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

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

**For reporting on   
FFY 2021**

**Minnesota**

U.S. Department of Education seal

**PART B DUE February 1, 2023**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

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

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. The Minnesota Department of Education (MDE) anticipates that the COVID-19 pandemic will continue to impact data and data collections during the 2022-23 school year and beyond and will affect SPP/APR reporting in future years.

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

505

**General Supervision System:**

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

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 a revision of its monitoring process and contracted to develop an online system (Stepwell MN) for 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 have been completed entirely through the new Stepwell MN online system. Correction of noncompliance also was completed and tracked via the Stepwell MN system for the first time.  
  
Outside of indicator data collection, MDE is moving toward a risk-based, cyclical monitoring process. LEAs have been divided into five cohorts. MDE will analyze risk data annually to identify LEAs with a 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 understand better 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 and targeted technical assistance and coaching for the LEA.  
  
MDE's fiscal monitors work to ensure that Part B and Part C 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 annual 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 comprehensive 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 various state financial data systems, MARSS, and the general ledger from the LEA to select samples related to time and effort, procurement, proportionate share, 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 forms to contain appropriate data, or making corrections within the Electronic Data Reporting System (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 a 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 a 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 LEAs are encouraged to use mediation, facilitated team meetings, conciliation or another mutually agreed upon alternative process to resolve disputes over the identification, evaluation, educational placement or provision of FAPE to an infant, toddler or student with a disability. Parents and school staff can request that MDE assign an impartial mediator or facilitator to hold a mediation or facilitated team meeting to assist them in resolving disagreements at any point in the special education process. Parents and LEAs may also file a due process complaint and request an impartial due process hearing to resolve disputes. Information about resolving conflicts in special education is available on MDE's website, including forms to request mediation, a facilitated team meeting or a due process hearing; 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 training to administrative law judges as well as to the Minnesota Special Education Mediation Service mediators and facilitators.   
  
MDE's special education complaint system is designed to ensure that all children with disabilities are provided FAPE. Parents, individuals, or organizations may file a signed, written complaint with MDE if they believe that an LEA has violated a state or federal special education law or rule. Before filing a complaint, MDE encourages parties to first contact the LEA's special education director for possible resolution and suggests parties consider mediation or a facilitated team meeting instead of or in addition to the complaint process. An optional complaint form is available on the MDE website. When MDE receives a complaint, an investigator reviews the written complaint and contacts the complainant to discuss the claims and facts in order to determine the issues to be investigated. Within 60 calendar days from the date the complaint is received, MDE investigates and issues a written decision resolving the issues raised by the complaint unless exceptional circumstances necessitate an extension of the time limit. If the LEA is found to be in violation of special education law, corrective action is ordered to address any educational harm to the student(s) and to ensure that appropriate services are provided in the future through measures such as compensatory services for students or training for LEA staff. Through active follow-up, MDE ensures that corrective action is implemented 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 (SSIP). 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. Special education staff also 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 for those 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  
  
The Early Childhood Special Education (ECSE) team uses a variety of mechanisms to provide TA and support to ECSE leaders and providers. The MDE and Minnesota Centers of Excellence websites are utilized as public sources of information. The ECSE Team provides annual leadership forums, with one tailored to the needs of new leaders. Members of the ECSE team hold monthly informational calls for program leaders, provide TA and support in response to questions and concerns raised by local programs, and develop guidance documents and webinars to address foundational statewide needs. Through our ECSE email address, local programs 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 and receive updates, training, and TA providing LEA-level 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, 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 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, educator workforce development, teacher induction, 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 its 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 830 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 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. And the 2020 grant supports increasing and retaining the number of American Indian special education teachers in the state.   
  
Other vehicles for professional development in the Division of Special Education include:  
-Special Education Directors' Forums. Prior to the pandemic, the forums were in-person and 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. MDE is currently exploring the possibility of returning to in-person or hybrid meetings (some participants in-person will others participating virtually) for at least some of the forums;   
-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 positive behavioral supports and the legal requirements for the use of restrictive procedures, discipline protections for students with disabilities, 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 law for general education teachers and students in nonpublic schools, and common misconceptions about 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's 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 other professional organization-sponsored events. The division's dispute resolution team members also provide training on special education and school discipline law to LEAs upon request or as part of corrective action resulting from a special education complaint.  
  
Early Learning Services  
  
The Early Childhood Special Education (ECSE) team has participated in a variety of intensive technical assistance initiatives related to providing a high-quality, data-driven comprehensive system of personnel development (CSPD). Through workgroups focused on recruitment and retention, pre-service training, in-service professional development, and personnel standards, the CSPD analyzes collected data and stakeholder input to identify gaps in skills, knowledge, and resources, including professional development (PD) opportunities. To align state and national resources, the CSPD recommended adopting the National EI/ECSE standards as Minnesota's ECSE licensure standards. The CSPD has aligned existing foundational supports and innovation opportunities (Pyramid Model, Classroom Engagement Model, and Evidence-Based Quality Intervention Practices) to these standards as well as the National Recommended Practices.  
  
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 TA 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 include 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 engage 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 FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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)**

NO

**Number of Parent Members:**

27

**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. Parents joined special education directors, advocates and staff from advocacy groups, members of SEAP, and staff from MDE and other Minnesota organizations during the community listening sessions and office hours.   
  
During the listening sessions and office hours, MDE staff launched two anonymous, confidential, voluntary polls in the virtual meeting spaces. One poll focused on each attendee's role during their participation at the meeting: parent of a child with a disability, parent advocate, SEAP member, PACER staff, representative of an advocacy organization, LEA member, or MDE or other state agency staff. Attendees could make as many selections as they wanted to describe their role. The second poll focused on attendees' racial or ethnic background. Attendees could select up to 6 descriptors to describe their racial or ethnic heritage. Because both polls were voluntary, attendees may not have responded to one or both polls. In addition, both polls used a check-all-that-apply response format so attendees could identify themselves as belonging to multiple roles or multiple racial or ethnic groups. Because the check-all-that-apply format was used, the percentages reported in the paragraphs below will not sum to 100%.   
  
MDE's goal for the FFY2021 feedback sessions was to increase overall participation in the community listening sessions, and that goal was met. From FFY2020 to FFY2021, MDE was able to more than double the total number of participants in the listening sessions from 52 to 134. In addition, the number of parent participants also doubled, from 13 to 27. And nearly one-third (32.9%) of the FFY2021 listening session attendees identified themselves as a parent. It is important to note that, although MDE was able to increase the overall number of participants and parent participants, the very large majority of the session attendees self-identified as White (93.6%). Few attendees identified as Hispanic or Latino (6.4%), American Indian or Alaska Native (2.6%), Black (1.3%) or Asian (1.3%). And none of the attendees identified as Native Hawaiian or Pacific Islander.  
  
As participants in the community listening sessions and office hours, parents had the same opportunities to ask questions, provide feedback on proposed targets, and suggest TA or data analysis strategies as all the other attendees. In addition, at the end of each listening session, additional methods of providing feedback (email or call the facilitator) were described, and all attendees were encouraged to contact the facilitator with further thoughts. Individuals who registered for the listening sessions but did not attend received a follow-up email. In the email, registered non-attendees were encouraged to contact the facilitator by email or phone with questions, comments, or suggestions on the session and reminded that additional office hours and community listening sessions were available for discussion.

**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.**

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 two years. During the onboarding and orientation process, members receive 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 build their skill set gradually.  
  
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 time on the agenda 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, Tribal Nations Education Committee) 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 their progress, 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), equity and 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 focus area 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. Community members, especially parents, often want to take a slightly different approach to data or implementation programs than what MDE reports in the APR. For example, Minnesota's SSIP 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. 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 North American Indian and First Nations ancestry: in Minnesota, many North American Indian students are federally defined as Hispanic/Latino or 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/mdeprod/idcplg?IdcService=GET\_FILE&dDocName=PROD047102&RevisionSelectionMethod=latestReleased&Rendition=primary. The page also includes a form through which members of the public could comment on any or all of the initially proposed targets and progress made thus far. The form can be accessed here: https://education.mn.gov/mdeprod/idcplg?IdcService=GET\_FILE&dDocName=PROD047103&RevisionSelectionMethod=latestReleased&Rendition=primary  
  
Each summer, MDE updates the Indicator Guide with the most up-to-date data and information available. The Indicator Guide is also made accessible and shared on the MDE website by late summer. Also during the summer, the schedule of community listening sessions is made public via the MDE website. The community listening session schedule includes both daytime and evening sessions for each indicator group to accommodate a wide variety of schedules. Contact information for accessing the sessions and for comment(s) or ideas in lieu of the sessions is also made available. In addition to sharing the community listening session schedule with the general public, targeted outreach for the community listening sessions is made to advocacy and parent groups.   
  
Each fall (September and October) the community listening sessions are held. Sessions are facilitated by MDE staff (the Part B Data Manager) with additional staff to take notes, launch polls (the mechanism for collecting information on participant’s role and race/ethnicity), and provide support to attendees, as needed. Upon completion of the sessions, all notes and the contents of the in-session chats are analyzed and summarized for key elements and themes. The findings of the community listening sessions is shared with MDE staff, Minnesota’s special education directors, and members of the Special Education Advisory Panel. Members of the Special Education Advisory Panel are asked to provide feedback on the listening session outcomes and suggest action items for MDE’s work.   
  
After submission of the SPP/APR and the clarification period, MDE uses Minnesota’s determination status plus feedback from the Special Education Advisory Panel to guide additional work to improve targets, data analysis, improvement strategies, and progress made.

**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 – engaging with stakeholders, making adjustments, and updating stakeholders – has already begun. Last, MDE will continue to update the Part B 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 will be shared on MDE's website to keep the public informed of MDE's work and the results of public engagement. One 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.

**Reporting to the Public**

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

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

The State has not publicly reported on the FFY 2020 (July 1, 2020-June 30, 2021) performance of each local educational agency (LEA) located in the State on the targets in the State's performance plan as required by section 616(b)(2)(C)(ii)(I) of IDEA. There are several indicators with data that exceeds a five-year monitoring cycle. Specifically, Indicator 8 reflects data from 2008-09 for several LEAs and Indicator 11 reflects data from 2016-17.

## Intro - Required Actions

While the State has publicly reported on the FFY 2020 (July 1, 2020-June 30, 2021) performance of each LEA located in the State on the targets in the State's performance plan as required by section 616(b)(2)(C)(ii)(I) of IDEA, those reports did not contain, as specified in the OSEP Response, all of the required information. There are several indicators with data that exceeds a five-year monitoring cycle. With its FFY 2022 SPP/APR, the State must provide a Web link demonstrating that the State has fully reported to the public on the performance of each LEA located in the State on the targets in the SPP/APR for FFY 2020. In addition, the State must report, with its FFY 2022 SPP/APR, how and where the State reported to the public on the FFY 2021 performance of each LEA located in the State on the targets in the SPP/APR.

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

## 1 - Indicator Data

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

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 90.00% | 90.00% | 90.00% | 90.00% | 86.00% |
| Data | 60.76% | 61.18% | 62.30% | 63%[[2]](#footnote-3) | 90.78% |

**Targets**

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 7,116 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) |  |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) |  |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 57 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 723 |

**FFY 2021 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma** | **Number of all youth with IEPs who exited special education (ages 14-21)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 7,116 | 7,896 | 90.78% | 86.50% | 90.12% | Met target | No Slippage |

**Graduation Conditions**

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

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. 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. The definition of a diploma was established through 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 of the FFY2021 school year. Although all students were able to return to their classrooms and a traditional educational model during the 2021-22 school year, the 2020-21 school year (pre-vaccine) saw multiple interruptions: students transitioned between distance, hybrid (attending class in-person and distance learning on alternate days) and in-person learning throughout the school year. Those interruptions in the educational model and instructional delivery may have resulted in disruptions in learning and may have interfered with students' ability to complete all academic requirements during the 2021-22 school year in order to graduate.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

Data Source

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

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

Measurement

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

Instructions

*Sampling is not allowed.*

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

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

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

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

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

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

## 2 - Indicator Data

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

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 4.25% | 4.20% | 4.15% | 4.15% | 10.00% |
| Data | 4.60% | 4.80% | 4.82% | 4.42% | 8.29% |

**Targets**

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 7,116 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) |  |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) |  |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 57 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 723 |

**FFY 2021 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to dropping out** | **Number of all youth with IEPs who exited special education (ages 14-21)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 723 | 7,896 | 8.29% | 9.70% | 9.16% | Met target | No Slippage |

**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 requires 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; 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/guardian 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)**

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 81.11% |
| Reading | B | Grade 8 | 2020 | 68.36% |
| Reading | C | Grade HS | 2020 | 56.30% |
| Math | A | Grade 4 | 2020 | 80.97% |
| Math | B | Grade 8 | 2020 | 67.59% |
| Math | C | Grade HS | 2020 | 48.42% |

**Targets**

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

**Targets: Description of Stakeholder Input**In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 11,572 | 10,331 | 9,447 |
| b. Children with IEPs in regular assessment with no accommodations | 9,112 | 7,713 | 6,298 |
| c. Children with IEPs in regular assessment with accommodations | 952 | 702 | 470 |
| d. Children with IEPs in alternate assessment against alternate standards | 801 | 779 | 743 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 11,569 | 10,325 | 8,606 |
| b. Children with IEPs in regular assessment with no accommodations | 7,938 | 6,537 | 4,651 |
| c. Children with IEPs in regular assessment with accommodations | 2,129 | 1,812 | 690 |
| d. Children with IEPs in alternate assessment against alternate standards | 788 | 782 | 754 |

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

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

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 10,865 | 11,572 | 81.11% | 95.00% | 93.89% | Did not meet target | No Slippage |
| **B** | Grade 8 | 9,194 | 10,331 | 68.36% | 95.00% | 88.99% | Did not meet target | No Slippage |
| **C** | Grade HS | 7,511 | 9,447 | 56.30% | 95.00% | 79.51% | Did not meet target | No Slippage |

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

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 10,855 | 11,569 | 80.97% | 95.00% | 93.83% | Did not meet target | No Slippage |
| **B** | Grade 8 | 9,131 | 10,325 | 67.59% | 95.00% | 88.44% | Did not meet target | No Slippage |
| **C** | Grade HS | 6,095 | 8,606 | 48.42% | 95.00% | 70.82% | Did not meet target | No Slippage |

**Regulatory Information**

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

**Public Reporting Information**

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

The State makes the results of statewide assessments available on the Minnesota Report Card webpage, found here: https://rc.education.mn.gov/#assessmentsParticipation/orgId--999999000000\_\_groupType--state\_\_test--allAccount\_\_subject--M\_\_accountabilityFlg--Y\_\_year--trend\_\_grade--all\_\_categories--specialEd\_\_p--27/orgId--999999000000\_\_groupType--state\_\_test--allAccount\_\_subject--R\_\_accountabilityFlg--Y\_\_year--trend\_\_grade--all\_\_p--1e7  
  
In addition, parents and families can alter the settings on the Minnesota Report Card to find a specific group or groups of students, LEA, or school using this resource, which is also available on the MDE website:  
https://education.mn.gov/mdeprod/idcplg?IdcService=GET\_FILE&dDocName=PROD070708&RevisionSelectionMethod=latestReleased&Rendition=primary

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

The State appears to have made a typographical mistake in entering the baseline data for Math group A (80.97% vs. 80.79%). That error has been corrected.

## 3A - Prior FFY 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.

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

The State appears to have made a typographical mistake in entering the baseline data for Math group A (80.97% vs. 80.79%). That error has been corrected.

## 3A - OSEP Response

The State has revised the baseline for this indicator for Math group A (4th grade), using data from FFY 2020, and OSEP accepts that revision.

## 3A - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3B - Indicator Data

**Historical Data:**

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 10,064 | 8,415 | 6,768 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 2,513 | 1,391 | 1,410 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 72 | 55 | 52 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 10,067 | 8,349 | 5,341 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 3,038 | 915 | 414 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 268 | 79 | 20 |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 2,585 | 10,064 | 25.41% | 26.00% | 25.69% | Did not meet target | No Slippage |
| **B** | Grade 8 | 1,446 | 8,415 | 16.57% | 17.00% | 17.18% | Met target | No Slippage |
| **C** | Grade HS | 1,462 | 6,768 | 20.77% | 21.00% | 21.60% | Met target | No Slippage |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 3,306 | 10,067 | 30.64% | 31.00% | 32.84% | Met target | No Slippage |
| **B** | Grade 8 | 994 | 8,349 | 10.78% | 11.00% | 11.91% | Met target | No Slippage |
| **C** | Grade HS | 434 | 5,341 | 8.29% | 9.00% | 8.13% | Did not meet target | Slippage |

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

Cursory calculations suggest that the statewide slippage for high school students on the math assessment was due to 8 and 18 students scoring not proficient. At this point, the reason for the slippage is unclear but is likely due to the lingering aftereffects of educational interruptions due to the COVID-19 pandemic. During the prior academic year, LEA educational models shifted between fully remote/at-home learning, hybrid (some at-home, some in-person learning), and in-person learning. It is possible the shifting educational models impacted students’ learning during the 2020-21 school year, resulting in learning recovery during the 2021-22 school year. It is possible that the interruptions students experienced during the 2020-21 school year were substantial enough to impair or slow down learning during the 2021-22 school year, resulting in fewer students achieving proficiency. MDE will continue to explore assessment outcomes for students with disabilities to identify ways to support LEAs and the students they serve.

**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.**

MDE has prepared a document for parents to use to access assessment outcomes for all students with IEPs. The document can be found on MDE’s public facing webpage here: https://education.mn.gov/mdeprod/idcplg?IdcService=GET\_FILE&dDocName=PROD070708&RevisionSelectionMethod=latestReleased&Rendition=primary  
  
In the document is a link that will take users directly to a display of statewide mathematics and reading results for all students with IEPs. The document also details how users can adjust the display to show a specific grade, student race or ethnicity, LEA, or school.

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

During statewide testing, all Minnesota students, including students with an IEP or a 504 plan, have access to a wide range of online tools and accessibility features. The list of general supports available to all students include:   
-Amplification devices;   
-Classroom materials, including color overlays, highlighters, low-vision aids, magnifiers, pencil grips, place markers, styluses for electronic devices, and templates to reduce the visual print field;   
-Different monitor screen sizes and resolutions;   
-Different times of day;   
-Extended time;   
-Individual or small-group settings for the duration of the assessment;   
-Lattices, diagrams or charts, provided they are generated by the student on scratch paper;   
-Music or noise buffers (provided by the school, but students control volume and on/off);   
-Online assessment devices, including answer eliminator, highlighter, notepad, calculator, ruler, straightedge, text-to-speech, magnifier, zoom, color contrast, line reader mask, answer masking, and white noise;   
-Repeated directions or written versions of directions;   
-Scratch paper;   
-Sensory tools, like fidgets or weighted pads (provided that the sensory tools do not cause a disruption among other test takers);   
-Special settings, such as specific lighting or seating arrangements;   
-Voice feedback devices or whisper phones, which allow students to vocalize as they read and work problems; and  
-For grade 11 mathematics MCA-III, the use of manipulatives, a multiplication table or an abacus. In grades 3-8, the use of manipulatives, a multiplication table, or an abacus would be considered an accommodation for the mathematics MCA-III.  
  
Additional testing accommodations are made available to students with IEPs or with a 504 plan when the general supports are insufficient for students to demonstrate their mastery of academic standards. Use of an accommodation during the statewide assessments must be detailed in the student’s IEP, should be used in their classroom instruction and may not invalidate the assessment. Accommodations available to students with IEPs or a 504 plan include:  
-Accommodated text-to-speech for the mathematics assessment (verbal descriptions of charts and graphs);   
-Alternative test format, including test items displayed in 12-, 18-, or 24-point font and printed on paper or a Braille version of the test book;   
-Assistive technology (e.g., two computers, computer plus a tablet), provided that the assistive device is not connected to the internet;   
-Electronic notetaker (for students using a Braille test book);   
-Handheld calculator (only for students in grades 3-8 for a printed copy of the mathematics test book);   
-Recording a reading test;   
-Scribe (with transcription into the test book or online test);   
-Script for mathematics (only for students using a paper test book);   
-Signed interpretation of test directions or mathematics scripts; and  
-Use of manipulatives, a multiplication table, or an abacus would be considered an accommodation for the mathematics MCA-III for students in grades 3-8.  
  
Minnesota faces challenges in reporting the percent proficiency of students with IEPs on the regular assessment disaggregated by students with and without accommodations. Because of the wide-ranging and varied general supports available to all students, few students with IEPs have additional accommodations documented on their IEPs. Specifically, 19.5% of students with IEPs in grades 4, 8, and high school (combined) take the mathematics assessment with accommodations and 8.4% of students with IEPs in grades 4, 8, and high school (combined) take the reading assessment with accommodations. Unfortunately, few of the students with IEPs taking the regular assessment achieved proficiency on the test: 367 students with IEPs and using accommodations were proficient on the mathematics MCA-III (268 in grade 4, 79 in grade 8, and 20 in high school) and 179 students with IEPs and using accommodations were proficient on the reading MCA-III (72 in grade 4, 55 in grade 8, and 52 in high school). While the percentage of students with IEPs using accommodations and proficient on the regular assessments can be reported at the statewide level, it is impossible to report the percentages at the LEA or school levels due to concerns over student privacy. Minnesota currently has 505 districts and approximately 1,500 schools serving students and reporting fewer than 500 students proficient on the regular assessments using accommodations would violate MDE’s privacy protection guidance (a minimum of 10 students in the LEA or school taking the regular assessment with an accommodation).

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

## 3B - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

of testing.

## 3C - Indicator Data

**Historical Data:**

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

**Targets: Description of Stakeholder Input**In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 801 | 779 | 743 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 497 | 557 | 548 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 788 | 782 | 754 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 549 | 536 | 402 |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 497 | 801 | 58.71% | 59.00% | 62.05% | Met target | No Slippage |
| **B** | Grade 8 | 557 | 779 | 70.83% | 71.00% | 71.50% | Met target | No Slippage |
| **C** | Grade HS | 548 | 743 | 72.97% | 73.00% | 73.76% | Met target | No Slippage |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 549 | 788 | 70.02% | 71.00% | 69.67% | Did not meet target | No Slippage |
| **B** | Grade 8 | 536 | 782 | 68.40% | 69.00% | 68.54% | Did not meet target | No Slippage |
| **C** | Grade HS | 402 | 754 | 50.24% | 51.00% | 53.32% | Met target | No Slippage |

**Regulatory Information**

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

**Public Reporting Information**

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

MDE has prepared a document for parents to use to access assessment outcomes for all students with IEPs. The document can be found on MDE’s public facing webpage here: https://education.mn.gov/mdeprod/idcplg?IdcService=GET\_FILE&dDocName=PROD070708&RevisionSelectionMethod=latestReleased&Rendition=primary  
  
In the document is a link that will take users directly to a display of statewide mathematics and reading results for all students with IEPs. The document also details how users can adjust the display to show a specific grade, student race or ethnicity, LEA, or school.

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

The alternative assessment is the Minnesota Test of Academic Skills, 3rd ed., or the MTAS-III.  
  
During statewide testing, all Minnesota students, including students with an IEP or a 504 plan, have access to a wide range of online tools and accessibility features. The list of general supports available to all students includes:   
-Amplification devices;   
-Classroom materials, including color overlays, highlighters, low-vision aids, magnifiers, pencil grips, place markers, styluses for electronic devices, and templates to reduce the visual print field;   
-Different monitor screen sizes and resolutions;   
-Different times of day;   
-Extended time;   
-Individual or small-group settings for the duration of the assessment;   
-Lattices, diagrams or charts, provided they are generated by the student on scratch paper;   
-Music or noise buffers (provided by the school, but students control volume and on/off);   
-Online assessment devices, including answer eliminator, highlighter, notepad, calculator, ruler, straightedge, text-to-speech, magnifier, zoom, color contrast, line reader mask, answer masking, and white noise;   
-Repeated directions or written versions of directions;   
-Scratch paper;   
-Sensory tools, like fidgets or weighted pads (provided that the sensory tools do not cause a disruption among other test takers);   
-Special settings, such as specific lighting or seating arrangements; and  
-Voice feedback devices or whisper phones, which allow students to vocalize as they read and work problems.  
  
Additional testing accommodations are made available to students with IEPs or with a 504 plan when the general supports are insufficient for students to demonstrate their mastery of academic standards. Use of an accommodation during the statewide assessments must be detailed in the student’s IEP, should be used in their classroom instruction and may not invalidate the assessment. Accommodations available to students with IEPs or a 504 plan include:  
-Accommodated text-to-speech for the mathematics assessment (verbal descriptions of charts and graphs);   
-Alternative test format, including test items displayed in 12-, 18-, or 24-point font and printed on paper or a Braille version of the test book;   
-Assistive technology (e.g., two computers, computer plus a tablet), provided that the assistive device is not connected to the internet;   
-Electronic notetaker (for students using a Braille test book);   
-Handheld calculator (only for students in grades 3-8 for a printed copy of the mathematics test book);   
-Recording a reading test;   
-Scribe (with transcription into the test book or online test);   
-Script for mathematics (only for students using a paper test book); and  
-Signed interpretation of test directions or mathematics scripts.  
  
Minnesota faces challenges in reporting the percent proficiency of students with IEPs on the alternative assessment disaggregated by students with and without accommodations. First, the wide-ranging and varied general supports available to all students means that few students taking the alternative assessment use accommodations. Second, about 1.2% of all Minnesota students take the alternative assessment, or 2,259 students with IEPs took the mathematics alternative assessment (grades 4, 8, and high school combined) and 2,261 students with IEPs (again, grades 4, 8, and high school combined) took the reading alternative assessment. At each grade level, only 785 to 727 students took the alternative assessment. Any attempts to disaggregate those small counts by grade, LEA, or school, and use or no use of accommodations will result in numbers too small to report to the public. MDE’s privacy protection guidance prohibits reporting counts or percentages with fewer than 10 students in a group (e.g., the number of grade 4 students taking the alternative assessment in reading with accommodations).

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

## 3C - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3D - Indicator Data

**Historical Data:**

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 59,903 | 61,826 | 55,483 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 10,064 | 8,415 | 6,768 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 29,534 | 28,403 | 30,385 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 89 | 80 | 82 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 2,513 | 1,391 | 1,410 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 72 | 55 | 52 |

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 59,759 | 61,292 | 44,505 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 10,067 | 8,349 | 5,341 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 33,297 | 24,271 | 16,135 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 284 | 96 | 29 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 3,038 | 915 | 414 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 268 | 79 | 20 |

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

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards** | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 25.69% | 49.45% | 23.81 | 23.00 | 23.77 | Did not meet target | No Slippage |
| **B** | Grade 8 | 17.18% | 46.07% | 32.81 | 32.00 | 28.89 | Met target | No Slippage |
| **C** | Grade HS | 21.60% | 54.91% | 37.29 | 37.00 | 33.31 | Met target | No Slippage |

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

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards** | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 32.84% | 56.19% | 22.95 | 22.00 | 23.35 | Did not meet target | No Slippage |
| **B** | Grade 8 | 11.91% | 39.76% | 28.66 | 28.00 | 27.85 | Met target | No Slippage |
| **C** | Grade HS | 8.13% | 36.32% | 32.95 | 32.00 | 28.19 | Met target | No Slippage |

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

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

## 3D - Required Actions

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

## 4A - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 4.43% | 4.20% | 4.00% | 4.00% | 4.55% |
| Data | 4.43% | 5.01% | 5.46% | 4.58% | 4.55% |

**Targets**

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 2021 SPP/APR Data**

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

YES

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

21

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 19 | 461 | 4.55% | 4.35% | NVR | 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 FFY2021, 482 LEAs met the minimum N-size and were included in the calculations, while 21 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 next section).   
  
For FFY2021, the calculation of the statewide cut point was as follows:   
 Number of children with IEPs suspended or expelled for more than 10 days in the state = 43  
 Number of children with IEPs ages 6 to 21 years = 127,314  
 Statewide suspension and expulsion rate > 10 days for children with IEPs = 0.000338  
 Standard deviation = 0.001342  
 Minnesota cut point = 0.000338+1.75\*0.001342 = 0.002686; or 0.2686%  
  
Using the above methodology, 19 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 482 LEAs with 10 or more children with IEPs, only 36 of the LEAs (7.47%) have one or more children with IEPs who have been suspended or expelled for greater than 10 days. The remaining 446, or 92.43%, 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 2020-21 school year and was greatly impacted by the global COVID-19 pandemic. During the 2020-21 school year, Minnesota LEAs utilized flexible and changing instructional models to provide instruction to students of all ages that were informed by county-level COVID-19 infection rates. Because many of Minnesota’s counties, especially those in densely-packed metropolitan areas, had high or higher COVID-19 infection rates throughout the school year, many LEAs utilized distance learning (all students receiving instruction away from the school) or hybrid learning (half of the students attending class on alternating days while the remainder received their instruction away from school) for the entire school year. As a result, the number of students receiving instruction on school grounds was low, which had a domino effect on the number of students with more than 10 days of out-of-school suspensions or expulsions.   
  
While the COVID-19 pandemic impacted the suspension and expulsion rates in both FFY2020 and FFY2021, but the impact of the pandemic on FFY2021 suspensions and expulsions was more profound. FFY2020 – a school year in which students participated in distance learning for about 3 months – had a suspension and expulsion count that was approximately 56% of the count in the FFY2019 year. And in FFY2021, when students were experiencing shifting learning modes throughout the school year and may students were in distance learning for the entire year, the suspension and expulsion count was approximately 7% of the count in the FFY2019 year.   
 FFY2016 FFY2017 FFY2018 FFY2019 FFY2020 FFY2021  
Number of students with IEPs   
with high rates of S/E 751 644 664 621 350 43  
Number of students w/IEPs enrolled 112,375 115,279 118,800 123,101 126,692 127,314  
Minnesota’s S/E rate 0.006683 0.005586 0.005589 0.005045 0.002763 0.000338  
Minnesota’s standard deviation 0.11121 0.00824 0.008852 0.007625 0.004533 0.001342  
Minnesota’s cut score 0.02615 0.02000 0.021080 0.018389 0.002763 0.002686  
Number of LEAs identified 21 24 26 22 22 19   
  
Between FFY2016 and FFY2019, Minnesota has observed a gradual decline in the counts of students with IEPs and high rates of suspension and expulsion and increasing counts of the number of students with IEPs enrolled in public schools. This shift has resulted in a decline of Minnesota’s suspension/expulsion rate and a decline in Minnesota’s cut score. Despite the decline in high rates of suspensions and expulsions and the decline in cut scores, Minnesota still identifies an average of 22.3 LEAs per year for high rates of student suspensions and expulsions, and that trend continued in the two years that were profoundly impacted by the COVID-19 pandemic. In other words, although Minnesota saw extremely low counts of students with IEPs and high rates of suspensions and expulsions in FFY2021, Minnesota identified a near-average number of LEAs for their high counts of students with suspensions and expulsions in both FFY2020 and FFY2021.  
  
Last, Minnesota’s LEAs have returned to providing instruction on-site and in schools. (Families do have the option of open-enrolling their children in an increasing number of distance and online learning schools, should they decide to do so.) Because of the return to on-site instruction, MDE fully anticipates that the counts of students with IEPs and high rates of suspensions and expulsions will likely increase in the coming years.

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

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

The review of an 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.   
  
In FFY 2020, MDE initiated a revision of its monitoring process and contracted the 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 were completed entirely through the new Stepwell MN online system.   
  
Outside of indicator data collection, MDE is moving toward a risk-based, cyclical monitoring process. LEAs have been divided into five cohorts, and MDE will analyze risk data annually to identify LEAs with a 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 understand better the current policies, practices and procedures of the LEA. The monitoring activities 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 the completion of corrective actions designed to address any identified noncompliance, as well as targeted technical assistance and support to the LEA.   
  
With the revision of its monitoring process, 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. In FFY2021, this self-review moved to the new online platform, Stepwell MN. 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 released the online policies and procedures self-review to be completed by a team of appropriate stakeholders. This new PPR self-review includes a series of questions designed to review LEA policies, procedures and practices and 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. Once the completed self-review is submitted, a team of MDE program monitoring staff from the Division of Assistance and Compliance reviewed the LEA’s responses. If noncompliance were identified, the LEA would receive a formal notification of findings and work with MDE to develop a 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.  
  
For LEAs identified with significant discrepancies in FFY2021 (based on 2020-21 discipline data), MDE reviewed all PPR data to identify any noncompliance 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 FFY2021, 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)

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

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

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

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

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

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

OSEP cannot determine whether the data are valid and reliable. The State reported that 461 districts met the minimum n size requirement, and 21 districts did not meet the minimum n size requirement and were excluded from the calculation. The number of districts excluded from the calculation because they do not meet the minimum “n” size, plus the number of districts that met the State- established minimum “n” size, do not equal the total number of districts the State reported in the FFY 2020 Introduction (which was 501 LEAs). Therefore, OSEP could not determine whether the State met its target.

## 4A - Required Actions

The State did not provide valid and reliable data for FFY 2021. The State must provide valid and reliable data for FFY 2022 in the FFY 2022 SPP/APR.

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**Targets**

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

**FFY 2021 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy, by race or ethnicity** | **Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 23 | 3 | 449 | 0.00% | 0% | NVR | Did not meet target | Slippage |

**Provide reasons for slippage, if not applicable**

Minnesota reports slippage from the FFY2020 rate of 0.0% to the FFY2021 rate of 0.63%. The noncompliance for this indicator represents three LEAs that completed a policies and procedures review (PPR), described below, and identified inconsistent implementation of district policies. One LEA noted an inconsistent provision of educational services in an alternate setting when students were removed from their current placement due to staffing shortages at the secondary level. Another LEA reported that, while procedural safeguards are provided to parents at the start of each school year and various other times, the LEA was not routinely providing the procedural safeguards to parents when the decision was made to make a removal that constitutes a change of placement. The third LEA reported that, while parents are provided written notice of a suspension, the student was not provided written notice at or before the time suspension is to take effect. While each LEA identified noncompliance, it is unclear if the noncompliance resulted in the disproportionate representation related to suspensions and expulsions. Nonetheless, the LEAs identified noncompliance and were ordered corrective action to ensure the regulatory requirements are being implemented consistently districtwide.   
   
MDE attributes the slippage on this indicator primarily to improved data collection and reporting methodologies. Previously, the review of LEA 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 were included in MDE’s compliance monitoring process which occurred on a six-year monitoring cycle. As part of the record reviews completed in years one and three of the cycle, a computer-generated sample was used to determine the student records to be reviewed. During the record review, the most current Evaluation Report (ER), IEP and corresponding due process documentation were monitored to determine that legal standards were met. As part of the MDE review in year three of the cycle, staff interviews were completed to gain a deeper understanding of the district’s policies, procedures, and practices. Once MDE identified the LEAs that met the threshold for significant disproportionality, all monitoring data from that year was reviewed for the LEAs to identify any non-compliant policies, procedures or practices that may have contributed to the significant discrepancy.  
   
With the revision of its monitoring process, MDE has implemented a new policies and procedures review to be completed by each LEA identified as meeting the threshold for disproportionality. This revised process allows MDE to ask more targeted questions of those LEAs identified with disproportionate representation on an annual basis, moving away from the previous cyclical data collection. The new policies and procedures review will enable MDE to gather more timely information to report on this indicator more accurately. MDE believes the revised process has resulted in data that more accurately reflects the intended measurement of this indicator and will allow MDE to better identify specific components of any noncompliance to provide more targeted technical assistance. MDE is currently working with the LEAs with identified noncompliance to ensure they are correctly implementing the regulatory requirements districtwide. MDE is also developing several new targeted trainings and will continue to use the concerns identified through its various program monitoring activities to guide the development of additional trainings and resources available to LEAs.

**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 FFY2021, 474 LEAs met the minimum N-size for one or more racial or ethnic groups and were included in the calculations, while 29 LEAs were excluded from the 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 next section).   
  
For FFY2021, the calculation of the statewide cut point was as follows:   
 Number of children with IEPs suspended or expelled for more than 10 days in the state = 43  
 Number of children with IEPs ages 6 to 21 years = 127,314  
 Statewide suspension and expulsion rate > 10 days for children with IEPs = 0.000338  
 Standard deviation = 0.001342  
 Minnesota cut point = 0.000338+1.75\*0.001342 = 0.002686; or 0.2686%  
  
Using this methodology, 23 LEAs were identified for significant discrepancy for one or more racial or ethnic groups: 21 LEAs were identified for one racial or ethnic group, and 2 LEAs were identified for significant discrepancy for two racial or ethnic groups. No LEAs were identified with significant discrepancy in three or more racial or ethnic groups. A total of 25 instances of significant discrepancy were identified. In addition, 8 instances of significant discrepancy were found for White students with IEPs, 5 instances for American Indian or Alaska Native students with IEPs, and 4 instances each for Black or African American, Hispanic or Latino, and Two or More Races students with IEPs. No identifications of significant discrepancy were found for Native Hawaiian or Pacific Islander students with IEPs or Asian students with IEPs. Last, 15 LEAs were found with numerical 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 474 LEAs with 10 or more children with IEPs in at least one of the federal racial/ethnic groups, only 36 of the LEAs (7.47%) have one or more children with IEPs who have been suspended or expelled for greater than 10 days. The remaining 446 LEAs, or 92.43%, have zero/no children with IEPs who have been suspended or expelled for greater than 10 days.  
  
And while the COVID-19 pandemic impacted the suspension and expulsion rates in both FFY2020 and FFY2021, the impact of the pandemic on FFY2021 suspensions and expulsions was more profound. FFY2020 – a school year in which students participated in distance learning for about 3 months – had a suspension and expulsion count that was approximately 56% of the count in the FFY2019 year. And in FFY2021, when students were experiencing shifting learning modes throughout the school year and may students were in distance learning for the entire year, the suspension and expulsion count was approximately 7% of the count in the FFY2019 year.   
 FFY2016 FFY2017 FFY2018 FFY2019 FFY2020 FFY2021  
Number of students with IEPs  
with high rates of S/E 751 644 664 621 350 43  
Number of students w/IEPs enrolled 112,375 115,279 118,800 123,101 126,692 127,314  
Minnesota’s S/E rate 0.006683 0.005586 0.005589 0.005045 0.002763 0.000338  
Minnesota’s standard deviation 0.11121 0.00824 0.008852 0.007625 0.004533 0.001342  
Minnesota’s cut score 0.02615 0.02000 0.021080 0.018389 0.002763 0.002686  
Number of LEAs identified 40 56 54 55 52 23   
  
Between FFY2016 and FFY2019, Minnesota has observed a gradual decline in the counts of students with IEPs and high rates of suspension and expulsion and increasing counts of the number of students with IEPs enrolled in public schools. This shift has resulted in a gradual decline of Minnesota’s suspension/expulsion rate and a decline in Minnesota’s cut score. For indicator 4b, the decline in cut scores has resulted in a decrease in the number of LEAs identified. The decrease in LEA identification is likely because dividing the very small number of students with high suspension/expulsion rates across seven racial/ethnic categories resulted in district level counts that were below the minimum value for calculating significant discrepancy.   
  
Last, Minnesota’s LEAs have returned to providing instruction on-site and in schools. (Families do have the option of open-enrolling their children in an increasing number of distance and online learning schools, should they decide to do so.) Because of the return to on-site instruction, MDE fully anticipates that the counts of students with IEPs and high rates of suspensions and expulsions will likely increase in the coming years. And, as counts of students with high rates of suspensions/expulsions rise, so will the counts of LEAs identified.

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

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

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.   
  
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 were completed entirely through the new Stepwell MN online 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 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.   
  
With the revision of its monitoring process, 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. In FFY2021, this self-review moved to our new online platform, Stepwell MN. 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 released the online policies and procedures self-review to be completed by a team of appropriate stakeholders. This new PPR self-review includes a series of questions designed to review LEA policies, procedures and practices and 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. Once the completed self-review is submitted, a team of MDE program monitoring staff from the Division of Assistance and Compliance reviewed the LEA’s responses. If noncompliance was identified, the LEA would receive a formal notification of findings and work with MDE to develop a 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.  
  
For LEAs identified with significant discrepancies in FFY2021 (based on 2020-21 discipline data), MDE reviewed all PPR data to identify any noncompliance 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 FFY2021, three LEAs with numerical significant discrepancy were found to have noncompliant policies, procedures, or practices that may have contributed to the significant discrepancy.  
  
The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

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

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

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

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

Each LEA with identified noncompliance has been ordered to develop a corrective action plan (CAP). Program monitoring staff from the Division of Assistance and Compliance worked with the LEAs to design CAPs specific to the identified concerns that would revise noncompliant or inconsistently implemented policies, procedures and practices and ensure staff district-wide are trained on the revisions. Each LEA is required to submit evidence of completion on the CAP within one year of the identification of the noncompliance, consistent with OSEP Memo 09-02.

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

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

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

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

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

OSEP cannot determine whether the data are valid and reliable. The State reported that 449 districts met the minimum n size requirement, and 29 districts did not meet the minimum n size requirement and were excluded from the calculation. The number of districts excluded from the calculation because they do not meet the minimum “n” size, plus the number of districts that met the State- established minimum “n” size, do not equal the total number of districts the State reported in the FFY 2020 Introduction. Additionally, in the chart of the FFY 2021 SPP/APR data, the State documented 449 LEAs that met the State's minimum n/cell size. However, in the narrative, the State reported, "For FFY2021, 474 LEAs met the minimum N-size for one or more racial or ethnic groups and were included in the calculations..." Therefore, OSEP could not determine whether the State met its target.

## 4B- Required Actions

The State did not provide valid and reliable data for FFY 2021. The State must provide valid and reliable data for FFY 2022 in the FFY 2022 SPP/APR.

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2020 | Target >= | 61.50% | 62.00% | 62.50% | 62.50% | 62.30% |
| A | 62.30% | Data | 60.71% | 60.91% | 61.16% | 61.28% | 62.31% |
| B | 2020 | Target <= | 9.50% | 9.50% | 9.50% | 9.50% | 10.10% |
| B | 10.10% | Data | 10.07% | 10.04% | 9.98% | 9.92% | 10.09% |
| C | 2020 | Target <= | 4.00% | 4.00% | 4.00% | 4.00% | 3.90% |
| C | 3.90% | Data | 4.11% | 4.17% | 4.13% | 4.21% | 3.89% |

**Targets**

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 134,309 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 84,233 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 13,332 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 4,684 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 58 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 364 |

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

NO

**FFY 2021 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 5 (kindergarten) through 21 served** | **Total number of children with IEPs aged 5 (kindergarten) through 21** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 84,233 | 134,309 | 62.31% | 62.80% | 62.72% | Did not meet target | No Slippage |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 13,332 | 134,309 | 10.09% | 9.90% | 9.93% | Did not meet target | No Slippage |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 5,106 | 134,309 | 3.89% | 3.85% | 3.80% | Met target | No Slippage |

**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 percentage 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, the degree to which the pandemic has impacted the educational environment of 5-year-olds in kindergarten is unclear.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A** | Target >= | 53.90% | 54.20% | 54.50% | 54.50% |  |
| **A** | Data | 58.20% | 59.32% | 58.28% | 59.09% | 55.20% |
| **B** | Target <= | 18.20% | 18.10% | 18.00% | 18.00% |  |
| **B** | Data | 15.07% | 14.42% | 15.10% | 14.29% | 19.48% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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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**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 | 42.03% |
| **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 | 3.47% |
| **C3, age 5** | 2020 | 3.02% |

**Individual Targets – 6A, 6B**

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

**Individual Targets – 6C**

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

**Prepopulated Data**

**Data Source:**

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

**Date:**

07/06/2022

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 3,510 | 5,470 | 2,647 | 11,627 |
| 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 | 1,498 | 3,192 | 1,674 | 6,364 |
| b1. Number of children attending separate special education class | 1,025 | 968 | 285 | 2,278 |
| b2. Number of children attending separate school | 22 | 19 | 8 | 49 |
| b3. Number of children attending residential facility | 0 | 0 | 0 | 0 |
| c1**.** Numberof children receiving special education and related services in the home | 334 | 161 | 61 | 556 |

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

NO

**FFY 2021 SPP/APR Data for Age 3**

| **Preschool Environments** | **Number of children with IEPs aged 3 served** | **Total number of children with IEPs aged 3** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 | 1,498 | 3,510 | 42.03% | 46.50% | 42.68% | Did not meet target | No Slippage |
| B1. Separate special education class, separate school or residential facility | 1,047 | 3,510 | 29.25% | 29.70% | 29.83% | Did not meet target | No Slippage |
| C1. Home | 334 | 3,510 | 12.69% | 6.65% | 9.52% | Did not meet target | No Slippage |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 | 3,192 | 5,470 | 58.42% | 60.30% | 58.35% | Did not meet target | No Slippage |
| B2. Separate special education class, separate school or residential facility | 987 | 5,470 | 17.99% | 17.40% | 18.04% | Did not meet target | No Slippage |
| C2. Home | 161 | 5,470 | 3.47% | 1.90% | 2.94% | Did not meet target | No Slippage |

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 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 | 1,674 | 2,647 | 64.33% | 64.75% | 63.24% | Did not meet target | Slippage |
| B3. Separate special education class, separate school or residential facility | 293 | 2,647 | 10.74% | 10.60% | 11.07% | Did not meet target | No Slippage |
| C3. Home | 61 | 2,647 | 3.02% | 0.94% | 2.30% | Did not meet target | No Slippage |

**Provide reasons for slippage for Group A3 age 5, if applicable**

Over the last 2 years of pandemic impacts, we have seen that families have been making decisions for their children that impacted where children were receiving services. Additionally, Minnesota is facing a substantial workforce crisis that is impacting both general education preschool and early intervention/special education workforce Districts and programs are struggling to fill vacant positions so that children can receive services. Given these dynamics, it is not surprising that the combination of parent choice and workforce vacancies has reduced opportunities for 5 years old to participate and receive their services in general education early childhood program environments. MDE’s Early Childhood Special Education team has heard from many districts across the state that the decline in the number of available preschool programs within their district programs and community partners has been significant.

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

Minnesota continued to see the impacts of the COVID-19 pandemic on the settings in which children of preschool age were receiving services. Overall, the percentage of children in each of the three setting categories remained relatively stable to the previous year's data. However, there was a reduction in the percentage of three-year-olds receiving services in the home and an increase for four-year-olds receiving services in the home.   
  
Districts have reported mixed anecdotal data that spoke to families making a variety of decisions for themselves as it related to the location of services. Engagement with families and communities sheds light on the disparities of early care and education opportunities for children with medical complexities due to increased risks associated with COVID-19 transmissions.  
   
It remains true that the context of preschool programming for general education student access and opportunity directly impacts the access and opportunities available to children identified with special education needs. 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. And students who turn three after September 1 would not be eligible to enroll in a preschool program among their peers and receive services in that setting. Instead, students who turn three after September 1 are often served within childcare settings or within the home. In addition, Minnesota has two state-funded preschool programs that were designed specifically for students in the year prior to kindergarten eligibility. Both programs have several requirements based on risk factors and students or families who meet the risk factors are eligible to participate in the preschool programs for free or at a reduced cost. But neither preschool program can enroll a child that would otherwise have been eligible to enroll in kindergarten (i.e., a student who is 5 years old on or before September 1 of that school year). If a parent chooses to delay their child’s enrollment in kindergarten, the number of settings in which the child could enroll with their peers at low or no cost would be greatly diminished. 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 about whether or not their children participate in childcare or preschool programs as Minnesota does not have compulsory attendance requirements until age seven.  
  
In setting baselines in FFY2020, Minnesota was able to disaggregate 5-year-olds enrolled in kindergarten from 5-year-olds that were enrolled in preschool programs and receiving services.

## 6 - Prior FFY 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.

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

The discrepancy between the baseline table and the FFY2020 SPP/APR data table is due to a typographical error; that error has been corrected.   
  
Minnesota has elected to use individual targets for 6A, 6B, and 6C, thus adding aggregate targets for 6A would create confusion about Minnesota’s direction for B6. In addition, the State is unable to edit the aggregated target table at this time.

## 6 - 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 Indicator 6A, and OSEP accepts those targets.

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

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

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

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

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

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

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

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

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

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

**Instructions**

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

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A1 | 2018 | Target >= | 71.60% | 71.80% | 72.00% | 66.03% | 63.00% |
| A1 | 65.93% | Data | 68.38% | 69.08% | 65.93% | 63.05% | 60.93% |
| A2 | 2018 | Target >= | 60.00% | 61.00% | 62.00% | 51.48% | 48.50% |
| A2 | 51.38% | Data | 54.17% | 53.19% | 51.38% | 48.40% | 47.95% |
| B1 | 2018 | Target >= | 72.00% | 72.20% | 72.40% | 67.94% | 65.50% |
| B1 | 67.84% | Data | 70.25% | 69.54% | 67.84% | 65.42% | 63.44% |
| B2 | 2018 | Target >= | 55.30% | 55.50% | 55.70% | 49.95% | 46.00% |
| B2 | 49.85% | Data | 52.80% | 51.94% | 49.85% | 46.13% | 45.67% |
| C1 | 2018 | Target >= | 72.80% | 73.00% | 73.20% | 67.74% | 65.50% |
| C1 | 67.64% | Data | 69.10% | 70.06% | 67.64% | 65.50% | 62.53% |
| C2 | 2018 | Target >= | 66.70% | 66.80% | 66.90% | 61.75% | 59.50% |
| C2 | 61.65% | Data | 63.45% | 62.78% | 61.65% | 59.62% | 58.23% |

**Targets**

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

**Targets: Description of Stakeholder Input**

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**FFY 2021 SPP/APR Data**

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

5,822

**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 | 15 | 0.26% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,532 | 26.40% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,314 | 22.65% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,401 | 24.15% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,540 | 26.54% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 2,715 | 4,262 | 60.93% | 63.90% | 63.70% | Did not meet target | No Slippage |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,941 | 5,802 | 47.95% | 49.50% | 50.69% | Met target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 15 | 0.26% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,612 | 27.89% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,437 | 24.87% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,607 | 27.81% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,108 | 19.17% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 3,044 | 4,671 | 63.44% | 66.30% | 65.17% | Did not meet target | No Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,715 | 5,779 | 45.67% | 47.30% | 46.98% | 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 | 17 | 0.29% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1,320 | 22.76% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 972 | 16.76% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,502 | 25.90% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,988 | 34.28% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.  *Calculation:(c+d)/(a+b+c+d)* | 2,474 | 3,811 | 62.53% | 66.30% | 64.92% | Did not meet target | No Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  *Calculation: (d+e)/(a+b+c+d+e)* | 3,490 | 5,799 | 58.23% | 60.30% | 60.18% | Did not meet target | No Slippage |

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

YES

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

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

YES

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

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 the 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 program entry and/or exit date. 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 a consensus on an accurate Part C exit/Part B entrance rating.  
  
FFY2018 was the first year LEAs had an alternative to the COS form and process. LEAs could 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. 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 crosswalked 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)**

Often the denominator can be different across the outcomes. MDE accepts assessments for individual outcome based on the student’s needs documented in the IEP. While reviewing the data to respond to this discrepancy, MDE identified an error in our code that included children that had assessments submitted with errors that should not have been included in the outcomes calculations. MDE removed 20 students’ outcomes from Outcome A, 26 from Outcome B, and 20 from Outcome C. The outcomes tables above to reflect the updated counts.  
  
MDE remains concerned about data quality for a significant number of LEAs. MDE is reviewing all early childhood data submissions and examining turn-around reports (data 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 technical assistance efforts.   
  
MDE will continue monitoring the data collection 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 has begun work and stakeholder engagement 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.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

In reporting the percent of preschoolers aged 3 through 5 who were functioning within age expectations in each outcome area by the time they turned 6 years of age or exited the program, the State reported 5802 as the denominator in outcome A, 5779 as the denominator in outcome B, and 5799 as the denominator in outcome C. Additionally, the State reported 5822 preschool children aged 3 through 5 with IEPs were assessed. The State explained this discrepancy.

## 7 - Required Actions

In the FFY 2022 SPP/APR submission, the State must explain any discrepancies between the FFY 2022 total number assessed and the FFY 2022 denominator in its calculation of the percent of preschoolers aged 3 through 5 who were functioning within age expectations in each outcome area by the time they turned 6 years of age or exited the program.

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

## 8 - Indicator Data

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

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 71.50% | 72.00% | 72.00% | 72.00% | 70.50% |
| Data | 71.89% | 70.19% | 70.38% | 70.37% | 74.79% |

**Targets**

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

**FFY 2021 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 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 205 | | 296 | 74.79% | 71.00% | 69.26% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

At this time, the reason(s) for slippage is unclear. It is possible that one or more factors contributed to the slippage, including a) a lower-than-typical response rate, b) parent dissatisfaction with teachers, schools, or districts, and/or c) cascading challenges in the aftermath of the COVID-19 pandemic.  
  
Minnesota experienced a much lower response rate than has been typical for the FFY2021 family engagement survey. Although the response rate for the family survey has been in a general decline, the nearly 5 percentage point decline from FFY2020 to FFY2021 is unheard of. MDE did experience challenges distributing the FFY2021 family engagement survey: difficulties with the survey software (it has reached the end of its life) resulted in problems returning the surveys to MDE. It is possible that MDE did not receive surveys from parents with favorable views of teachers, schools, and districts due to the mailing problems.   
  
It is also possible that parents were simply less satisfied with districts and shared that dissatisfaction via the survey. As recently as the FFY2018 APR, MDE reported that only 64.54% of families reported that their school facilitated parent involvement as a means for improving services to students with disabilities. At the time, the slippage was partially attributed to a substantive drop in positive responses to two survey items. A review of the responses to the individual questions on the survey show that, for FFY2021, 4 survey items have a greater than 5 percentage point decrease in positive responses compared to last year. (A positive response means families responded with Agree, Strongly Agree, or Very Strongly Agree.) Those items were:  
9.8 percentage point decrease: #24 The school provides information on agencies that can assist my child in the transition from school.   
9.6 percentage point decrease: #2 I was offered special assistance (such as child care) so that I could participate in the Individualized Educational Program (IEP) meeting. (this item also has less than 50% of parents with a positive response)  
6.5 percentage point decrease: #7 I was given information about organizations that offer support for parents of students with disabilities.   
5.2 percentage point decrease: #23 The school gives parents the help they may need to play an active role in their child’s education.   
  
An additional 4 survey items had a drop in positive responses between 4.0 and 4.9 percentage points. Finding a large decrease in eight survey items is unprecedented in Minnesota, and the cause for which may be found in the third possible explanation for slippage: the special education teacher shortage. It is also possible that the drop in parental satisfaction is due to cascading challenges in the aftermath of the COVID-19 pandemic. Like so many other states, Minnesota is experiencing a teacher shortage, especially among special education teachers. LEAs and schools are doing what they can to ensure that all students receive an education, but LEAs may resort to larger class sizes or less experienced staff – or both – in the face of the teacher shortage. Larger class sizes and less experienced staff may mean that students get less individualized attention throughout the school year and less communication between teachers and families. And family responses on the engagement survey may reflect the changes in instructional staff.

**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. In addition, the State conducts statistical comparisons preschool and school aged children with respect to the response rate (logistic regression) and survey outcomes (average survey response via ANOVA) to ensure that the survey responses from preschool and school aged children are similar.

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

1,994

**Percentage of respondent parents**

14.84%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Response Rate | 19.79% | 14.84% |

**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 typical process of survey administration and outreach strategies has proven successful in increasing response rates from historically 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 to American Indian and Black students, 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 Division of Special Education staff may also attempt phone calls during the workday or evenings from the MDE office. However, the COVID-19 pandemic, the life span of MDE software, and the delayed relocation of MDE offices have negatively affected all outreach activities. In the FFY2019, FFY2020, and FFY2021 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 FFY2019 and FFY2020. In addition, in December 2021, the lease on MDE’s building expired, which required finding and securing a new site. Although a new site was secured in April 2022, the need to build the new site and supply chain interruptions triggered in the aftermath of the COVID-19 pandemic delayed the opening of the new MDE building until November 2022, far after the scheduled closure of the family engagement survey. In addition, the MNCIMP software that MDE relied upon to implement the family engagement survey completely failed, and survey mailers failed to reach many families.   
  
While the COVID-19 pandemic and software issues have had a negative impact on MDE’s ability to complete outreach activities in FFY2019, FFY2020, and FFY2021, 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. With the opening of the new building, MDE anticipates resuming telephone outreach in the summer of 2023 and will be reported on in FFY2022. In addition, the new survey software will greatly improve the sampling processes and will allow oversampling of American Indian and Black families. The new software will also support and streamline mailing the survey to families and better support telephone outreach. Last, the new software will also support the ability to present all survey questions in multiple languages. Although Hmong-, Somali- and Spanish-speaking families have always had the opportunity to complete the paper version of the survey in their home language, families now have the opportunity to complete the electronic version of the survey in their home language.   
  
In addition, MDE anticipates that the implementation of a new compliance monitoring and survey management system in FFY2022 will provide LEAs with more advanced notice of when they will participate in the annual survey. This may help LEAs do additional planning and family outreach in anticipation of survey administration and improve overall response rates. And MDE’s Division of Special Education is exploring ways to partner with community groups to facilitate and support survey completion. In particular, MDE is interested in examining survey deployment that may allow families with an oral tradition to better participate in the survey by having the survey read to them in their home language, which may help improve response rates of historically underserved families and students.

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

Historically, MDE’s parent survey overall response rate has hovered between 20 and 25%, but the response rate dipped to 19.79% in FFY2020 and down to 14.84% in FFY2021. In preparation for this submission, MDE examined the response rates disaggregated by student demographic characteristics. No statistically significant differences were found between responding and non-responding families on the basis of student age, gender, home language, or primary disability. There were, however, differences between responding and non-responding families based on federal definitions of race and ethnicity. Specifically, lower response rates were observed among families with American Indian, Black, and multiracial students compared to Asian, Hispanic, and White students. In addition, there was no statistically significant difference in the average survey response from non-White vs. White families. (The analysis of survey responses and response rates for the racial and ethnic groups can be found in later sections of this report.)  
  
In addition, in order to protect student and family privacy, LEAs receive aggregated survey responses from the MDE family engagement survey only when a minimum of 6 families respond to the survey. In the current reporting cycle, 81 LEAs were included in the sampling process, but 27% of them (n=22) had fewer than 6 students sampled. And only 21 districts (25.9%) had 6 or more students responding to the family engagement survey allowing the district to see the aggregated responses. It is difficult to get LEAs enthusiastic about marketing the family engagement survey to parents when few (if any) of their students may be sampled in a given year, and even fewer parents respond to the survey. For LEAs, there is little “bang” to the family engagement survey “buck.”  
  
The reasons for the lower response rate and the potential non-response bias are likely due to several factors, including two that were mentioned above: challenges mailing the paper surveys to families (due to the non-functioning software) and the inability to conduct telephone outreach. In addition, as mentioned above, the new MDE building has slowly opened to staff. MDE anticipates the building will be fully open in the summer of 2023. MDE will likely be able to resume telephone outreach at that time for reporting outcomes in FFY2024. In addition, the new Stepwell MN software will be used for the FFY2024 family engagement survey. The software will implement Minnesota’s sampling plan (as approved by OSEP) but will also be flexible enough to allow oversampling of historically under-participating families, including families of American Indian students. The oversampling combined with telephone outreach and better mailing of the surveys may help improve the overall response rate as well as the response rate of families of Black, Brown, and Indigenous students.   
  
There has also been a post-pandemic spike in overall frustration and dissatisfaction across the entire educational community. MDE has observed the effects in the results of the Minnesota Student Survey, emails and phone calls with parents, and communications with LEA and school staff and advocates. Anecdotal reports also suggest that no one is immune to this general dissatisfaction: there is increased frustration being shared with advocates and LEA and school staff in their communications. Because we are slowly emerging from the pandemic, it is likely that this post-pandemic “story” is still being written. Further investigation and study may be needed to fully understand the frustration from parents and their desire – or lack thereof – to complete the family engagement survey.   
  
In addition to the above factors, there is a distrust between the American Indian and Black families living within Minnesota’s borders and the Minnesota government, including MDE. The historical trauma experienced by members of both the American Indian and Black communities in Minnesota impacts community members’ lives to this day. In an effort to address past trauma and create a space for healing, the Division of Special Education has begun work, which includes special education staff meeting regularly for updates and feedback from the Tribal Nations Education Committee (TNEC), especially on the SSIP/Indicator 17. In addition, Division of Special Education staff meets monthly with the Director of the Office of American Indian Education and the MDE Tribal Liaison (two different positions and people). The monthly meetings focus on improving communications between TNEC and the Division of Special Education as well as the relationship between the Division of Special Education and families of American Indian students. Although TNEC and the MDE Division of Special Education are taking positive steps, the historical trauma experienced by American Indian community members in Minnesota is still evident will take time to heal.   
  
Furthermore, members of the Black communities in Minnesota have historical trauma that has been compounded by more recent trauma. Since 2015, seven (young) black men have been killed through interactions with members of law enforcement, only two of which had brandished or fired a gun. And, in four of those killings, the Minnesota Attorney General’s office declined to file charges against the officers. These outcomes added to an already existing wedge between Government officials and members of the Black community. An even deeper divide came about after the murder of George Floyd in 2020, which was particularly egregious as it was captured on video and triggered several months of protests across the Twin Cities metro area. Those protests reignited after the murders of Daunte Wright (2021 and Amir Locke (2022), ensuring more distrust between our Black community and Government agencies, In the face of historic and recent trauma, members of Minnesota’s Black, Brown, and Indigenous communities may be unwilling to share their experiences with a government agency like MDE.   
  
Another possible explanation for the nonresponse bias may be over surveying and underacting that has become prevalent in America. While it has become commonplace for businesses to invite shoppers to complete a customer satisfaction survey via receipt, it is uncommon for those same shoppers to see their feedback result in improvements or positive change. That may be the situation for MDE. Families provide feedback via the family engagement survey but rarely see the feedback result in positive change at the local level. This underacting may be due, in part, to the fact that Minnesota LEAs are under local control and MDE has limited influence with LEAs outside of ensuring that LEAs comply with state and federal laws. MDE has limited ability to direct LEAS to make changes based on feedback from the family engagement survey: MDE can recommend, suggest, and even cajole but cannot mandate that LEAs use survey results to implement changes at the local level.   
  
Finally, MDE has always provided paper copies of the engagement surveys to families whose primary language is Hmong, Somali, and Spanish. With the transition from the old sampling software to Stepwell MN, MDE can provide the electronic survey not only in English but also Hmong, Somali, and Spanish. MDE is also exploring if the electronic survey can be read to families to meet the needs of some more recent immigrants to Minnesota who have an oral history or tradition. In FFY2022, MDE will be able to report on the use of non-English electronic surveys and, hopefully, in subsequent APRs, will report on the use of auditory survey questions and survey completion.

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

Before any stratified random sample is finalized, MDE verifies that the sample is within ±1% of the characteristics of students with IEPs in the state based on students’ federal race/ethnicity, primary disability, age, and instructional setting. If the sample is not within a ±1% tolerance, a new sample is selected and tested. This process is iterative and continues until the sample is within ±1% for student federal race/ethnicity, primary disability, age, and instructional setting.  
  
Then, 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 logistic regression results of the FFY2021 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 American Indian, Black or African American, or of Two or More Races responded to the survey at much lower rates (combined response rate of 8.2%) than did families of students who were of other races or ethnicities (combined response rate of 20.2%). The logistic regression results indicate that, although the sample extracted to participate in the FFY2021 survey was representative of the statewide population of students with IEPs (within the ±1% tolerance), the survey responders are not representative of the statewide students with IEPs. Generalizations of the survey results, if any are made, should proceed cautiously with respect to student race/ethnicity. The response rates for all seven federal races/ethnicities are detailed immediately below:  
 5.17% American Indian or Alaska Native  
13.95% Asian  
 6.28% Black or African American  
 0.00% Hawaiian or Pacific Islander  
12.13% Hispanic or Latino  
10.64% Two or More Races  
17.91% White  
  
In addition, as described above, MDE will continue to monitor the response rates for student demographic characteristics and resume outreach to non-responding families to improve overall and demographic-specific 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**

As described above, MDE will be using new survey software to deploy the family engagement survey. The new software will provide LEAs with advanced notice of their participation and LEAs can alert families to the importance of the survey. In addition, the software should improve the distribution of paper copies of the family engagement survey and, hopefully, improve return of completed surveys. Also, with the new survey software comes the opportunity to expand the number of languages available for online survey completion. Beginning in spring 2023, families can complete the online survey in English, Hmong, Somali, or Spanish. MDE is also exploring establishing partnerships with agencies and support groups to assist families complete the engagement survey. Specifically, MDE is interested in providing the family engagement survey in an oral format so that families with an oral tradition can complete the survey orally rather than being restricted to the printed word. MDE is even exploring the degree to which the online survey software can “read” the survey items and response options to families to facilitate survey completion.  
  
And now that MDE’s building is open, MDE can return to telephone outreach to underrepresented families and students. This technique was quite successful in improving response rates prior to the COVID-19 pandemic, so MDE is hoping that returning to the outreach will positively impact response rates from underrepresented students, especially students who are American Indian, Alaska Native, or Black or African American.

**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 valid and reliable, including identifying a representative sample and monitoring the 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 and charter openings/closures have little overall impact on the representativeness of each year’s sampled students. In FFY2021, 25,801 students from 81 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, a completely new sample is generated. This process continues until the sample meets the ±1% tolerance. The number of samples generated varies from year-to-year but typically, 3-5 sample-review iterations are needed to identify an appropriate sample. In FFY2021, three samples were 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 and 20% of the students in the sampling frame. In FFY2021, 2,084 students were sampled and represented 7.73% of the students with IEPs in the sampling frame.  
  
Monitoring During Survey Deployment  
  
Typically, 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 FFY2019, FFY2020, and FFY2021 administrations of the parent survey, MDE’s offices were either closed in response to the COVID-19 pandemic (FFY2019 and FFY2020) or were unsafe due to construction in the new MDE offices (FFY2021), 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 during the summer of 2023 for reporting in the FFY2022 APR.

| **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)**

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 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 296 families that responded to the FFY2021 family engagement survey, 205 or 69.3%, 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. The average survey responses for the seven federal racial/ethnic groups were:   
4.34 American Indian or Alaska Native  
4.08 Asian  
4.21 Black or African American  
 NA Hawaiian or Pacific Islander (no families of Hawaiian or Pacific Islander students responded to the survey)  
4.59 Hispanic or Latino  
4.45 Two or More Races  
4.61 White  
4.55 Total/All students  
  
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 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 of the FFY2021 survey indicated an inter-item reliability of 0.936, 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%. Minnesota’s FFY2021 survey has a confidence interval of 91.5%. Likely, the lower-than-typical response rate observed in the FFY2021 survey is to blame for the lower confidence interval. 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 the 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 FFY2021 parent survey has a margin of error of 5.00%, meaning that the percentage of parents with favorable experiences with schools is 69.3% ±5.00%, or between 64.3 and 74.3%.

## 8 - Prior FFY Required Actions

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

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

A) As described in the section, "Include the State's analyses of the extent to which the demographics of the parents responding are representative of children receiving special education services," the State conducts statistical tests to determine if the demographics of respondent children (primary disability, federal racial/ethnic groups, age, and home language) match the demographic characteristics of all children with a disability in the state. Strategies to address the discrepancies are also described in that section.  
  
B) In the section, "Describe the analysis of the response rate including any nonresponse bias that was identified," the State provided a summary of statistical examinations of nonresponse bias and potential sources of nonresponse bias.

## 8 - OSEP Response

OSEP’s response to the State’s initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover.

## 8 - Required Actions

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

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**Targets**

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

**FFY 2021 SPP/APR Data**

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

YES

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

81

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 2 | 0 | 424 | 0.00% | 0% | 0.00% | Met target | No Slippage |

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

YES

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

Minnesota defines ”disproportionate representation” as any LEA identified with risk ratio(s) exceeding 2.800 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 for an LEA to be included in calculations for Indicator 9. Of Minnesota’s 505 LEAs with at least 1 student with an IEP in the 2020-21 school year, 81 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) and were excluded from analysis. The remaining 424 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 2021-22 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 2 LEAs with numerical disproportionate representation, and both were identified using the alternate risk ratio. Both districts were forwarded to the next step in the process, LEA self-review, as described 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. In FFY2021, this self-review moved to our new online platform, Stepwell MN. 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 Assistance and Compliance staff notified the LEAs of meeting the data threshold and released the online policies and procedures self-review to be completed by a team of the LEA’s appropriate stakeholders. This new PPR self-review includes a series of questions designed to review LEA policies, procedures and practices and 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. Once the completed self-review was submitted, a team of MDE program monitoring staff from the Division of Assistance and Compliance reviewed the LEA’s responses. If noncompliance was identified, the LEA would advance to Step 3 (below). In FFY2021, neither of the 2 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 a 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’s 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 FFY2021, both LEAs identified with disproportionate representation related to this indicator completed the PPR. For the 2 LEAs that completed the PPR self-assessment, neither 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 resulted from inappropriate identification.

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

The COVID-19 pandemic appears to have impacted Minnesota’s public school enrollments. However, the impact does depend on student age/grade. Overall, Minnesota’s public school enrollments were increasing prior to the pandemic, but since the 2020 school year (SY), the counts of all students (those with and without an IEP) have been on a gradual decline. Below are the counts for the most recent five school years for overall enrollment (general and special education students, combined):   
2018 SY 884,944  
2019 SY 889,304  
2020 SY 893,203  
2021 SY 872,083  
2022 SY 870,506  
  
In contrast, the number of school-aged students with IEPs does not appear to have been impacted by the COVID-19 pandemic. The number of students with an IEP aged 5 and in kindergarten through grade 12 has continued to increase. Below are the counts of all school-aged children (students aged 5 and in kindergarten through 21) with IEPs in Minnesota:   
2018 SY 123,821  
2019 SY 128,632  
2020 SY 132,316  
2021 SY 132,551  
2022 SY 134,282  
  
The largest impact of the pandemic appears to have been on students with IEPs who are between 3 and 5 years of age and not yet in kindergarten. Since the 2020 SY, there has been a sharp decline in the number of students with IEPs in that age range:   
2018 SY 12,399  
2019 SY 13,072  
2020 SY 13,545  
2021 SY 11,961  
2022 SY 11,617  
  
Anecdotal evidence suggests that, during the pandemic, parents kept children between the ages of 3 and 5 years (not in kindergarten) at home and students were not evaluated at that time. Now that young children can begin school, parents are eager to have their child evaluated to determine if the child would benefit from special education services. These events have created a large influx of children in need of evaluation: referrals to MDE’s Help Me Grow program have been at near-historic highs since February 2022. Unfortunately, in addition to the nationwide shortage of special education instructors and teachers, there is also a shortage of staff qualified to evaluate students for their special education needs. At this point, it is unclear when the backlog of students in need of an evaluation will be cleared.

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

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

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

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**Targets**

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

**FFY 2021 SPP/APR Data**

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

YES

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

225

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 21 | 0 | 280 | 0.00% | 0% | 0.00% | Met target | No Slippage |

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

YES

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

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 an LEA to be included in calculations for Indicator 10. Of Minnesota’s 505 LEAs in the 2021-22 school year, 225 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 280 LEAs met the minimum enrollment criteria for one or more of the 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 2021-22 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 21 LEAs with numerical disproportionate representation in specific disabilities. Fifteen LEAs were identified using the risk ratio and weighted risk ratio, and the remaining six LEAs were identified using the alternate risk ratio. All 21 LEAs were forwarded to the next steps in the process, Step 2: LEA self-review, Step 3: Correction, and Step 4: Validation of correction, which are summarized in the 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. In FFY2021, this self-review moved to our new online platform, Stepwell MN. 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 released the online policies and procedures self-review to be completed by a team of appropriate stakeholders. This new PPR self-review includes a series of questions designed to review LEA policies, procedures and practices and 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. Once the completed self-review is submitted, a team of MDE program monitoring staff from the Division of Assistance and Compliance reviewed the LEA responses. If noncompliance was identified, the LEA would advance to Step 3 (below). In FFY2021, 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 a 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’s 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 2021, all 21 LEAs identified with disproportionate representation related to this indicator completed the PPR. For the 21 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 resulted from inappropriate identification.

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

The COVID-19 pandemic appears to have impacted Minnesota’s public school enrollments. However, the impact does depend on student age/grade. Overall, Minnesota’s public school enrollments were increasing prior to the pandemic, but since the 2020 school year (SY), the counts of all students (those with and without an IEP) have been on a gradual decline. Below are the counts for the most recent five school years for overall enrollment (general and special education students, combined):   
2018 SY 884,944  
2019 SY 889,304  
2020 SY 893,203  
2021 SY 872,083  
2022 SY 870,506  
  
In contrast, the number of school-aged students with IEPs does not appear to have been impacted by the COVID-19 pandemic. The number of students with IEPs aged 5 and in kindergarten through grade 12 has continued to increase. Below are the counts of all school-aged children (students aged 5 and in kindergarten through 21) with IEPs in Minnesota:   
2018 SY 123,821  
2019 SY 128,632  
2020 SY 132,316  
2021 SY 132,551  
2022 SY 134,282  
  
The largest impact of the pandemic appears to have been on students with IEPs who are between 3 and 5 years of age and not yet in kindergarten. Since the 2020 SY, there has been a sharp decline in the number of students with IEPs in that age range:   
2018 SY 12,399  
2019 SY 13,072  
2020 SY 13,545  
2021 SY 11,961  
2022 SY 11,617  
  
Anecdotal evidence suggests that, during the pandemic, parents kept children between the ages of 3 and 5 years (not in kindergarten) at home and students were not evaluated at that time. Now that young children can begin school, parents are eager to have their child evaluated to determine if the child would benefit from special education services. These events have created a large influx of children in need of evaluation: referrals to MDE’s Help Me Grow program have been at near-historic highs since February 2022. Unfortunately, in addition to the nationwide shortage of special education instructors and teachers, there is also a shortage of staff qualified to evaluate students for their special education needs. At this point, it is unclear when the backlog of students in need of an evaluation will be cleared.

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

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

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

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

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

## 10 - Required Actions

# Indicator 11: Child Find

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.14% | 96.28% | 96.31% | 95.56% | 96.00% |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **(a) Number of children for whom parental consent to evaluate was received** | **(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 166 | 161 | 96.00% | 100% | 96.99% | Did not meet target | No Slippage |

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

5

**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 five 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 individual student records and any correction has been tracked and verified by MDE. The evaluations were between eight and 21 days late. District comments suggested scheduling challenges to be the primary reason for late evaluations.

**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.**

In FFY2020, MDE initiated a revision of its monitoring process and contracted the 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. MDE completed the record review for FFY2021 using this new online system. The process for FFY2021 included generating a random statewide sample for each indicator. 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 the review online. MDE reviewed the documentation submitted and verified a random sample of the reviews. LEAs with identified noncompliance were then formally notified of the noncompliance. The LEA must then correct any noncompliance consistent with OSEP Memo 09-02.   
   
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 FFY2021 data are based on records reviewed from 128 LEAs, comprised of 201 individual districts.

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

Beginning in FFY2020, MDE elected to revise its baseline data because of the substantial changes in MDE’s monitoring process and methodology for data collection. There were concerns that the new data collection methods and monitoring process was 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 and raise awareness among parents of compliance affecting student outcomes.   
   
The data collected for B11 was impacted by the COVID-19 pandemic. While not identified specifically as the reason for noncompliance in the records identified above, LEAs have reported to MDE numerous ways the pandemic has impacted child find. LEAs have noted difficulty completing evaluations on time due to illness, quarantine and in-person restrictions.  
  
Last, MDE will address concerns that Minnesota did not report that that it verified that each LEA with noncompliance identified in FFY 2020 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system in the FFY2022 annual performance report.

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

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

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

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

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 was 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 was 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 was now in compliance. In FFY2020, 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. All of the LEAs with identified noncompliance in FFY2020 had only isolated incidents of noncompliance.

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

The data collection for the FFY2020 record review took place prior to the completion of the new web-based monitoring system, Stepwell MN. As a result, MDE used spreadsheets to track all identified noncompliance and verify correction. In general, for evaluation timelines, when record reviews were completed, LEAs reported the date the evaluation was due and the date the evaluation was completed. 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 2020**

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

## 11 - Prior FFY Required Actions

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

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

In FFY2020, MDE reported 3 findings of noncompliance for B11. In FFY2021, 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 did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2020 because it did not report that it verified correction of those findings, consistent with OSEP Memo 09-02. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2020 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system.

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 3 uncorrected findings of noncompliance identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

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

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

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 96.23% | 89.58% | 72.09% |

**Targets**

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

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 150 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 1 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 79 |
| 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. | 17 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 41 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 79 | 91 | 72.09% | 100% | 86.81% | Did not meet target | No Slippage |

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

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.**

Twelve of the records reviewed were cited for noncompliance because eligibility was not determined and the IEP was not in place prior to the child’s third birthday. Two records were cited solely for not making a timely referral for a Part B evaluation. One LEA reported poor student attendance, due to COVID, which delayed the referral. The other LEA did not provide additional information other than reporting that the LEA did not initiate a timely referral. Neither district indicated how late the district was in completing the Part B evaluation. MDE recognizes the need to amend its data collection practices to specifically gather this information.   
   
There were two records cited in which the eligibility determination was completed late. For one, the eligibility determination was 20 days late, and the district noted scheduling issues as the reason it was late. The other eligibility determination was 28 days late. The district reported staffing limitations as the reason eligibility was not determined prior to the child’s third birthday. As a birth mandate state, the children continued to receive Part C services until the evaluation was completed.   
   
Finally, the remaining eight records were cited because the IEP was not in place before the child’s third birthday. In all eight instances, the evaluation and eligibility determination was completed and the IEP was developed before the child’s third birthday, but the LEA had yet to receive consent to implement the IEP. Districts documented delays ranging from one to 71 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.**

In FFY2020, MDE initiated a revision of its monitoring process and contracted the 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. MDE completed the record review for FFY 2021 using this new online system. The process for FFY2021 included generating a random statewide sample for each indicator. 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 the review online. MDE reviewed the data submitted and verified a random sample of the reviews. LEAs with identified noncompliance were then formally notified of the noncompliance. The LEA must then correct any noncompliance consistent with OSEP Memo 09-02.   
   
Data for this indicator are gathered from examining records of children identified as exiting Part C services. Record reviews included questions asking 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 was in place by the child’s third birthday, and if any delays were due to family or child unavailability. The FFY2021 data are based on reviews of records from 86 LEAs, comprised of 99 individual districts.

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

Beginning in FFY2020, MDE elected to revise its baseline data because of the substantial changes in MDE’s monitoring process and methodology for data collection. There were concerns that the data collection methods and monitoring process were 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 and raise awareness among parents of compliance affecting student outcomes.

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 12 | 12 | 0 | 0 |

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

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

In years prior, 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. For LEAs with systemic or chronic noncompliance, a corrective action plan (CAP) was ordered, and the LEA was required to complete a subsequent review of student records in order to demonstrate the LEA is now correctly implementing the regulatory requirements. For LEAs with only isolated incidents of noncompliance, the LEA was required to correct only the individual cases of noncompliance. MDE did not review updated data to verify the LEA was now correctly implementing the regulatory requirements.   
   
In its review of the FFY2020 SPP/APR, OSEP found MDE did not sufficiently demonstrate that the LEAs corrected the findings of noncompliance identified in FFY2019 because MDE did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02, based on a review of updated data. In response to this, MDE examined each of the findings of noncompliance from FFY2019 and FFY2020 and reviewed updated data from each LEA to verify the correct implementation of the regulatory requirements. The five LEAs with identified noncompliance in FFY2019 and the twelve LEAs with identified noncompliance in FFY2020 were asked to review subsequent randomly selected records to demonstrate compliance. LEAs submitted paper reviews to MDE for approval. The submitted documentation confirmed that all of the LEAs were correctly implementing the regulatory requirements. MDE has reviewed updated data from all LEAs with identified noncompliance in FFY2019 and FFY2020 and verified that each LEA is correctly implementing the regulatory requirements.

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

The data collection for the FFY2020 record review took place prior to the completion of the new web-based monitoring system, Stepwell MN. As a result, MDE used spreadsheets to track all identified noncompliance and verify correction. For Part C to Part B transition, when record reviews were completed, the date the evaluation was completed and the date consent was received for the IEP were reported. 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.

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

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

**FFY 2019**

**Findings of Noncompliance Verified as Corrected**

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

In FFY2019, MDE followed the same process used in previous years, 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 were correctly implementing the regulatory requirements associated with this indicator. In FFY2022, MDE followed up with the remaining LEA to ensure compliance. The LEA was again asked to review a random sample of student files and submit documentation to MDE. MDE was able to verify, based on the updated review of records completed in FFY2022, that the remaining LEA is now correctly implementing the regulatory requirements consistent with OSEP Memo 09-02.

**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.

## 12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. 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.

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

In FFY2020, MDE reported 12 findings of noncompliance for B12. In FFY2021, MDE verified that all 12 LEAs with identified noncompliance were 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 case of noncompliance was corrected consistently 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 did not indicate the range of days beyond the third birthday when eligibility was determined and the IEP was developed and implemented. Specifically, for the two records that the State cited "solely for not making a timely referral for a Part B evaluation," the State did not report on the range of days beyond the third birthday when eligibility was determined and the IEP developed.

## 12 - Required Actions

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

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 89.53% | 79.73% | 91.99% | 83.82% | 71.58% |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition** | **Number of youth with IEPs aged 16 and above** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 133 | 206 | 71.58% | 100% | 64.56% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Minnesota found slippage on Indicator 13: the FFY2021 rate of 64.56% is substantially below the FFY2020 rate of 71.58%, a decrease of 6.99 percentage points. Of the 206 records reviewed in FFY2021, 133 were found in compliance with this indicator. As noted, this represents overall slippage from FFY2020, when 68 of the 95 records were found in compliance.  
   
MDE attributes the B13 slippage, in part, to the changes in the sampling, data collection and reporting methodologies. With the revision of its monitoring process, MDE reframed the sampling process and now includes students that have completed grade nine, not just students aged 16 and above. In compliance with Minnesota Statute 125A.08(b)(1), during grade nine, the student’s IEP must address the student's needs for the transition from secondary services to postsecondary education and training, employment, community participation, recreation, and leisure and home living. Although not an excuse for the noncompliance, for students under age 16, the transition services in the IEP may still be relatively new and errors may occur. Along with revising the sampling process and data reported, MDE revised the record review questions being asked of LEAs to better gather the information needed to accurately report on this indicator. MDE believes the revised questions and interpretation of the data more accurately reflect the intended measurement of this indicator and will allow MDE to better identify specific components of the noncompliance to provide more targeted technical assistance.  
   
An analysis of the noncompliance from FFY2021 identified a total of 58 LEAs with noncompliance related to this indicator, approximately 54% of the LEAs reviewed. Given the resource constrictions related to COVID-19 and staff shortages, MDE limited the data collection required of districts, so most reviewed only one (61%) or two (16%) student records for this indicator. Larger districts (23%) reviewed three records. With relatively small samples per district, generalities or identification of specific reasons for the slippage are unreliable at the district level. The greatest area of noncompliance continues to be with IEPs not including appropriate measurable postsecondary goals. This was found noncompliant in approximately 14% of the total records reviewed and was identified as noncompliant in almost 40% of the noncompliant records. Postsecondary goals not being based on age-appropriate transition assessments were cited in approximately 12% of the total records reviewed for this indicator and were identified as noncompliant in 34% of the noncompliant records. Also, IEPs not including courses of study that will reasonably enable the student to meet postsecondary goals continue to be a concern. This was found noncompliant in approximately 11% of the total records reviewed and was identified as noncompliant in almost 32% of the noncompliant records.  
   
In the past, MDE has provided training through the division of Assistance and Compliance on all Indicator 13 requirements through record review compliance training and general compliance training for new special education staff. These trainings have been on hold for the last few years due to the COVID-19 pandemic and the work being done by MDE’s redesign of the monitoring process. The Division of Assistance and Compliance is developing new, asynchronous trainings that will be available to LEAs on demand to better address LEA needs for training on developing compliant transition plans. MDE’s Division of Special Education has taken advantage of the shift to increased virtual communication and interactions to target more stakeholders in rural areas of the state. MDE is continuing its efforts with Employment Capacity Building strategies cohorts and piloting initiatives around pre-employment transition services. MDE is also working with the National Technical Assistance Center on Transition and the Minnesota Department of Vocational Rehabilitation Services to develop resources to assist LEAs in developing high-quality transition programming with an emphasis on pre-employment transition services.

**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 a revision of its monitoring process and contracted the 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. MDE completed the record review for FFY2021 using this new online system. The FFY2021 Indicator 13 record review process included generating a random statewide sample from the Minnesota Automated Reporting Student System, 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 the review of the record(s) online. MDE reviewed the documentation submitted and verified a random sample of the reviews. LEAs with identified noncompliance were then formally notified of the noncompliance. The LEA must then correct any noncompliance consistent with OSEP Memo 09-02.   
   
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 FFY2021 data are based on reviews of records from 128 districts comprising 107 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 the 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 student's age, 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. Beginning in FFY2020, as MDE had revised its process for indicator data collection, MDE chose to report data better aligned with the state’s requirements and revised its baseline in FFY2020 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 could assist districts with training and implementation to increase compliance and raise awareness among parents of compliance affecting student outcomes.  
  
Last, MDE will address concerns that Minnesota did not report that that it verified that each LEA with noncompliance identified in FFY 2020 is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system in the FFY2022 annual performance report.

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 22 | 22 | 0 | 0 |

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

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

LEAs with identified noncompliance are required to correct all individual student noncompliance, including developing 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. In FFY2020, 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. All of the LEAs with identified noncompliance in FFY2020 had only isolated incidents of noncompliance.

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

The data collection for the FFY 2020 record review took place prior to the completion of the new web-based monitoring system, Stepwell MN. As a result, MDE used spreadsheets to track all identified noncompliance and verify correction. For correction of noncompliance, the LEAs needed to submit documentation to MDE to demonstrate 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, MDE has verified that all records with identified noncompliance in FFY2020 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 2020**

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

## 13 - Prior FFY Required Actions

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

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

In FFY2020, MDE reported 22 findings of noncompliance for B13. In FFY2021, MDE verified that each LEA with identified noncompliance were 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 case of noncompliance was corrected consistently 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 did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2020 because it did not report that it verified correction of those findings, consistent with OSEP Memo 09-02. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA.

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 22 uncorrected findings of noncompliance identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

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

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2013 | Target >= | 25.80% | 26.20% | 26.60% | 26.60% | 18.83% |
| A | 23.39% | Data | 23.24% | 27.14% | 24.49% | 24.82% | 18.83% |
| B | 2009 | Target >= | 66.80% | 67.20% | 67.60% | 67.60% | 59.62% |
| B | 61.90% | Data | 61.71% | 65.67% | 58.75% | 61.12% | 59.62% |
| C | 2009 | Target >= | 79.10% | 79.50% | 79.90% | 79.90% | 73.43% |
| C | 77.60% | Data | 81.14% | 80.05% | 73.62% | 76.58% | 73.43% |

**FFY 2020 Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 20.16% | 21.50% | 22.83% | 24.17% | 25.50% |
| Target B >= | 60.50% | 61.73% | 62.25% | 63.12% | 64.00% |
| Target C >= | 74.69% | 75.96% | 77.22% | 78.49% | 79.75% |

**Targets: Description of Stakeholder Input**

In preparation for the FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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 2021 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 1,007 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 135 |
| Response Rate | 13.41% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 30 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 57 |
| 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) | 6 |
| 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). | 6 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 30 | 135 | 18.83% | 20.16% | 22.22% | Met target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 87 | 135 | 59.62% | 60.50% | 64.44% | 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) | 99 | 135 | 73.43% | 74.69% | 73.33% | Did not meet 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** | **2020** | **2021** |
| Response Rate | 32.34% | 13.41% |

**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 software that has reached the end of its life. LEAs cannot anticipate or plan for their participation in the Post-School Outcomes survey and the survey was often a surprise to LEAs and schools. Because students had left school a year prior to the survey, LEAs never had an opportunity to conduct targeted outreach to likely or potential “exiters” and gather their contact information. However, MDE is currently working with a developer to construct new software that will be used to deploy the Post-School Outcomes survey. One feature of the new software will be a long-term calendar: LEAs will be able to see and anticipate their participation in the Post-School outcomes survey up to six years in advance. This means that LEAs will be able to connect with students who are planning on or are likely to exit the LEA in the coming year and secure contact information (telephone numbers, social media user names) in anticipation of their participation in the survey. The ability of LEAs to anticipate their participation in the survey will not only improve overall response rates but will also improve the response rates among hard-to-reach students, including non-White students and students who are highly mobile.   
  
As the software is finalized and prepared to share with LEAs, MDE will work with the developer and the LEAs to develop materials to support outreach. This may include letters to students (to explain the importance of their participation in the survey), ways to gather student contact information (e.g., telephone numbers, social media contacts), and strategies that can lead to successful outreach to students. In addition, as MDE plans to deploy the new software this spring (for reporting in the FFY2022 APR), the first cohort of districts using the software will be instrumental and will be able to share their thoughts and processes not just with MDE but with other districts as they look forward to using the software in future years. MDE believes the combination of the new software, the predictability of the Post-School Outcomes survey cycle, and materials and outreach strategies will help improve the response rate, including the response rate for historically underserved and undersurveyed students.

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

Analysis of the response rate included a comparison of the proportions of student federal race/ethnicity with the proportions of exiters from the LEAs participating in the Post-School Outcomes survey and the state. This analysis demonstrated that the survey respondents did not match the LEA exiters, nor did they match the exiters in the state. To some extent, a discrepancy between survey responders and state exiters is expected. As outlined in MDE’s sampling plan for B14, Minnesota has divided the LEAs in the state into 6 different groups or cohorts for the purposes of completing the B8 and B14 surveys. While the distribution of student race/ethnicity in each cohort closely approximates the distribution of student race/ethnicity in the state, there is no guarantee that the distribution of race/ethnicity among exiters in the cohort will approximate the distribution of exiters in the state. Unfortunately, that was found to be true this year and may be due to the exiters in the cohort. If so, the problem may have been compounded by the challenges MDE faced deploying the Post-School Outcomes survey and the old software.   
  
As for nonresponse bias, there are a number of potential reasons why students and/or their families may be disinclined to participate in the Post-School Outcomes survey. They are: a) the survey software; b) timing of the survey deployment; c) LEA usability of the survey data; d) student mobility and availability; e) post-pandemic spike in general frustration and dissatisfaction; and f) a general distrust between government entities like MDE and members of some communities. As described above, the disruption caused by the software breakage was unfortunate and may have resulted in quite a number of LEAs being unable to reach students. And, without outreach from the LEAs, students don’t have an opportunity to respond to the survey.  
  
Next, the Post-School Outcomes survey is deployed each year from late April to early May. LEAs begin deploying the survey immediately and continue until the survey closes in mid-September. Much of the deployment window occurs during the summer when smaller LEAs and charters may be closed or not have appropriate staff engaged to deploy the survey. MDE does offer financial support for LEAs to hire or retain staff during the summer, expressly for the purpose of supporting the completion of the Post-School Outcomes survey. Still, many LEAs choose not to avail themselves of the funds. As a result, some students may not have an opportunity to complete the Post-School Outcomes survey because the LEA did not deploy the survey, which could introduce nonresponse bias.  
  
In addition, LEAs may be disincentivized to participate in the Post-School Outcomes survey because there are no clear benefits to them for doing so. The survey is required by OSEP, and many LEAs will comply with that requirement. But the questions on the survey are focused on students' experiences after they left the LEA, and there is little information LEAs can glean from student responses to improve their programs. Some LEAs may decline participation in the survey or engage in the survey sporadically because the survey outcomes have little bearing on their day-to-day work. Again, it’s difficult for students to respond to the survey if the LEA does not conduct outreach to students who recently exited their program.   
  
Furthermore, some nonresponse bias may be due to student mobility and availability. As students leave secondary school and transition to the next phase of their lives, some may acquire new telephone numbers (or leave their parents’ phone plans), change cities or states, and/or enter postsecondary schools or work. The result is that it may be much more difficult for LEAs to reach students and for students to have sufficient time to respond to a phoned survey. So student mobility and availability could introduce nonresponse bias: students who have successfully transitioned to life after high school may not be contacted or have time to respond to the Post-School Outcomes Survey.   
  
Next, there has been a general increase in frustration and dissatisfaction across the entire educational community as the world emerges from the worst of the COVID-19 pandemic. MDE has observed these effects in the results of the Minnesota Student Survey, emails and phone calls with parents, and communications with LEAs, school staff and advocates. Anecdotal reports also suggest that no one is immune to this general dissatisfaction: increased frustration is shared between advocates and LEA and school staff in their communications. Because we are slowly emerging from the pandemic, it is likely that this post-pandemic “story” is still being written. Further investigation and study may be needed to fully understand the frustration of students and their desire, or lack thereof, to complete the Post-School Outcomes survey.   
   
Last, there is a distrust between the American Indian and Black families living within Minnesota’s borders and the Minnesota government, including MDE. The historical trauma experienced by members of both the American Indian and Black communities in Minnesota impacts community members’ lives to this day. In an effort to address past trauma and create a space for healing, the Division of Special Education has begun work, which includes special education staff meeting regularly for updates and feedback from the Tribal Nations Education Committee (TNEC), especially on the SSIP/Indicator 17. In addition, Division of Special Education staff meets monthly with the Director of the Office of American Indian Education and the MDE Tribal Liaison (two different positions and people). The monthly meetings focus on improving communications between TNEC and the Division of Special Education as well as the relationship between the Division of Special Education and families of American Indian students. Although TNEC and the MDE Division of Special Education are taking positive steps, the historical trauma experienced by American Indian community members in Minnesota is still evident will take time to heal.   
  
Furthermore, members of the Black communities in Minnesota have historical trauma that has been compounded by more recent trauma. Since 2015, seven (young) black men have been killed through interactions with members of law enforcement, only two of which had brandished or fired a gun. And, in four of those killings, the Minnesota Attorney General’s office declined to file charges against the officers. These outcomes added to an already existing wedge between Government officials and members of the Black community. An even deeper divide came about after the murder of George Floyd in 2020, which was particularly egregious as it was captured on video and triggered several months of protests across the Twin Cities metro area. Those protests reignited after the murders of Daunte Wright (2021 and Amir Locke (2022), ensuring more distrust between our Black community and Government agencies, In the face of historic and recent trauma, members of Minnesota’s Black, Brown, and Indigenous communities may be unwilling to share their experiences with a government agency like MDE.

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

MDE conducted two sets of statistical tests to determine if: a) the exiters in this year’s survey sample were representative of the state as a whole (as reported in EDFacts C009), and b) the survey responders were representative of the state as a whole. A Chi-square was used for both sets of statistical tests with two key demographic characteristics: primary disability and race/ethnicity. The Chi-square test assesses whether or not two observations (e.g., proportion of the students in 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, there were statistically significant differences (p<.05) for both student race/ethnicity and primary disability codes. For student race/ethnicity, there was an undersampling of students from Asian and Black backgrounds and an oversampling of students from a White background. For the primary disability category, there was an undersampling of students with Autism Spectrum Disorder and Speech or Language Impairments and an oversampling among students who were in the low incidence disability categories (e.g., multiple disorders, visually impaired). In sum, the sample of students slated to participate in the Post-School Outcomes survey was not representative of the statewide exiters.   
  
Representativeness of the survey respondents  
  
The demographics of the state’s exiters were also compared to the survey responders for race/ethnicity and primary disability. The results of the Chi-square analyses showed no statistically significant differences between the survey responders and the statewide exiters with respect to primary disability category (p>.05). In other words, although the overall sample of students did not match the primary disability category of the statewide exiters, the students who responded to the survey did match the statewide exiters. However, there was a statistically significant difference between the statewide exiters and the students who responded to the survey in terms of student race/ethnicity (p<.05). Comparison of the two sets of data showed a higher than expected rate of response from American Indian/Alaska Native and White students and a lower than expected rate of response from Asian, Hispanic and Two or More Races students.   
  
Response rates by demographic characteristics  
  
Primary Disability  
Specific learning disabilities 25.93%; Other health impairments 24.44%; Emotional disturbance 20.74%; Autism 11.11%; Intellectual disability 9.63%; All low incidence disabilities (Deaf and hard of hearing, Orthopedic impairment, Severely multiply impaired, Traumatic brain injury, and Visual impairment combined) 5.93%; and Speech or language impaired 2.22%; no students who were Visually impaired or DeafBlind responded to the survey.  
  
Race/Ethnicity  
White 75.56%, American Indian or Alaska Native 8.89%, Hispanic or Latino 6.67%, Black or African American 5.19%, and Two or More Races 3.70%. No students who were Asian or 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 the current Post-School Outcomes Survey implementation is the outdated online software used to deploy the survey, as described above. 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 regarding 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.  
  
In addition, MDE will deploy new software (Stepwell MN) for the administration of the post-school outcomes survey. The shift to the new software means that LEA staff will be better able to deploy the survey to their former students. In addition, the new software provides MDE with increased opportunities to view real-time survey completion rates among participating districts which will allow MDE to offter more timely and focused technical assistance to LEAs. MDE will be able to tailor the technical assistance to LEAs to support their work and outreach to former students who are underrepresented among the survey completers. For example, if LEA 1 is challenged to reach Hispanic/Latinx students and LEA 2 is challenged to reach Asian students, MDE can provide general technical assistance (e.g., searching social media outlets) to both districts but can also provide targeted technical assistance (e.g., outreach to local parent groups) to connect with students. And, beginning next year, LEAs will be able to reliably predict their participation in the post-school outcomes survey and prepare for deploying the survey in future years. This means that LEAs can gather student contact information prior to student departure instead of scrambling to find student contact information after the student has already exited, which is the current practice. Having student contact information, including social media usernames, may help improve LEA’s outreach and success contacting students, especially students from underrepresented groups.

**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 in 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 exiters 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 exiters 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 exiters. 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 60 LEAs and 825 students were included in the Post-School Outcomes survey sampling frame. Twelve (20.0%) of the LEAs had one or more exiters respond to the Post-School Outcomes survey, with a total of 135 students responding to the survey (13.41% response rate). Because of the failure of the old survey deployment software, it is unclear how many attempts to contact students LEAs were able to make prior to the software failure. However, with the new survey software, MDE will be better able to deploy the survey and track attempts by LEAs to contact students.

| **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 | 2022 PSOSurvey |

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

Software Limitations   
  
As explained above, MDE has been working with a software developer to support the deployment of the Post-School Outcomes survey, but the new software was not yet ready for use in the spring of 2022. Instead, MDE had to rely on the old software. Then, in the middle of survey deployment, there was a catastrophic break in the old software: LEAs that had begun outreach for the Post-School Outcomes survey were unable to see their list of students, and new LEAs and new contact lists of students were added without any warning or direction for the MDE staff. As a result of the software problems, many LEAs intending to deploy the Post-School Outcomes survey were unable to begin, continue, or finish their work. In addition, MDE had a mid-summer scramble to develop a fast, secure method for LEAs to forward surveys that had been completed on paper. (Because of all the problems with the existing software, MDE was committed to finding a relatively easy delivery system to reduce the burden on LEAs.) Although some LEAs were able to finish their work and others successfully forwarded their paper copies of the Post-School Outcomes survey to MDE, many districts were unable to complete the deployment of the survey. The breakage of the old software was a substantial contributor to the low response rate MDE experienced this year and may have contributed to the lack of a representative sample and the lack of representative survey respondents observed in FFY2021.  
  
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 ($10.33 per hour as of 01/01/2022) compared to small employers ($8.42 an hour as of 01/01/2022). 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 $13.50 per hour at a small business and $15.00 per hour at a large business. And as of 01/01/2022, 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 2023 (Minneapolis) and 2022 (St. Paul) with yearly, incremental increases in the minimum wage based on the cost of living adjustments.  
  
Because Minnesota has three minimum wages tied to the location of employment, in FFY2018, MDE adjusted the Post-School Outcomes Survey to accurately capture respondents’ pay rates 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. Compared to last year, the only changes made were for the hourly pay rates in the three locations (St. Paul, Minneapolis, and all other locations).

## 14 - Prior FFY 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.

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

The required analyses have been conducted and are summarized in the sections above. The analyses employed and their outcomes are described in the section “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.” The strategies Minnesota will employ to remedy the discrepancies are summarized in the section, “If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.”

## 14 - OSEP Response

OSEP’s response to the State’s initial FFY 2021 SPP/APR submission required the State to submit a revised sampling plan for this indicator by June 1, 2023. The State has submitted a revised plan and OSEP will respond under separate cover.

## 14 - Required Actions

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

# 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 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 10 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 6 |

**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 FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 20.00% | 15.00% - 20.00% | 20.00% - 25.00% | 20.00%-25.00% | 20.00%-25.00% |
| Data | 9.09% | 33.33% | 33.33% | 36.36% | 36.36% |

**Targets**

| **FFY** | 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% |

**FFY 2021 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2020 Data** | FFY 2021 Target (low) | FFY 2021 Target (high) | FFY 2021 Data | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6 | 10 | 36.36% | 20.00% | 25.00% | 60.00% | Met target | No Slippage |

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

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range is used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 35 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 26 |

**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 FFY2021 APR, MDE solicited input and feedback from diverse stakeholders and community members. More than 130 individuals from multiple racial/ethnic groups and tribal nations participated in community listening session meetings (additional 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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."  
-Minnesota's special education directors (approximately 300 individuals).  
-Staff in MDE's Division of Special Education, Division of Assistance and Compliance, the Early Childhood Special Education team, and the Special Education School Finance team.   
-Staff from other Minnesota state agencies, including the Minnesota Council on Disabilities, the Minnesota Department of Employment and Economic Development, and the Minnesota Office of Higher Education.  
  
Each of the stakeholder groups had differing levels of understanding about the SPP/APR, so MDE authored a Part B Indicator Guide to provide background information on the goals and purpose of the SPP/APR. The Part B 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 both tabular and graphic formats), and targets that OSEP had approved in the FFY2020 APR. During the listening sessions, attendees were encouraged to share their concerns, suggestions to address those concerns (if they had any), and possible ways MDE could address the concerns by providing tools or TA to districts, families or parents.   
  
MDE held 7 virtual listening sessions in November and December to solicit community member input. When community members registered to attend a session (or sessions), they received an email confirmation that included a link to the fully accessible Part B Indicator Guide, which was available on the MDE website. In addition, each listening session began with an overview of the purpose or intent of the SPP/APR, how the APR is used by OSEP and MDE, and a brief review of results shared in the Part B Indicator Guide. The 7 listening sessions included: statewide assessments (B3), early childhood outcomes (B7), disproportionality and equity (B4a, B4b, B9, and B10), secondary and postsecondary success (B1, B2, and B14), educational environments (B5 and B6), family or parent engagement (B8), and compliance monitoring (B11, B12, B13) and dispute resolution (B15 and B16). Although each listening session was scheduled for two hours to allow for a full conversation about the indicators, no listening session required more than an hour. In all cases, the session facilitator and notetaker remained in the virtual space after the end of the conversation so that, should an attendee arrive afterward, their comments and ideas could be recorded. In addition to the indicator-focused listening sessions, 11 open office hours were held for discussion of any indicator or the SPP/APR. All listening sessions and office hours were facilitated by the Part B Data Manager. Notes from the listening sessions and office hours were compiled and themed with the resulting comments shared with staff in the Divisions of Special Education and Assistance and Compliance, the Early Childhood Special Education team, and SEAP.  
  
MDE is committed to ongoing conversations with stakeholders about the APR, targets, and strategies to achieve those targets and has laid the groundwork for doing so during the meetings to discuss the APR. In addition, MDE is committed to growing the number and diversity of stakeholders providing comments on the APR, indicators, targets, and strategies to achieve those targets. For the FFY2022 SPP/APR, MDE will focus efforts on obtaining input and feedback from traditionally underrepresented racial and ethnic groups. In addition, 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 FFY2021 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 making the final document 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** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 80.00% - 90.00% | 80.00% - 90.00% | 80.00% - 90.00% | 80.00%-90.00% | 80.00%-90.00% |
| Data | 92.68% | 84.62% | 91.67% | 92.59% | 86.96% |

**Targets**

| **FFY** | 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% |

**FFY 2021 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2020 Data** | **FFY 2021 Target (low)** | **FFY 2021 Target (high)** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 26 | 35 | 86.96% | 80.00% | 90.00% | 74.29% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

MDE continually offered mediation services utilizing a roster of highly experienced and trained mediators throughout FY 2021-22. Mediators reported increased difficulties during FY 2021-22 in helping parties resolve their disputes during mediation. According to mediators, the staffing challenges faced by Minnesota LEAs during the nationwide special educator staffing shortage and the high levels of stress and trauma experienced by all parties during the COVID-19 pandemic were the most substantial barriers contributing to lack of mediated agreements. However, mediators also reported that they observed improvement in relationships between the parties during mediation sessions, even when parties were unable to reach a written agreement.

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

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

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

**Measurement**

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

**Instructions**

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

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

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

Overview of the Three Phases of the SSIP

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

*Phase I: Analysis:*

- Data Analysis;

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

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

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

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

- Infrastructure Development;

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

- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

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

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

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

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

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

## 17 - Indicator Data

**Section A: Data Analysis**

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

Minnesota’s State-identified Measurable Result (SiMR) is to improve 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)**

YES

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

Minnesota's SiMR emphasizes the graduation rates of students with IEPs who are American Indian/Alaska Native or Black/African American.

**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.**

The theory of action/logic model can be found online via this link: https://education.mn.gov/mdeprod/idcplg?IdcService=GET\_FILE&dDocName=PROD045754&RevisionSelectionMethod=latest&Rendition=primary

**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** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 59.00% | 60.00% | 61.00% | 62.00% | 63.00% |

**FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | **Status** | **Slippage** |
| x | 1,832 | 59.00% | 59.00% | 63.00% | Met target | No Slippage |

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

Minnesota’s SiMR continues to be the improvement of 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 data presented above is for the students with IEPs who graduated in the 2020-21 school year.

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

cause 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 completed by late March or early April. At that time, special education staff reviewed the data and calculated 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 6 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 elements designed to assess the short-, mid-, and long-term outcomes at LEAs and 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 an 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 collected data on a wide range of topics, including:   
-the capacity of LEAs and MDE to support the implementation of the EBP;   
-mentor’s knowledge acquired during EBP training;   
-mentor self-assessments of their implementation of the EBP;   
-observations of the 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's time was devoted to getting students connected to the internet, troubleshooting space issues (e.g., multiple youths 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 the fall of 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, partner 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.

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

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

https://education.mn.gov/mdeprod/idcplg?IdcService=GET\_FILE&dDocName=PROD081346&RevisionSelectionMethod=latestReleased&Rendition=primary

**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 the 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 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 aggregated and disaggregated forms so that LEAs could contextualize their progress within the context of all LEAs.   
  
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 encountered an issue or barrier they could not 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, student and family engagement activities, 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, as 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 – the 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.   
  
In addition, during the 2021-22 and 2022-23 school years, MDE will begin onboarding new LEAs to the SSIP work and is scaling up implementation. 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. However, if infrastructure changes are made, they will be reported on in subsequent reports.

**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 the 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 have those needs met. Check & Connect assumes 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 communication 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 in 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 the mentors’ 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 the implementation of Check & Connect. Once those policies, practices, or procedures are identified, trained staff can modify, alter, or update them to allow the 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 help families understand the importance of a high school diploma for their students. That knowledge and understanding can help families to better support their students 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 a positive relationship, students can engage or re-engage with school and eventually accrue credits and complete the 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 the fidelity of implementation: Check & Connect Self-Assessment, Check & Connect Practice Profiles, and 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. 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 spring, but the COVID-19 pandemic interrupted collecting the Self-Assessment results in the spring of 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 no spring 2021 self-assessment data exists, 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 who began the program in the fall completed their Practice Profile in November and mentors 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 percentage 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 of 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 implement 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 the 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 on all of their reviewed records, with 67% of the mentors achieving 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 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 percentage 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 an MDE-developed instrument to capture the scope of an LEA’s implementation of Check & Connect. While LEAs could 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) the 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 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 in 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 implementing 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 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 support 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). 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 the 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 the 4 focus groups held on a virtual meeting platform. The results of the focus groups were:   
-The strengths of the Check & Connect program were the consistency of the mentors and mentors as a family resource. Mentors’ persistence and commitment to helping 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 during 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. Parents often reach out to mentors for assistance to navigate the school system, solve problems, and access school resources, especially as learning models changed during 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 the 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 could 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 reduces 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 partnered with MDE – Duluth, Osseo, Minneapolis, and St. Paul – are now implementing their EBP independently with as-needed support from MDE. 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 already 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 more.   
  
In accordance with the Active Implementation framework, MDE will coach new LEAs to use the hexagon tool to identify an EBP that will increase the 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, emphasizing 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 tasks in the FFY2022 APR.

**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.**

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

Because Minnesota is reporting lag-year SiMR data, the stakeholder input relevant to SSIP activities in the 2020-21 school year occurred in the fall of 2021 and was reported in the FFY2020 APR. At that time, 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, 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. It 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 the Coalition for Children with Disabilities who provide updates on their work. The advocacy organization representatives have the opportunity to share any trends they notice 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 advance legislative priorities to 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 a 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, and 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 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.   
  
In mid-December, the Guide was also forwarded to all SEAP members and internal Division of Special Education staff. 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, making the final document 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

**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).**

Some of the information provided above will look familiar because the FFY2020 APR included information for the FFY2021 APR as additional text.

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

## 17 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

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

**Name:**

Kirsten L. Rewey

**Title:**

Data Reporting and Evaluation Manager

**Email:**

Kirsten.rewey@state.mn.us

**Phone:**

16515828638

**Submitted on:**

04/27/23 6:36:35 PM

# Determination Enclosures

## RDA Matrix

**Minnesota**

2023 Part B Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[4]](#footnote-5)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 76.67% | Meets Requirements |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 24 | 20 | 83.33% |
| **Compliance** | 20 | 14 | 70.00% |

**2023 Part B Results Matrix**

**Reading Assessment Elements**

| **Reading Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 87% | 1 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 81% | 1 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 31% | 2 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 81% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 32% | 2 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 91% | 1 |

**Math Assessment Elements**

| **Math Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 87% | 1 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 81% | 1 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 51% | 2 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 88% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 33% | 2 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 89% | 1 |

**Exiting Data Elements**

| **Exiting Data Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of Children with Disabilities who Dropped Out** | 9 | 2 |
| **Percentage of Children with Disabilities who Graduated with a Regular High School Diploma\*\*** | 90 | 2 |

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

**2023 Part B Compliance Matrix**

| **Part B Compliance Indicator[[5]](#footnote-6)** | **Performance (%)** | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.** | Not Valid and Reliable | N/A | 0 |
| **Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 11: Timely initial evaluation** | 96.99% | NO | 2 |
| **Indicator 12: IEP developed and implemented by third birthday** | 86.81% | YES | 1 |
| **Indicator 13: Secondary transition** | 64.56% | NO | 0 |
| **Timely and Accurate State-Reported Data** | 91.39% |  | 1 |
| **Timely State Complaint Decisions** | 100.00% |  | 2 |
| **Timely Due Process Hearing Decisions** | 100.00% |  | 2 |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

## Data Rubric

**Minnesota**

FFY 2021 APR[[6]](#footnote-7)

|  | **Part B Timely and Accurate Data -- SPP/APR Data** |  |
| --- | --- | --- |
| **APR Indicator** | **Valid and Reliable** | **Total** |
| **1** | 1 | 1 |
| **2** | 1 | 1 |
| **3A** | 1 | 1 |
| **3B** | 1 | 1 |
| **3C** | 1 | 1 |
| **3D** | 1 | 1 |
| **4A** | 0 | 0 |
| **4B** | 0 | 0 |
| **5** | 1 | 1 |
| **6** | 1 | 1 |
| **7** | 1 | 1 |
| **8** | 1 | 1 |
| **9** | 1 | 1 |
| **10** | 1 | 1 |
| **11** | 1 | 1 |
| **12** | 1 | 1 |
| **13** | 1 | 1 |
| **14** | 1 | 1 |
| **15** | 1 | 1 |
| **16** | 1 | 1 |
| **17** | 1 | 1 |
|  | **Subtotal** | 19 |
| **APR Score Calculation** | **Timely Submission Points** - If the FFY 2021 APR was submitted on-time, place the number 5 in the cell on the right. | 5 |
|  | **Grand Total** - (Sum of Subtotal and Timely Submission Points) = | 24 |

|  |  | **618 Data[[7]](#footnote-8)** |  |  |
| --- | --- | --- | --- | --- |
| **Table** | **Timely** | **Complete Data** | **Passed Edit Check** | **Total** |
| **Child Count/**  **Ed Envs**  **Due Date: 4/6/22** | 1 | 0 | 1 | 2 |
| **Personnel Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Exiting Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Discipline Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **State Assessment Due Date: 12/21/2022** | 1 | 1 | 1 | 3 |
| **Dispute Resolution Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **MOE/CEIS Due Date: 5/4/22** | 1 | 0 | 1 | 2 |
|  |  |  | **Subtotal** | 19 |
| **618 Score Calculation** |  |  | **Grand Total** (Subtotal X 1.23809524) = | 23.52 |

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 24 |
| B. 618 Grand Total | 23.52 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 47.52 |
| Total N/A Points in APR Data Table Subtracted from Denominator | 0 |
| Total N/A Points in 618 Data Table Subtracted from Denominator | 0.00 |
| **Denominator** | 52.00 |
| D. Subtotal (C divided by Denominator\*) = | 0.9139 |
| E. Indicator Score (Subtotal D x 100) = | 91.39 |

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

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

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

**DATE: February 2023 Submission**

**SPP/APR Data**

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

**Part B 618 Data**

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

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

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

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

## Dispute Resolution



## How the Department Made Determinations

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

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

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