEA staffing capacity and hindered or prevented LEA staff from collecting survey responses. LEAs reported being unable to complete interviews with students because the phone line had been disconnected or students were not interested in participating in the survey.

| **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 | 2021 MN PSOS survey for APR submission\_Accessible |

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

Updates to Minnesota's Post-School Outcomes Survey

Minnesota’s minimum wage is higher than the federal minimum. In addition, Minnesota’s minimum wage rates are structured by employer size: large employers are required to pay higher wages ($10.08 per hour as of 01/01/2021) compared to small employers ($8.21 an hour as of 01/01/2021). In addition, Minnesota’s two largest cities, St. Paul and Minneapolis, have higher minimum wages than the rest of the state. As of 01/01/21, employees working in St. Paul earn $11.00 per hour at a small business and $12.50 per hour at a large business. And, as of 01/01/2021, employees working in Minneapolis earn $14.25 per hour at large businesses and $12.50 per hour at small businesses. Both St. Paul and Minneapolis are gradually increasing minimum wages to $15.00 per hour (large businesses) by 2022 (Minneapolis) and 2023 (St. Paul) with yearly, incremental increases in the minimum wage based on cost of living adjustments.

Because Minnesota has three minimum wages that are tied to location of employment, in FFY2018 MDE adjusted the Post-School Outcomes Survey to accurately capture respondent’s pay rate for the determination of competitive employment. Respondents are asked where they work (St. Paul, Minneapolis, or any other location) and then are piped to a follow-up question about hourly pay rates. Each year, MDE updates the hourly pay rate questions with the current year’s rates. The attached, revised survey has no new questions and the only changes made, compared to last year, were for the hourly pay rates in the three locations (St. Paul, Minneapolis, and all other locations).

COVID-19 Pandemic

In addition, the COVID-19 pandemic has had an impact on LEAs’ capacity to deploy the Post-School Outcomes Survey. While large LEAs may employ staff over the summer months who can attempt to interview students, many smaller LEAs and charters do not employ staff in the summer. That means that smaller LEAs and charters must try to interview students during the end of the school year (mid-April to the last day of employment) or at the beginning of the next school year (mid-August to the close of the survey), and both timeframes are challenging to districts without COVID-19 or trying to deploy the Post-School Outcomes Survey.

Software Limitations

As mentioned above, the Post-School Outcomes Survey is currently being deployed using old, out-of-date software and LEAs cannot anticipate or plan for their participation in the Post-School Outcomes Survey. MDE is currently working with a software developer to construct new software that will deploy the Post-School Outcomes Survey. One feature of the new software will be a calendar that allows LEAs to see when they will be scheduled to participate in the Post-School Outcomes Survey. That knowledge, plus additional technical assistance and guidance from MDE, will allow LEAs to anticipate contacting students before the students exit and LEAs will be able to gather student contact information (telephone numbers, social media user names, etc.) to better contact exiters. MDE anticipates that the new software will be deployed for the FFY2023 APR.

Between LEAs not being able to anticipate when they will participate in the survey and the pandemic limiting LEAs available resources to contact students, especially in the summer, and the pandemic’s apparent negative impact on students’ post-secondary opportunities, MDE has elected to lower the targets. In the coming years, as the new software is available and the pandemic wanes, MDE hopes to reach more students (improve the response rate) and observe a rebound in the percent of students enrolled in higher education or participating in competitive employment.

Targets

The COVID-19 pandemic and the out-of-date software have severely restricted MDE’s ability to improve response rates and the pandemic has seriously limited LEAs’ ability to survey students. Because of the severe impact of the COVID-19 pandemic has had on indicator 14, MDE has lowered targets to FFY2020 levels so that potential mitigation strategies can be identified and LEAs have sufficient staffing resources to deploy the survey during the summer.

## 14 - Prior FFY 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.

**Response to actions required in FFY 2019 SPP/APR**

## 14 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

The State did not analyze the response rate to identify potential non-response bias, as required by the Measurement Table.

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

## 14 - Required Actions

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

In the FFY 2021 SPP/APR, the State must analyze the response rate to identify potential non-response bias and identify steps taken to reduce any identified bias to promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school, as required by the Measurement Table.

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

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

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

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

## 15 - Indicator Data

Select yes to use target ranges

Target Range is used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1 Number of resolution sessions | 5 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1(a) Number resolution sessions resolved through settlement agreements | 2 |

**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 FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 9.09% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 20.00% | 20.00% | 15.00% - 20.00% | 20.00% - 25.00% | 20.00%-25.00% |
| Data | 10.53% | 9.09% | 33.33% | 33.33% | 36.36% |

**Targets**

| **FFY** | **2020 (low)** | **2020 (high)** | **2021 (low)** | **2021 (high)** | **2022 (low)** | **2022 (high)** | **2023 (low)** | **2023 (high)** | **2024 (low)** | **2024 (high)** | **2025 (low)** | **2025 (high)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target >= | 20.00% | 25.00% | 20.00% | 25.00% | 20.00% | 25.00% | 20.00% | 25.00% | 20.00% | 25.00% | 20.00% | 25.00% |

**FFY 2020 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2019 Data** | **FFY 2020 Target (low)** | **FFY 2020 Target (high)** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 4 | 11 | 36.36% | 20.00% | 25.00% | 36.36% | Met target | No Slippage |

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

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

OSEP notes that the State's FFY 2020 data is the same data the State reported in its FFY 2019 SPP/APR. Additionally, the State did not resubmit a IDEA Part B Dispute Resolution Survey during the resubmission period.

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range is used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1 Mediations held | 23 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.b.i Mediations agreements not related to due process complaints | 20 |

**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 FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 71.43% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 75.00% - 80.00% | 80.00% - 90.00% | 80.00% - 90.00% | 80.00% - 90.00% | 80.00%-90.00% |
| Data | 96.88% | 92.68% | 84.62% | 91.67% | 92.59% |

**Targets**

| **FFY** | **2020 (low)** | **2020 (high)** | **2021 (low)** | **2021 (high)** | **2022 (low)** | **2022 (high)** | **2023 (low)** | **2023 (high)** | **2024 (low)** | **2024 (high)** | **2025 (low)** | **2025 (high)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target >= | 80.00% | 90.00% | 80.00% | 90.00% | 80.00% | 90.00% | 80.00% | 90.00% | 80.00% | 90.00% | 80.00% | 90.00% |

**FFY 2020 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2019 Data** | **FFY 2020 Target (low)** | **FFY 2020 Target (high)** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 25 | 27 | 92.59% | 80.00% | 90.00% | 86.96% | Met target | No Slippage |

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

While MDE offered mediation services continuously throughout the 2019-20 fiscal year, requests for mediation services declined during the COVID-19 pandemic, presumably due to the closure of Minnesota public school buildings in spring 2020 and other exceptional circumstances related to the COVID-19 pandemic. MDE continued to provide mediation sessions through virtual means during spring 2020.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

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

OSEP notes that the State's FFY 2020 data is the same data the State reported in its FFY 2019 SPP/APR. Additionally, the State did not resubmit a IDEA Part B Dispute Resolution Survey during the resubmission period.

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

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

**Measurement**

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

**Instructions**

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

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

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

Overview of the Three Phases of the SSIP

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

*Phase I: Analysis:*

- Data Analysis;

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

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

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

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

- Infrastructure Development;

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

- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

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

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

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

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

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

## 17 - Indicator Data

**Section A: Data Analysis**

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

Minnesota’s State-identified Measurable Result (SiMR) is the statewide percentage of American Indian and Black students with IEPs, combined, who graduate in the 6-year cohort.

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

NO

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

NO

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

NO

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

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

YES

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

Continuing the SSIP without modifications was based on: improvements in the 6-year cohort graduation rates of American Indian and Black students with IEPs, increases in LEA’s capacity to implement their evidence based program (EBP), increases in MDE’s capacity to support LEAs, and LEAs “scaling up” implementation of their EBP.

Improvements in 6-year cohort graduation rates

Minnesota’s SiMR, the 6-year cohort graduation rate of American Indian and Black students with IEPs (combined) have continued to improve. Since FFY2013, when work on the SiMR and SSIP began, the 6-year cohort graduation rate of American Indian and Black students with IEPs has improved from 53.1% to 59.0%2 (FFY2020), an improvement of 6.3%. In addition, each year of SiMR reporting, Minnesota’s 6-year cohort graduation rate of American Indian and Black students with IEPs has exceeded MDE’s targets (58.00% in FFY2020). The improvements in the 6-year graduation rates of American Indian and Black students with IEPs suggests that no modifications are needed at this time.

Increases in LEAs’ capacity to implement the EBP

Implementation capacity refers to resources, activities, and systems that are needed or necessary for an organization to successfully install, implement, and sustain an EBP. While some organizations may have sufficient capacity to implement an EBP without making adjustments, most organizations require some changes to effectively install, implement, and sustain the EBP over time. LEA capacity includes having an effective structure for team metings, a process for selecting EBPs, the capacity to collect a wide range of data relevant to the EBP and using that data to inform decision making.

Each year LEAs would assess their own capacity to implement the EBP and report those results to MDE. Over the span of work on the SSIP, all of the LEAs maintained or improved their capacity to implement the EBP in their schools: Two LEAs maintained a high level of capacity (94% in both FFY2019 and FFY2020) while two other LEAs showed improvement in their capacity (one LEA showed FFY2019 to FFY2020 improvements from 63% to 74% while another LEA improved from 89% to 100%). The high level of capacity demonstrated by all LEAs suggests that LEAs have procedures, practices, and protocols in place to implement the EBP and sustain that implementation over time. Additional information on assessing LEAs’ capacity is provided later sections of this report.

Increases in MDE’s capacity to support LEAs

In addition to LEAs increasing their capacity to support implementing the EBPs, MDE increased their capacity to support the LEAs. MDE was also making changes to existing policies, practices, and procedures to better support LEAs in their work. Each year, MDE staff actively supporting LEAs would also assess MDE’s capacity to support the LEAs and, from FFY2019 to FFY2020, MDE showed an improvement in the capacity from 95% to 98%. Additional information on assessing MDE’s capacity to support LEAs is shared in later sections of this report.

Scaling up implementation of EBPs

“Scaling up” refers to increasing the size and scope of EBP implementation. At the LEA level this often means increasing the number of students served, schools participating in the EBP, or both. The decision to scale up should be based on data. Ideally, the LEA would have some data that would indicate the LEA is implementing the EBP well and that expanding the implementation is warranted. Often, LEAs rely on fidelity data, or the degree to which staff are implementing the program as it was intended as a factor in scaling up decision making. When assessments show high fidelity it generally indicates that the program is being implemented well and that scaling up implementation to additional schools or students would not me detrimental to the overall program.

LEAs used three separate and interrelated measures of implementation fidelity and, as described in later sections of this report, there were some pandemic-related disruptions to collecting some of the fidelity data. In addition, the self-reported assessments of fidelity showed a slight decrease in from FFY2019 to FFY2020. However, the third fidelity measure was a review of implementation records. That fidelity assessment showed a slight increase in the quality of implementation. The discrepancy between self-assessed fidelity and the review of records could be the result of staff rating themselves lower than was warranted. And the review of program records suggested that LEAs were implementing the EBP sufficiently well to justify scaling up and serving more students at more schools.

**Progress toward the SiMR**

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages)*.***

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 53.28% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 58.00% | 59.00% | 60.00% | 61.00% | 62.00% | 63.00% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of American Indian and Black students with IEPs (combined) graduating in the 6-year cohort** | **Number of American Indian and Black students with IEPs, combined in the 6-year cohort** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| \*[[5]](#footnote-6)1 | 1,776 | 59.00% | 58.00% | 59.40%2 | Met target | No Slippage |

**Provide the data source for the FFY 2020 data.**

Minnesota’s SiMR continues to be the statewide percentage of American Indian and Black students with IEPs, combined, who graduate in the 6-year cohort. The graduation rate is calculated as: the number of American Indian and Black students with IEPs, combined, who graduate in 6 years divided by the number of American Indian and Black students with IEPs, combined, in the 6-year cohort, multiplied by 100.

The shift in the SSIP reporting timeline from April to February has impacted Minnesota’s SSIP/SiMR data reporting. Because Minnesota’s graduation data is not ready until late March, after the APR is submitted, Minnesota must begin reporting lag-year graduation data (students who graduated in the 2019-20 school year) starting in FFY2020. In addition, targets for each reporting year have been adjusted to align with the shift in Minnesota’s reporting. Last, the summary for Indicator 17/the SSIP has also been shifted to align with the data and reporting and will emphasize work completed between August 2020 and July 2021.

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

Because students can graduate during the summer months, Minnesota collects end-of-year outcomes (graduation, continuing, drop out, unknown) for students each fall from the LEAs. After end-of-year data is submitted to MDE, end-of-year student outcomes are compared to the following year’s enrollment data to verify the accuracy of the outcomes. While graduation rarely needs verification, the continuing, drop out, and unknown groups benefit from the verification step. For example, if a student drops out at the end of a school year but enrolls in the following school year, that student’s status should be “continuing” and it is updated to reflect that status. Conversely, if a student is expected to continue their education at the end of a school year but the student does not enroll in the following year, that student’s status should be “dropped out” and, again, the student’s status will be updated.

The verification of students’ status is generally completely by late March. At that time, special education staff review the data and calculate the 6-year cohort graduation rate for American Indian and Black students with IEPs.

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

YES

**Describe any additional data collected by the State to assess progress toward the SiMR.**

MDE began work on the SiMR approximately 5 years ago. MDE initially established partnerships with four LEAs—Duluth, Minneapolis, Osseo, and St. Paul—to improve graduation outcomes for American Indian and Black students with IEPs. The partnerships and activities were guided by principles from the Active Implementation framework (State Implementation and Scaling-up of Evidence-based Practices, or SISEP, Center).

MDE’s SSIP work includes both formative and summative evaluation elements designed to assess the short-, mid-, and long-term outcomes at LEAs and at MDE. The evaluation emphasized:
-LEA capacity building;
-MDE capacity building;
-student, family, and community engagement; and
-improved outcomes for American Indian and Black students with IEPs participating in the SSIP work, especially graduation.

Consistent with the Active Implementation framework, the evaluation included examination of implementation efforts, fidelity of implementing the EBP, and outcomes for students (e.g., credit accrual, graduation). As part of the evaluation, MDE, the LEAs, and/or the evaluators regularly collected information on a wide range of topics including:
-the capacity of LEAs and MDE to support implementation of the EBP;
-mentor’s knowledge acquired during EBP training;
-mentor self-assessments of their implementation of the EBP;
-observations of mentor’s implementation of the EBP;
-number of mentors that have been trained;
-number of mentors who have and have not been paired with students;
-number of students who have and have not been paired with mentors;
-student self-reported engagement with school;
-perceptions of current students and graduates of the EBP and its ability to support positive student outcomes (focus groups);
-assess LEA staff learning of the Active Implementation framework, especially the importance of implementation fidelity (focus groups and/or interviews);
-review of the observations made by MDE staff during LEA-MDE meetings (completed after the meeting);
-number of coaching and training events held in each LEA; and
-number of student participants who graduate.

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

NO

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

YES

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

MDE, in consultation with the Minnesota Department of Health, developed guidance for all public LEAs to decide on the most appropriate learning model (in person vs. hybrid vs. remote or distance) for the 2020-21 school year. In fall 2020, all of the partner LEAs began the 2020-21 school year in distance learning but, as the number of COVID-19 cases in the LEA’s county decreased, LEAs were able to shift to hybrid (e.g., 1/2 classroom in person, 1/2 classroom distance learning with students changing their learning location on alternate days) or in person learning. As COVID-19 cases increased or decreased in their county, LEAs made adjustments to their learning model congruent with MDE’s and Health’s guidance.

The COVID-19 pandemic interrupted or interfered with three pieces of MDE’s evaluation plan: student focus groups and survey; completion of the student Self-Engagement Instrument; and mentors’ Practice Profile for one LEA.

-Student Self-Engagement Inventory (SEI): Partner LEAs had limited time, capacity, and resources during the 2020-21 school year. Much of the mentors’ and LEA staff time was devoted to getting students connected to the internet, troubleshooting space issues (e.g., multiple youth in the same household having dedicated workspaces for classes), delivering care packages to families, and encouraging students to attend classes. When faced with the above challenges, LEA staff decided to focus on students’ education rather than emphasizing the completion of the SEI. And, while some students participating in the EBP did complete the SEI, the number of students who did so was so small that meaningful aggregation or analysis could not be completed.

-Student focus groups: Similar to the SEI, the external evaluators were unable to schedule student focus groups during spring 2021. MDE and external evaluators consulted with LEAs about the feasibility of the focus groups in early 2021. The conversation included various creative ways to attempt the focus groups but, in the end, the challenges, timing, and barriers of completing student focus groups virtually during a pandemic created additional stressors to an already difficult year for students, families, and LEA staff. As a result, student focus groups were not completed during the 2020-21 implementation.

Because student voice is a critical feature of MDE’s SSIP, MDE will continue to work with LEAs to capture student perspectives on the EBP and their school experience in the future.

-Practice Profiles: While mentors from 3 of the 4 partner LEAs completed the Practice Profile assessment (a measure of fidelity described more fully below), mentors from one of the LEAs did not submit any Practice Profile data. At this time, it is unclear why one LEA had difficulty completing the Practice Profiles, but MDE anticipates it was directly related to the significant work and stressors created by the COVID-19 pandemic. As described above, LEA staff and mentors focus on providing educational services and the EBP to students rather than completing fidelity measures.

-Mentor Self-Assessments: While mentors completed self-assessments in fall 2020, the stressors associated with the COVID-19 pandemic interrupted spring data collection. As described above, LEA staff and mentors focused on providing education and EBP support to students rather than fidelity measures.

In general, LEAs made minimal errors in submitting evaluation data via email (e.g., student-mentor scaling form) or on web-based collection systems (e.g., practice profiles). When suspected errors were found on data submitted via email, MDE could quickly and easily follow-up with the LEA to confirm the accuracy of the data and/or make needed corrections. When other suspected errors were found, the external evaluators would follow-up with LEAs and the LEA coordinators to confirm the data.

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

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

https://education.mn.gov/MDE/dse/sped/fed/plan/

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

NO

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

Briefly, and as reported in earlier SSIP reports, MDE and the partner LEAs:
-independently identified an EBP using SISEP’s hexagon tool;
-planned for and implemented the EBP in their LEA on a small scale;
-worked towards implementing the EBP with fidelity; and
-scaled up their implementation of the EBP to other schools or settings.

MDE and the partner LEAs were in a no-cost extension year of a State Professional Development Grant that was obtained to support the SSIP. As a result, much of the work summarized below was a continuation of previous years’ work and the established infrastructure needed no improvements. However, as happened in earlier years, there were minor changes such as onboarding new staff at the LEAs and MDE and shifting EBP service models (dedicated vs. embedded mentors) in the LEAs. In addition, all of the work completed on the SSIP was embedded within a Plan-Do-Study-Act cycle of continuous improvement. LEAs, MDE, and their other partners would plan work, implement the plan, study the outcome, and act on changes needed or desired to improve implementation of the EBP.

There were 4 collaborating groups in Minnesota’s work on the SSIP: MDE, the four partner LEAs, the Institute on Community Integration at the University of Minnesota-Twin Cities (purveyor of the EBP), and Systems Improvement Group, the external evaluator (also at the University of Minnesota-Twin Cities). The four partners formed a feedback system to inform each other, collect feedback, and support the overall work of implementing the EBP. For example, partnership with the purveyor of the EBP meant that LEAs had access to high-quality training, but also meant that LEAs could provide feedback to the purveyor about the training successes and suggestions for improvement. In addition, while LEAs forwarded evaluation data to the external evaluator, the evaluator also returned the data to LEAs in aggregate and disaggregate forms so that LEAs could contextualize their progress within the context of all LEAs.

Each fall, MDE held informational meetings with the 4 collaborating groups. MDE, the EBP purveyor, external evaluators, and the 4 LEAs gave updates on their work, successes and challenges, and next steps. In fall 2020 the meeting was virtual instead of in person. In prior years, there was also an opportunity for ‘job alike’ conversations in which persons with the same responsibilities (e.g., EBP coordinators, data experts) could discuss successes and challenges unique to their role in the SSIP across LEAs. MDE scheduled time for questions and concerns from all participants. Last, MDE set the stage for the upcoming year.

MDE structured their work with the partner LEAs using the Active Implementation ‘linked teams’ approach: multiple teams are constructed and do work on ‘their level.’ Those teams included: School Implementation Teams, District Implementation Teams, MDE’s District Implementation Teams, MDE’s Transformation Zone Team, and MDE’s Core Team. Teams met to discuss the work and, when they encounter an issue or barrier that they cannot solve, escalated the work to a team at a higher level. The team at the higher level attempted to reduce or remove the barrier and communicated outcomes to the referring team.

Schools and LEAs constructed teams that best suited the EBP, its implementation, and LEA resources. MDE’s District Implementation Teams were constructed so that each of the 4 teams had a lead and experts in data, facilitation, and the Active Implementation framework. The 4 team leads formed the Core Team and the experts in data, facilitation, and the Active Implementation framework formed corresponding work groups in each of those topics. These subject matter teams elevated and addressed challenges or barriers across LEAs and developed technical assistance and/or professional development for MDE’s participating staff.

MDE- and LEA-District Implementation Teams met on a mutually agreed upon schedule to discuss data, implementation strategies, activities for student and family engagement, scaling up, and barriers and possible solutions. MDE also used the meetings as an opportunity to coach LEAs on elements of the Active Implementation framework (e.g., that implementation drivers are integrated and compensatory). During the 2020-21 year, all Implementation Team meetings were virtual. Post-meeting, MDE District Implementation Teams would document their work through District Visit Summaries, including critical discussions, use of implementation, and other items relevant to the LEA’s work and Active Implementation.

The one modification in implementation infrastructure was the year-long goal for LEAs: a shift from actively supporting EBP implementation to sustainability. MDE’s District Implementation Teams gradually withdrew support from the LEAs so that LEAs could work independently in the following years. MDE did provide support, when needed, but emphasized “handing off” implementation to LEAs for their continued work in coming years. Part of this “hand off” included LEAs being responsible for collecting implementation, effort, and outcome data without reporting that information to MDE. MDE will only have access to one student outcome – 6-year graduation rate among American Indian and Black students with IEPs – and will report on those outcomes among the 4 original partner LEAs in subsequent SSIP reports. As MDE looks forward to the next years of the SSIP, MDE will begin scaling up the number of LEAs implementing the EBP. Additional information on scaling up is presented below.

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

As described above, the only change in MDE’s infrastructure was supporting LEAs to independently sustain their work implementing the EBP with little support from MDE. Unfortunately, MDE will need 1-2 more years to elapse before the impact of LEAs’ continued work implementing the EBP can be identified. Specifically, as the LEAs continue to graduate American Indian and Black students with IEPs, MDE can report on the 6-year cohort outcomes.

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

NO

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

N/A. At this time, MDE has not implemented any new infrastructure or improvements to existing infrastructure.

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

Check & Connect

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

In Check & Connect, adult mentors are paired with students who may not be progressing toward graduation. Approximately once every 1-2 weeks, the mentor “checks” on student’s progress in school: attendance, disciplinary or behavioral referrals, and academic progress (e.g., assignment completion, credit accrual) then “connects” with the student in a one-on-one meeting to see that the student’s academic needs are being met. During the meeting, mentors and students may discuss recent school- or class-related data (e.g., attendance, disciplinary referrals) or work on identifying strategies for improvement, supports needed or desired, and/or general conversation about school and the importance of a high school diploma. The goal is for mentors to understand the student’s progress in school and their academic or social-emotional needs and help the student to get those needs met. The assumption of Check & Connect is that a relationship between the adult mentor and a student will help students engage or re-engage with their education, promote successful course completion and academic accrual, and decrease dropouts/increase graduation. Check & Connect is most effective when mentors and students are a dedicated pair for at least two years, especially when students are mobile or highly mobile. Mentors may follow students as they transition between schools or LEAs during their mentor-mentee relationship.

In addition to meeting with students, the Check & Connect program encourages regular communication between the adult mentor and the student’s family. Quite often, families of students who may be struggling in school receive mostly or only negative communications from the school. Check & Connect encourages mentors to connect with families frequently and to communicate and celebrate their student’s successes, no matter how small. Mentors can also become a liaison between the school and the family and help the family navigate any challenges the family is facing that might impact their student’s education.

Central to Check & Connect is the belief that other adults in the school environment should be trained on the Check & Connect program. By training others—principals, school social workers, and other administrative and educational staff—about the Check & Connect program, many adults in the school environment can support mentors’ work and identify school or LEA policies that may interfere with mentoring or the student-adult dyad. For instance, schools may have a policy that interferes with students being pulled out of a class (or classes) to attend student-mentor “connect” meetings. By training administrators on the goals and outcomes of the Check & Connect program, administrators can help identify and modify school policies to support Check & Connect implementation at the school.

In addition, Check & Connect encourages schools and LEAs to have a Check & Connect coordinator. The coordinator is responsible for observing and monitoring multiple mentors, providing professional development and coaching, and generally supporting mentor’s implementation of Check & Connect. Both Check & Connect coordinators and mentors can be “dedicated” (i.e., their only role in the school or LEA is to provide Check & Connect mentorship to students or coordination of the Check & Connect program) or “embedded” (i.e., the adult has one or more roles at the school in addition to providing mentorship to a student or coordination of Check & Connect). Both implementation models are valid and will depend on LEA size, number of schools implementing Check & Connect, number of students being served, number of mentors trained, etc.

**Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.**

As described above, the Check & Connect program actively supports training not only a Check & Connect coordinator but also training other adults and staff at the school or LEA. The rationale for this additional training is that, once others have an understanding of what Check & Connect is and how it works, other adults and the Check & Connect coordinator can identify school or LEA policies, practices, or procedures that might interfere with implementation of Check & Connect. Once those policies, practices, or procedures are identified, trained staff can modify, alter, or update them to allow successful implementation of Check & Connect.

Also, as described above, the Check & Connect program encourages mentors to connect with students’ families. Mentors can liaise between families and the school or LEA and can help families understand the importance of a high school diploma for their student. That knowledge and understanding can help families to better support their student staying in school.

In addition, one fundamental element of Check & Connect is that students, especially those who may drop out, are more likely to be successful when the students have a positive relationship with one or more adults at the school. The Check & Connect training helps mentors to begin building a positive relationship with one or more students. Because mentors and students discuss the student’s school-related data, both parties have an understanding of “where the student is at.” Mentors and students can use that information to strategize and problem solve to work through gradual student improvement and positive outcomes. And the rapid cycle of weekly meetings allows mentors to intervene and provide support early and often so that students can solve or address small problems before they become big ones. As mentors and students develop the positive relationship, students can engage or re-engage with school and eventually accrue credits and complete requirements needed for graduation.

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

Three separate measures were used to assess and monitor fidelity of implementation: Check & Connect Self-Assessment, the Check & Connect Practice Profiles, and the Check & Connect Fidelity Survey Measure. Each measure is described below with a brief description of the outcomes in the 2019-20 data collection cycle.

The Check & Connect Self-Assessment is a 10-item rubric and mentors rate their mentoring (e.g., building trusting relationships between the mentor and student and/or their family), checking (e.g., monitoring student data weekly), connecting (e.g., providing timely interventions), and engaging with families (e.g., mentor engages with families). Mentors rate themselves on a scale from 1 (not happening) to 4 (things are in place with evidence that it occurs). Mentors typically rated themselves twice per year in the fall and in the spring, but the COVID-19 pandemic interrupted collecting the Self-Assessment results in spring 2021. Although mentors completed the Self-Assessment anonymously, mentors used a persistent pseudonym so that the Check & Connect coordinators and external evaluators could track improvements or variations in mentors’ implementation fidelity.

While there is no spring 2021 self-assessment data, a comparison can be made between the spring 2019 and fall 2020 reporting cycles. Fifty mentors in three of the four partner LEAs completed the self-assessment 2020. For the four subscales, there is a small to substantial decrease in the percentage of mentors reporting that “things are in place with evidence that it occurs” (the best possible self-rating) from fall 2019 to fall 2020. Mentoring decreased slightly (78% in 2019; 71% in 2020), engagement also showed a slight decrease (56% in 2019; 53% in 2020), connect had a moderate decrease (67% in 2019; 47% in 2020), while check had a substantial decrease (91% in 2019; 64% in 2020). It’s unclear why there was a decrease in mentors’ ratings on the self-assessment from 2019 to 2020, although the decreases could be due to changes in mentors (e.g., mentors electing to remove themselves from the Check & Connect program, shifting from dedicated to embedded models or vice versa), the inability of one LEA to participate in the self-assessments, and/or changes mentors experienced in other parts of their teaching or educational assignments.

Last, mentors also completed the Check & Connect Practice Profiles once per year; mentors that began the program in the fall completed their Practice Profile in November and mentors that were trained after November completed their Practice Profile in February. To complete the Practice Profile, mentors reviewed 10 behaviors essential to Check & Connect and determined their level of proficiency: proficient, developmental (skill is emerging), or needs improvement (additional professional development and/or coaching is needed). Once mentors completed the Practice Profile, they reviewed the results with their Check & Connect coordinator. The Practice Profiles are summarized in terms of the percent of proficient ratings (# of items marked proficient/total number of items).

From the 2019-20 to 2020-21 school years, there was a general decrease in the percent of mentors with high rates of proficiency: In 2019-20, 41% of the mentors were 80-100% proficient but, in 2020-21, only 36% of the mentors were 80-100% proficient. Mentors who rated themselves as 60-79% proficient remained steady: 35% in 2019-20 and 36% in 2020-21. The remaining mentors (34% in 2019-20 and 27% in 2020-21) had lower rates in proficiency (below 60%).

While the Self-Assessment and Practice Profiles are both self-reported, the Check & Connect Fidelity Survey Measure is a 5-item assessment of mentors’ documentation completed by Check & Connect coordinators. The Fidelity Survey Measure is a less subjective assessment of the degree to which mentors are implementing Check & Connect with fidelity. Check & Connect encourages mentors to document their interactions with students (discussing staying in school, goal setting, meeting notes), checking student data, connecting with students, and any attempts at family engagement. Check & Connect coordinators reviewed a random sample of their mentors’ records and, using a yes (present)/no (absent) scale, recorded whether or not the mentor entered data, determined the student’s risk, shared the data with the student, discussed staying in school, and engaged with families. Samples were generated and reviewed monthly from October through March. The number of sampled records depended on mentors’ caseload, but the goal was for coordinators to review approximately 30% of the documentations each month.

During the 2019-20 school year, one or more records were reviewed from 89 mentors across all four partner LEAs. Overall, 32% of the mentors consistently achieved 80% or higher fidelity for all of their records that were reviewed with 67% of the mentors achieving the 80% or higher fidelity on at least one record that was reviewed. And fidelity ratings remained somewhat consistent across the data collection period: 66% fidelity in October 2019, and 68% fidelity in February 2020. The lowest fidelity rate (52%) was observed in December 2019. While that low fidelity rate may indicate a more lax approach to mentors implementing Check & Connect, it is also plausible that the traditional 7-10 day winter break at the end of December interrupted mentors’ and/or students’ availability to meet. Interestingly, mentors with three or more assigned students had slightly higher fidelity of implementation than did mentors with 1 or 2 students. Might the improved fidelity among mentors with more students reflect their ability to practice their Check & Connect skills more often, or might mentors with 3 or more students have skill sets best aligned with Check & Connect implementation? At this point, the reason for the higher rates of fidelity among mentors with 3 or more students is not clear and may be investigated more in the future. Last, the percent of mentors with 80% or greater fidelity for all records in 2019-20 (32%) was an 18% increase over the 2018-19 school year.

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

The Student-Mentor Scaling data is a MDE-developed instrument to capture the scope of an LEA’s implementation of Check & Connect. While LEAs were able to track the number of students being served and the number of mentors with training, there was no existing form or instrument to share that information with MDE. Therefore, MDE created the Student-Mentor Scaling form (an Excel spreadsheet) to collect: a) number of students being served (new, continuing, re-entering, those without a mentor, and those exiting), b) the number of mentors (trained vs. continuing; serving students vs. not currently serving students), and c) the number of buildings in which Check & Connect was being implemented. LEAs completed the form three times per year and submitted the data to MDE via email.

The number of students receiving Check & Connect services remained stable: 194 students at the beginning and 191 at the close of the school year. The number of LEA staff mentoring students in Check & Connect increased from 88 to 93 over the span of the school year. There was also an increase in the number of buildings at which Check & Connect was being implemented: 17 to 22. In general, data from the Student-Mentor Scaling form suggests that, as LEAs were transitioning to a sustainability model, they continued to show some growth of the Check & Connect program.

The District Capacity Assessment is a SISEP tool designed to identify organizational, competency, and leadership strengths and opportunities for improvement when implementing an EBP like Check & Connect. The District Capacity Assessment is completed by LEA staff involved in the implementation of an EBP: staff rate 27-items of implementation as present, somewhat present (elements may be missing or in process) or absent. Since 2020, all LEAs participating in the SSIP have used the District Capacity Assessment version 7. In spring 2021, LEAs completed a virtual District Capacity Assessment with their staff. Two of the LEAs maintained high scores while the remaining two LEAs showed improved scores on their District Capacity Assessment.

The Regional Capacity Assessment is a SISEP tool to quantify the degree to which regional education agencies can effectively support efforts. The Regional Capacity Assessment refers to the systems, activities, and resources necessary for a regional educational agency to support LEA implementation of an EBP. MDE uses the Regional Capacity Assessment to identify which MDE systems, activities, and resources are supporting LEAs and which systems, activities, and resources could benefit from additional attention or work. A subset of the MDE Transformation Zone team participated in each Regional Capacity Assessment: staff rate 28 items on a present, somewhat present (elements may be missing or in process) or absent scale. The results of the Regional Capacity Assessment showed an overall gain, from 95% in 2020 to 98% in 2021. MDE’s scores on the leadership, organization, and stage-based functioning subscales remain very high (100% each) and MDE demonstrated gains in the competency subscale (83% in 2020 to 94% in 2021).

District Implementation Focus Groups were used to gather perspectives and opinions about implementation of Check & Connect, including: strengths and weaknesses, the impact of the COVID-19 pandemic on their EBP work, data use, parent and family engagement, and sustainability. Approximately 10 individuals from the 4 LEAs participated in one of 4 focus groups held on a virtual meeting platform. The results of the focus groups were:
-The strengths of the Check & Connect program were consistency of the mentors and mentors as a family resource. Mentors’ persistence and commitment to helping students motivated students to persist in their academic journey. In addition, mentors were a key connection between families and the school. Parents reached out to mentors for assistance navigating the school system, solving problems, and accessing school resources, especially as learning models changed over the course of the 2020-21 school year.
-One of the most salient aspects of the Check & Connect program is the consistency of the mentors. Their persistence and commitment to helping students and keeping them on track to graduate motivates the students to persist in their academic journey.
-Mentors are a key connection between families and the school, and parents often reach out to mentors for assistance to navigate the school system, solve problems, and access school resources, especially as learning models changed over the course of the 2020-21 school year.
-Challenges experienced during the 2020-21 school year included difficulties getting buy-in from school leadership; hiring challenges, especially when union contracts interfere with hiring a person qualified for a Check & Connect role; and, pushback during building level budget discussions.
-The COVID-19 pandemic was challenging for Check & Connect teams. Check & Connect staff invested time in: socially distanced porch visits with students (with and without care packages); facilitating distance learning for students, including access to the internet and workstations (e.g., tablets or computers); remaining in contact with students whose families moved; student perceived stigmas of economic and/or health emergencies (students not staying in contact with their mentor because they were embarrassed about their circumstances); establishing rapport with students new to Check & Connect; widening gap in mentors’ skills (some mentors improved, others struggled to maintain fidelity to the program); and a decline in data collection as a result of barriers introduced by the pandemic (enumerated above).
-In general, LEAs found the Student-Mentor Scaling form, the Practice Profiles, and the Fidelity Survey Measure to provide the LEA and/or the coordinator with helpful information to keep the Check & Connect program on track. LEAs had mixed feelings about the student Self-Engagement Instrument: while some LEAs felt it was an important tool to begin conversations with students, others felt that results often didn’t align with students’ school performance.
-Focus group participants felt that the pandemic pushed them to maintain or increase their stakeholder and family engagement. As mentioned above, mentors spent time helping families and acting as an all-purpose resource when families experienced barriers navigating the school system. In addition, participants reported wanting more teachers and educational staff to participate in the Check & Connect program, especially staff in special education and staff dedicated to the education of persons of color or American Indian students.
-When asked about sustainability of the Check & Connect program, one participant suggested that all staff should receive training about the importance of connections with students. This participant felt that, once staff understood how change can be initiated and supported through a positive adult-student relationship, all student support programs would thrive. Participants also felt that the embedded implementation model was more sustainable. LEAs have also made efforts to integrate the Check & Connect program into their LEA’s strategic plan, obtain external grants to expand the program, and share program successes with school principals to leverage additional buy-in.
-Focus group participants also called out several strategies as important for the success of the Check & Connect program, including: having a dedicated coordinator to support mentors and inform school and LEA leadership; investing in building a system that reduced dependency on a single person and emphasized continuity planning; keeping school and LEA leadership informed on successes and resources to address building-level barriers; and MDE’s assistance using Active Implementation.

In sum, data from multiple sources suggest that the SSIP work is progressing satisfactorily and should be continued.

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

The four LEAs that have partnered with MDE – Duluth, Osseo, Minneapolis, and St. Paul – are now implementing their EBP independently with as-needed support from MDE and MDE will identify new LEAs to partner with to move the SSIP work forward. One issue is that MDE will likely be using a new strategy or strategies to identify potential partner LEAs. The four LEAs that MDE has partnered with were identified because they all had a) high numbers of both American Indian and Black students with IEPs, and b) low graduation rates among American Indian or Black students with IEPs. But requiring both criteria limits the number of potential LEA partners and often limits the geography of the LEAs: MDE tends to find high rates of both American Indian and Black students in metropolitan areas of the state while LEAs in more rural locations are ineligible because they lack enrollment counts in one of the targeted groups of students. As a result, MDE is exploring partnerships with LEAs that have high enrollment counts in either American Indian or Black students with IEPs. Doing so will allow MDE to bring EBPs, Active Implementation, and MDE staff support to LEAs that might not otherwise receive this type of technical assistance. MDE has already identified two LEAs with larger populations of American Indian students with IEPs and is in the process of identifying two more. In addition, MDE is actively searching for a partner LEA with a larger population of Black students with IEPs.

In accordance with the Active Implementation framework, MDE will coach LEAs will use the hexagon tool to identify an EBP that will increase graduation rates of American Indian or Black students with IEPs. Once identified, MDE will support LEAs as they plan for and implement the EBP in their school(s). As was done with the original four LEAs, MDE will identify staff to support this work and put interlinked support teams in place, with an emphasis on facilitation, Active Implementation, and Data, to support LEAs in their work.

As alluded to above, MDE has begun identifying districts and will report on other preliminary tasks in the FFY2021 APR.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

In preparation for the FFY2020 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than fifty individuals from multiple racial/ethnic groups and tribal nations participated in community meetings (additional information demographics below) including members from the following groups:

-Minnesota’s Special Education Advisory Panel (SEAP). SEAP members include parents of students with IEPs, legal advocates, and representatives from LEAs, disability specific organizations, and institutes of higher education. SEAP’s mission is to provide guidance to MDE about the education of students with IEPs and the policies, procedures, and activities developed and implemented by MDE.

-Minnesota Parent Training and Information Center (PACER). PACER provides a wide range of resources, assistance, and publications to families of children with disabilities and is funded by the U.S. Department of Education’s Office of Special Education Programs.

-PACER’s Special Education Advocacy Group (PACER-AG). PACER-AG is an ad hoc group of disability advocacy organizations and parent leaders that PACER convenes 2-3 times a year to discuss statewide special education issues. Typically there are presentations from the Minnesota Department of Education, the Minnesota Disability Law Center, and Coalition for Children with Disabilities who provide updates on their work, and the advocacy organization representatives have the opportunity to share any trends they are noticing based on their work with families.

-Minnesota Administrators for Special Education (MASE) Board of Directors. MASE’s objective is to promote professional leadership, provide opportunities for members to improve services for students with IEPs across Minnesota, and to advance legislative priorities that support students with IEPs in all stages of their lives. MASE’s mission is to “build strong leaders who work on behalf of students with disabilities.”

-Tribal Nations Education Committee (TNEC). TNEC’s goal is to advance the overall educational experience of all American Indian students in Minnesota. TNEC’s membership includes representatives from all 11 Tribal Nations (Chippewa, Ojibway, and Sioux) who have been appointed by their tribal governments.

-Minnesota’s special education directors (approximately 55 unique special education directors who serve and support one or more LEAs).

-Staff in MDE’s Division of Special Education (approximately 30 individuals) and relevant staff on the Early Childhood Special Education team (approximately 6) and the Division of Assistance and Compliance (approximately 8).

Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored an Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Indicator Guide included an overview of the goals and uses of the SPP/APR and information on the 17 APR indicators including data source(s), timeline for data collection, calculations (if appropriate), current and/or historical data (in tabular and graphic formats), and MDE’s proposed targets. MDE included proposed targets in the Indicator Guide because the planning committee felt conversations with stakeholders would be more productive if stakeholders were providing feedback on proposed targets rather than trying to come to consensus on targets. During meetings with community members and stakeholders, participants were encouraged to provide feedback on the proposed targets, suggest improvements to the targets, and/or propose alternative targets.

MDE held virtual meetings in October (14 SEAP members, 9 PACER staff, and 7 PACER-AG members), November (6 MASE members), and December (15 TNEC members) to discuss the APR with stakeholders. MDE shared the Indicator Guide with participants one week prior to each meeting. During the meeting, participants had the opportunity to ask questions about information in the Indicator Guide, give feedback on the proposed targets, suggest improvements to the targets, propose alternative targets. In addition, facilitators encouraged participants to share any other thoughts they might have on the indicators including strategies to achieve the targets, considerations for future changes or adaptations, and COVID-19 and post-COVID-19 considerations. Meetings were facilitated and supported by members of Minnesota Management and Budget’s Management Analysis Division and/or MDE Division of Special Education staff. After the meeting, all notes were collated and organized by indicator and by comment type (i.e., target, strategy, other).

Also in December, an overview of the APR was shared with all special education directors during a regularly scheduled, virtual director’s forum. MDE’s Indicator Guide was also shared with over 300 special education directors and other administrative staff via the director’s listserv. All readers of the listserv were invited and encouraged to provide feedback on Minnesota’s SPP/APR in a manner that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours.

The Guide was also forwarded to all SEAP members and internal special education division staff in mid-December. Both groups were invited and encouraged to forward feedback on the APR using a method that was comfortable to them: by email, telephone, an anonymous online form, or during virtual office hours. And SEAP members were given a third opportunity to provide feedback, this time on revised targets, in January 2022 prior to submission of the APR.

MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and laid the groundwork for doing so during the meetings to discuss the APR. With COVID-19 health guidelines, all SEAP meetings and Special Education Directors’ Forums since March 2020 have been virtual, and access to the public through this format has been maintained. The FFY2020 SPP/APR will be made available to the general public on the MDE website and will be communicated annually through a broad array of web-based and other agency communication networks. MDE will link reports to the Office of Special Education Programs’ SPP/APR public reporting website so the final document is accessible to a general audience. The public availability of information contained in the APR further enables stakeholders to provide feedback to MDE and examine state and district level performance.

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

As described above, MDE continues to engage members of the Special Education Advisory Panel, special education directors, members of the Tribal Nations Education Committee, members of the Special Education Higher Education forum, Indian Home School Liaisons, members of the Minnesota Administrators for Special Education, and MDE staff in SSIP work and feedback.

As described in earlier SSIP reports, stakeholders internal and external to MDE, including multiple members of partner LEAs, have provided continuous input on the implementation of the evaluation plan as well as on the development of specific evaluation data collection instruments and the annual data collection schedule. District team stakeholders have been involved in both formal and informal feedback processes since 2017. MDE will continue to work with internal and external stakeholders and community members to gather feedback on the new phase of the SSIP work, consistent with the guidance established by OSEP.

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

NO

**Describe how the State addressed the concerns expressed by stakeholders.**

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

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

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

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

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 17 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

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

**Name:**

Kirsten L. Rewey

**Title:**

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**Submitted on:**

04/27/22 2:33:50 PM

# ED Attachments

 

1. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection [↑](#footnote-ref-3)
3. Percentage blurred due to privacy protection [↑](#footnote-ref-4)
4. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-5)
5. [↑](#footnote-ref-6)