**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**

**Nebraska**



**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**

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

244

**General Supervision System:**

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

See FFY 2020 General Supervision System Attachment to the SPP APR Introduction

**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.**

Nebraska’s statewide system of technical assistance is based on regional support networks with multiple collaborating partners engaged in this process.

Through regional and statewide assignments, the NDE, Office of Special Education (OSE) staff provides ongoing technical assistance to support school districts in addressing their unique needs and challenges. The NDE, OSE created the Improving Learning of Children with Disabilities (ILCD) process based upon the State Performance Plan (SPP), Part B indicators, and the Results Driven Accountability (RDA) initiatives in place within the state. The ILCD process is designed to enhance program improvement that will result in improved outcomes for children with disabilities. With stakeholder input, NDE organized the SPP indicators into three Impact Areas:

Improving developmental outcomes and academic achievement (school readiness) for children with disabilities;
Improving communication and relationships among families, schools, communities, and agencies; and
Improving transitions for children with disabilities from early intervention to adult living.

See Technical Assistance System Attachment for full description of the mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.

**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.**

NDE provides an array of professional development opportunities through intra-agency cross-team efforts to ensure that education providers have the skills to effectively provide services that improve results for children with disabilities. NDE’s Early Childhood Training Center (ECTC) has been the hub of technical assistance and professional development statewide for teachers and providers in early care and education settings. The NDE, OSE also works in partnership with LEAs, ESUs, and IHEs to provide a coherent, comprehensive, and aligned network of professional development. In the last five years, the NDE, OSE has also developed professional development through the Nebraska MTSS network. The NDE, OSE is committed to the build out of an interconnected system framework, known as NeMTSS. With NeMTSS, NDE anticipates that through a statewide professional learning community charged with building capacity and providing professional learning opportunities monthly, expanding infrastructure, connecting to key personnel and communicators, and including diversity of expertise encompassing the whole child, districts will have the support needed to ensure each student can become a proficient reader. This system will create an aligned framework and outcomes while focused on providing a reputable source for resources grounded in evidence and research. The NeMTSS continued integration of PBIS, Pyramid, and RtI provides statewide system level training as well as regional supports in each expertise area to identify infrastructure gaps and barriers with stakeholder groups, including families and community leaders.

Statewide implementation support teams work through each discretionary partner, in collaboration with NDE, to increase the capacity of regular and special education teachers, related services providers, and administrators to implement evidence-based practices such as MTSS, including Response to Intervention (RtI), Positive Behavior Supports (PBIS), and Early Childhood Positive Behavior Supports (EC-PBIS Pyramid Model). The teams also focus on specific supports for students who experience autism spectrum disorder, traumatic brain injury, and sensory impairments.

The statewide implementation support teams work through a four-phase process: exploration, installation, initial implementation, and full implementation.

Exploration: Schools identify social-emotional-behavioral support as an area for growth. Schools attend a Nebraska PBIS overview meeting, determine if Nebraska PBIS is a “good fit” for their campus and garner staff/stakeholder commitment.

Installation: Schools establish a representative team to lead the process, attend training and access coaching to install Tier 1 school-wide data, systems and practices. The school team includes an administrator, a facilitator/leader, teachers of general and special education, support staff members, parents, and, if at the high school level, students.

Initial Implementation: Schools implement, evaluate and adjust Tier 1 systems so they achieve 80% fidelity of implementation and 80+% of students respond to Tier 1 systems school-wide and in the classroom.

Full Implementation: School teams attend training and access coaching to maintain Tier 1 and install Tier 2–3 data, systems, and practices.

In building capacity for the scale-up of the MTSS framework and to support districts in an environment of strong local control, Nebraska has required each district to review their student data and establish a Targeted Improvement Plan (TIP). Each TIP is required to have (a) a focus for improvement, (b) a measurable goal with annual targets, (c) a student-centered, evidence-based strategy to affect the outcomes for students with disabilities, (d) an implementation plan, and (e) criteria to measure fidelity of the student-centered, evidence-based strategy selected. The TIP must be aligned to the overall general education improvement activities the district is implementing. In order to effectively benefit from the strategies and practices the district selects in its TIP, OSE provides extensive professional development in creating the TIP, setting the TIP goals, planning to improve, and TIP implementation. In addition, OSE provides professional development on high leverage practices and evidence-based strategies.

Transitions from early intervention to school (Part C to Part B) and from school to career/college readiness are another of NDE’s priority areas of support. NDE, OSE consultants deliver and supervise the delivery of professional development for evidence-based practices.

NCECBVI provides and coordinates staff development opportunities for statewide educators, related service providers, parents and agency personnel as needs are identified. In addition, the University of Nebraska-Lincoln, in cooperation with NDE, the Kansas State School for the Blind, and NCECBVI, offers an endorsement program for teaching the blind and visually impaired.

Many of Nebraska’s districts have small student populations and are located in rural, geographically isolated locations. In response, NDE provides support to multiple, small, rural districts to form consortiums and maximize the impact of their professional development efforts. The focus of grant funding is within the areas emphasized in the NDE Impact Areas, as previously described. NDE directs grants to preparing qualified educators, administrators, and related service providers, offering induction/mentoring support, and continuous development over individual careers. As grant managers, NDE staff is involved in approving grant applications, monitoring completion of grant activities, approving reimbursement claims, and offering technical assistance to enhance project outcomes.

NDE, OSE also provides the Transition Systems Support Project. The purpose of the NDE Transition Systems Support Project is to promote collaboration and stakeholder engagement among transition partners and build the capacity for extending transition research into practice across the state. Two areas of focus are increasing local capacity and facilitating evidence-based practices implementation. This project provides financial and administrative support to NDE OSE statewide improvement initiatives and activities to improve transition outcomes for students with disabilities. The NDE Transition Systems Support Projects have included and continue to provide stakeholder engagement in the planning of NDE Transition Improvement grant initiatives and activities based on the Statewide Assessment process which is achieved via the annual National Technical Assistance Center on Transition (NTACT) Capacity Building Institute. The team engaged in professional development activities focused on improving opportunities and outcomes for transition aged students.

Through an OSEP Teacher Retention Grant, NDE, in partnership with the University of Nebraska, developed Get SET Nebraska, a comprehensive statewide mentorship and professional development program designed to support special education teachers (SET) and school administrators serving students ages 3–21. The program’s purpose is to help retain special education teachers and ensure schools can improve academic and behavioral outcomes for all students. This program provides critical resources to help districts and schools impact improve special education teacher retention.

**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).**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

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

YES

**Number of Parent Members:**

16

**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.**

NDE engaged parents in setting targets, analyzing data, developing improvement strategies, and evaluating progress for the SPP/APR by ensuring parent representatives were invited to all stakeholder meetings. NDE staff made specific connections with the state parent training and information center on this topic. At stakeholder meetings, NDE staff presented indicator information and led indicator discussions in a way that made the information on the SPP/APR clear and accessible to parents, especially parents who may not have much experience with the SPP/APR. NDE also worked to engage parents by communicating through existing networks with superintendents, principals, and special education directors, asking those administrators to send specific communication to the parents in their schools and districts to ensure that all parents were hearing about the opportunity to provide input on the SPP/APR from their local administrators.

**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.**

NDE prepared its materials for each stakeholder meeting with a focus on helping diverse groups of parents understand the SPP/APR so those parents could give feedback on implementation activities designed to improve outcomes for children with disabilities. NDE did this by providing information on each indicator, including describing what it measured, how Nebraska has historically performed, areas of success within each indicator, and areas of growth. Carefully laying a foundation of information then allowed NDE staff to lead conversations of stakeholders, including diverse groups of parents, focused on improving state-level activities to better support districts in improving outcomes for children with disabilities. NDE also reached out to specific districts with larger diversity in families served and asked those districts to distribute information on its behalf.

**Soliciting Public Input:**

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

Prior to the FFY 2020 SPP/APR, over a period of several months, NDE conducted numerous in-person and virtual meetings focused on soliciting public input for reviewing the established targets and proposed target revisions to certain indicators, analyzing data, developing improvement strategies, and evaluating progress. In addition to meetings, NDE provided information on its website for stakeholder review. NDE made regular announcements and updates regarding the availability of information for stakeholders and the mechanisms for stakeholder input through its monthly special education directors’ webinar and email update. NDE also sent specific communication to superintendents, principals, and special education directors requesting their input and asking them to distribute specific communication to parents in their districts and schools, inviting their feedback.

**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.**

NDE has provided information on its website for stakeholders to see the results of target setting, data analysis, development of the improvement strategies, and evaluation. NDE has specifically communicated with the state advisory panel, RDA Stakeholder Group, parent training and information center, superintendents, principals and special education directors about the availability of these results and asked these groups to distribute this information to parents in their districts and schools.

**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.**

School district performance on each of the APR indicators is reported each spring on the Nebraska Education Profile on the Nebraska Department of Education website. The report can be found at, http://nep.education.ne.gov. The Nebraska Education Profile provides information and data about Nebraska public schools and student performance, including district performance on the APR indicators. To navigate to a district’s APR indicators, select a district under DISTRICT AND SCHOOL DATA and click View District Snapshot. Hover over Special Education and then click View Data. Then click District Performance Part B in the left menu.

A copy of the state’s SPP/APR is located on the Nebraska Department of Education, Special Education office website at, https://www.education.ne.gov/sped/public-reporting/.

Nebraska also posts a link to the OSEP site, https://sites.ed.gov/idea/spp-apr-letters, for LEAs and the public to view state data and OSEP’s response to the SPP/APR.

## Intro - Prior FFY Required Actions

OSEP notes that one or more of the Introduction attachment(s) included in the State’s FFY 2020 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

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

NDE posted the attachment responding to the General Supervision System prompt at https://www.education.ne.gov/wp-content/uploads/2023/01/ACCCESSIBLE-General-Supervision-System-Attachment-to-the-SPP-APR-Introduction.pdf

## Intro - OSEP Response

## Intro - Required Actions

## Intro - State Attachments

 

# 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** |
| --- | --- |
| 2020 | 77.85% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 90.00% | 90.00% | 90.00% | 90.00% | 77.85% |
| Data | 70.46% | 71.41% | 69.30% | 83.25% | 77.85% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 77.85% | 77.85% | 78.35% | 78.85% | 79.35% |

**Targets: Description of Stakeholder Input**

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The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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) | 2,087 |
| 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) | 213 |
| 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) | 27 |
| 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) | 395 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 2,087 | 2,722 | 77.85% | 77.85% | 76.67% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

The Nebraska Department of Education, Office of Special Education (OSE) is encouraged by the increase of exiters with a regular high school diploma, but that is outweighed by the increase in dropouts, which led to a decrease in the graduation rate. OSE believes the slippage in graduation rate is due to impacts on health and school engagement related to COVID-19. Many students with disabilities did not receive the same quantity or quality of specialized therapies they received before the pandemic, due to shortened school days and the challenges of remote instruction. NDE’s data analysis shows that the majority of students exiting due to dropout are students who have spent four years in high school. Anecdotal reports suggest that many students who typically receive more extensive support and services regressed during long months at home, leading some students to drop out rather than continuing school beyond a four-year experience.

OSE provided technical assistance to LEAs on the supports needed for COVID-19's impact on students, particularly supporting those students who did not return to school to complete their graduation requirements. OSE plans to continue this technical assistance with LEAs to ensure maintenance of IEP goals and transition plans to decrease drop out and improve graduation rates.

**Graduation Conditions**

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

Nebraska's definition of a graduate with a regular high school diploma, which applies for all youth, including youth with IEPs, is a student who has completed an approved program of study and met district/system requirements for a high school diploma. The diploma requirements are fully aligned with Nebraska's academic content standards.

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

NO

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

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

**Results indicator**: Percent of youth with IEPs 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[[2]](#footnote-3)**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 12.81% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 1.93% | 1.91% | 1.89% | 1.89% | 12.81% |
| Data | 1.53% | 1.46% | 1.46% | 1.48% | 12.81% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 12.81% | 12.81% | 12.31% | 11.81% | 11.31% |

**Targets: Description of Stakeholder Input**

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The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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) | 2,087 |
| 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) | 213 |
| 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) | 27 |
| 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) | 395 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 395 | 2,722 | 12.81% | 12.81% | 14.51% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Students dropped out at a higher rate in the 2020–21 school year due to learning loss experienced as a result of changes to service delivery models caused by COVID, which led to decreased attendance, credit deficiency, and then drop out. The Nebraska Department of Education, Office of Special Education’s (OSE) data analysis shows that the majority of students exiting due to drop out are students who have already spent four years in high school. Anecdotal reports suggest that many students who typically receive more extensive supports and services regressed during long months at home, leading some students to drop out rather than continuing in school beyond a four-year experience.

OSE has provided technical assistance to LEAs on the supports needed for COVID-19's impact on students, particularly supporting those students who did not return to school to complete their graduation requirements. OSE plans to continue this technical assistance with LEAs to ensure maintenance of IEP goals and transition plans to decrease the number of students who drop out.

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

The numerator consists of the number of youths with IEPs ages 14–21 who exited special education due to dropping out. The denominator consists of the total number of youth ages 14–21 who were served in special education during the school year therefore having the potential to drop out of school. In Nebraska, a dropout occurs in any of the following instances:

A student who withdrew for personal or academic reasons and does not have a signed Withdrawal from Mandatory Attendance form pursuant to Nebraska Revised Statue 79-202 on file with the district.

A student removed from the education system for other than health reasons, and whose return is not anticipated.

A student enrolled in adult education or some type of program whose education services do not lead to a diploma or other credential recognized by the state.

A student who has not graduated or completed an approved program and is not enrolled and whose status is unknown; this includes a student withdrawn from the rolls for excessive absence.

A student who moved out of the district, out of state, or out of the United States and is not known to be in school (includes any student whose education status cannot be confirmed either through a parent or other responsible adult or through some formal notification of transfer).

A student in an institution that is not primarily educational (Army, or vocational program) and not considered a special school district/system.

A student who is disenrolled by a parent and does not enroll in another district/system.

A student who was suspended or expelled and the disciplinary period has expired, and student has not returned.

**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 | 95.31% |
| Reading | B | Grade 8 | 2020 | 90.61% |
| Reading | C | Grade HS | 2020 | 85.61% |
| Math | A | Grade 4 | 2020 | 95.04% |
| Math | B | Grade 8 | 2020 | 90.30% |
| Math | C | Grade HS | 2020 | 85.11% |

**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**Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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\* | 4,265 | 3,632 | 2,953 |
| b. Children with IEPs in regular assessment with no accommodations | 1,343 | 1,098 | 691 |
| c. Children with IEPs in regular assessment with accommodations | 2,653 | 2,238 | 1,756 |
| d. Children with IEPs in alternate assessment against alternate standards | 249 | 247 | 215 |

**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\* | 4,264 | 3,627 | 2,953 |
| b. Children with IEPs in regular assessment with no accommodations | 1,222 | 747 | 691 |
| c. Children with IEPs in regular assessment with accommodations | 2,772 | 2,576 | 1,753 |
| d. Children with IEPs in alternate assessment against alternate standards | 249 | 245 | 214 |

\*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 | 4,245 | 4,265 | 95.31% | 95.00% | 99.53% | Met target | No Slippage |
| **B** | Grade 8 | 3,583 | 3,632 | 90.61% | 95.00% | 98.65% | Met target | No Slippage |
| **C** | Grade HS | 2,662 | 2,953 | 85.61% | 95.00% | 90.15% | 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 | 4,243 | 4,264 | 95.04% | 95.00% | 99.51% | Met target | No Slippage |
| **B** | Grade 8 | 3,568 | 3,627 | 90.30% | 95.00% | 98.37% | Met target | No Slippage |
| **C** | Grade HS | 2,658 | 2,953 | 85.11% | 95.00% | 90.01% | 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.**

Statewide Participation Data
https://www.education.ne.gov/sped/sped-assessment-participation-data/

Statewide Performance Data
https://nep.education.ne.gov/statedata.html
For statewide ELA performance data, scroll down, hover over NSCAS English Language Arts under the Performance heading, and click View Data. In the left menu click on English Language Arts and then Percent Proficient. From here you can use the dropdown menu in the center of the page to view All Students, Special Education Students, or Special Education Students – Alternate Assessment.
For statewide Math performance data, scroll down, hover over NSCAS Mathematics under the Performance heading, and click View Data. In the left menu click on Mathematics and then Percent Proficient. From here you can use the dropdown menu in the center of the page to view All Students, Special Education Students, or Special Education Students – Alternate Assessment.

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

## 3A - Prior FFY Required Actions

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

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

https://www.education.ne.gov/sped/sped-assessment-participation-data/

## 3A - OSEP Response

## 3A - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3B - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 23.52% |
| Reading | B | Grade 8 | 2020 | 16.02% |
| Reading | C | Grade HS | 2020 | 10.13% |
| Math | A | Grade 4 | 2020 | 19.83% |
| Math | B | Grade 8 | 2020 | 12.85% |
| Math | C | Grade HS | 2020 | 9.03% |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 24.02% | 25.02% | 26.02% | 27.02% | 28.02% |
| Reading | B >= | Grade 8 | 16.52% | 17.52% | 18.52% | 19.52% | 20.52% |
| Reading | C >= | Grade HS | 10.63% | 11.63% | 12.63% | 13.63% | 14.63% |
| Math | A >= | Grade 4 | 20.33% | 21.33% | 22.33% | 23.33% | 24.33% |
| Math | B >= | Grade 8 | 13.35% | 14.35% | 15.35% | 16.35% | 17.35% |
| Math | C >= | Grade HS | 9.53% | 10.53% | 11.53% | 12.53% | 13.53% |

**Targets: Description of Stakeholder Input**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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 | 3,996 | 3,336 | 2,447 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 633 | 287 | 62 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 263 | 163 | 153 |

**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 | 3,994 | 3,323 | 2,444 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 531 | 189 | 70 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 251 | 162 | 171 |

**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 | 896 | 3,996 | 23.51% | 24.02% | 22.42% | Did not meet target | Slippage |
| **B** | Grade 8 | 450 | 3,336 | 16.02% | 16.52% | 13.49% | Did not meet target | Slippage |
| **C** | Grade HS | 215 | 2,447 | 10.13% | 10.63% | 8.79% | Did not meet target | Slippage |

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

The Nebraska Student-Centered Assessment System (NSCAS) general summative assessment for ELA (NSCAS-ELA) for all grades and students tested experienced a drop in the percentage of students who scored at or above proficient. The Nebraska Department of Education (NDE) attributes this drop to this being the first assessment administered on the new English Language Arts (ELA) Academic Standards. The new standards increased the rigor of the assessment. NDE has previously experienced this type of drop when the assessed standards are new or updated. Fourth grade students on IEPs taking the NSCAS-ELA increased by 248 in 2022. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set scale score ranges for the assessment on pre-pandemic expectations.

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

NSCAS-ELA for all grades and students tested experienced a drop in the percentage of students who scored at or above proficient. NDE attributes this drop to this being the first assessment administered on the new ELA Academic Standards. The new standards increased the rigor of the assessment. NDE has previously experienced this type of drop when the assessed standards are new or updated. Eighth grade students on IEPs taking the NSCAS-ELA increased by 540 in 2022. This substantial increase of students taking the assessment has a direct effect on the proficiency percentage. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set scale score ranges for the assessment on pre-pandemic expectations.

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

The NSCAS summative assessment for the third-year cohort at the high school level (NSCAS ACT) scores reflected a drop in the percentage of students who scored at or above proficient. NDE attributes this drop to this being the first assessment administered following NDE adopting new ELA Academic Standards, which align with the knowledge, skills, and abilities the ACT is intended to measure. The new ELA standards increased the rigor of the assessment. NDE has previously experienced this type of drop when adopting new or revising existing state standards, which align with the ACT. High school third-year cohort students on IEPs taking the NSCAS ACT increased by 118 in 2022. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set performance level ranges for the assessment on pre-pandemic expectations.

**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 | 782 | 3,994 | 19.83% | 20.33% | 19.58% | Did not meet target | No Slippage |
| **B** | Grade 8 | 351 | 3,323 | 12.85% | 13.35% | 10.56% | Did not meet target | Slippage |
| **C** | Grade HS | 241 | 2,444 | 9.03% | 9.53% | 9.86% | Met target | No Slippage |

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

The NSCAS general summative assessment for math (NSCAS-Math) experienced a drop in students at or above proficient for all 8th grade students tested. Eighth grade students on IEPs taking the NSCAS-Math increased by 538 in 2022. The increase of students taking the assessment has a direct effect on the proficiency percentage. Scores seem to continue to reflect the impact on learning loss from the pandemic especially at higher grades when looking at the results for all students. NDE set scale score ranges for the assessment on pre-pandemic expectations.

**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.**

Statewide Participation Data
https://www.education.ne.gov/sped/sped-assessment-participation-data/

Statewide Performance Data
https://nep.education.ne.gov/statedata.html
For statewide ELA performance data, scroll down, hover over NSCAS English Language Arts under the Performance heading, and click View Data. In the left menu click on English Language Arts and then Percent Proficient. From here you can use the dropdown menu in the center of the page to view All Students, Special Education Students, or Special Education Students – Alternate Assessment.
For statewide Math performance data, scroll down, hover over NSCAS Mathematics under the Performance heading, and click View Data. In the left menu click on Mathematics and then Percent Proficient. From here you can use the dropdown menu in the center of the page to view All Students, Special Education Students, or Special Education Students – Alternate Assessment.

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

The State changed its academic standards on which the assessment is based. The State made very minor changes to the assessment to address the changed standards, but the assessment is not new.

## 3B - Prior FFY Required Actions

If the State chooses to revise its Math Grade 4 baseline, using FFY 2020 data, the State must ensure that the FFY 2020 data in the Historical Table is consistent with the data reported in FFY 2020.

The State did not provide targets for Math Grade 4, 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**

NDE has ensured that the Math Grade 4 FFY 2020 data in the Historical Table is consistent with the data reported in FFY 2020.

NDE has provided the required targets for Math Grade 4 for FFY 2021 through FFY 2025.

## 3B - OSEP Response

The State has revised the baseline for Math Grade 4, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2021 through 2025 for Math Grade 4, and OSEP accepts those targets.

## 3B - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

of testing.

## 3C - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 44.44% |
| Reading | B | Grade 8 | 2020 | 32.59% |
| Reading | C | Grade HS | 2020 | 42.66% |
| Math | A | Grade 4 | 2020 | 42.52% |
| Math | B | Grade 8 | 2020 | 43.05% |
| Math | C | Grade HS | 2020 | 35.02% |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 44.94% | 45.94% | 46.94% | 47.94% | 48.94% |
| Reading | B >= | Grade 8 | 33.09% | 34.09% | 35.09% | 36.09% | 37.09% |
| Reading | C >= | Grade HS | 43.16% | 44.16% | 45.16% | 46.16% | 47.16% |
| Math | A >= | Grade 4 | 43.02% | 44.02% | 45.02% | 46.02% | 47.02% |
| Math | B >= | Grade 8 | 43.55% | 44.55% | 45.55% | 46.55% | 47.55% |
| Math | C >= | Grade HS | 35.52% | 36.52% | 37.52% | 38.52% | 39.52% |

**Targets: Description of Stakeholder Input**Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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 | 249 | 247 | 215 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 95 | 89 | 73 |

**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 | 249 | 245 | 214 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 102 | 96 | 54 |

**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 | 95 | 249 | 44.44% | 44.94% | 38.15% | Did not meet target | Slippage |
| **B** | Grade 8 | 89 | 247 | 32.59% | 33.09% | 36.03% | Met target | No Slippage |
| **C** | Grade HS | 73 | 215 | 42.66% | 43.16% | 33.95% | Did not meet target | Slippage |

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

The NSCAS alternative summative assessment for ELA (NSCAS-AA-ELA) for all grades tested experienced a drop in the percentage of students who scored at or above proficient. NDE attributes this drop to this being the first assessment administered on the new ELA Academic Standards with extended indicators. The new standards increased the rigor of the assessment. Nebraska has seen this type of drop when assessed standards are new or updated. This is also true for the alternate assessment. Fourth grade students on IEPs taking the NSCAS-AA-ELA increased by 33 students in 2022. This slight increase influences the proficiency percentages because, overall, Nebraska does not have many students taking this assessment. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set performance level ranges for the assessment on pre-pandemic expectations.

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

The NSCAS-AA-ELA for all grades tested experienced a drop in the percentage of students who scored at or above proficient. NDE attributes this drop to this being the first assessment administered on the new ELA Academic Standards with extended indicators. The new standards increased the rigor of the assessment. Nebraska has seen this type of drop when assessed standards are new or updated. This is also true for the alternate assessment. High school third-year cohort students on IEPs taking the NSCAS-AA-ELA decreased by three in 2022. Any change in students taking the NSCAS-AA-ELA impacts the proficiency percentages because overall, Nebraska does not have many students taking this assessment. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set performance level ranges for the assessment on pre-pandemic expectations.

**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 | 102 | 249 | 42.52% | 43.02% | 40.96% | Did not meet target | Slippage |
| **B** | Grade 8 | 96 | 245 | 43.05% | 43.55% | 39.18% | Did not meet target | Slippage |
| **C** | Grade HS | 54 | 214 | 35.02% | 35.52% | 25.23% | Did not meet target | Slippage |

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

The NSCAS alternative summative assessment for Math (NSCAS-AA-Math) experienced a drop in fourth grade students at or above proficient. Most students taking the alternate assessment seem to struggle understanding some areas of mathematical concepts. Fourth grade students on IEPs taking the NSCAS-AA-Math increased by 35 in 2022. This increase influences the proficiency percentages because, overall, Nebraska does not have many students taking this assessment. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set performance level ranges for the assessment on pre-pandemic expectations.

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

NSCAS-AA-Math experienced a drop in eighth grade students at or above proficient. Most students taking the alternate assessment seem to struggle understanding some areas of mathematical concepts. Eighth grade students on IEPs taking the NSCAS-AA-Math increased by 22 in 2022. This increase influences the proficiency percentages because, overall, Nebraska does not have a large number of students taking this assessment. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set performance level ranges for the assessment on pre-pandemic expectations.

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

NSCAS-AA-Math experienced a drop in students at or above proficient in high school Math. Most students taking the alternate assessment seem to struggle understanding some areas of mathematical concepts. High school third-year cohort students on IEPs taking the NSCAS-AA-Math decreased by three in 2022. Any change in students taking this assessment influences proficiency percentages because, overall, Nebraska does not have a large number of students taking this assessment. Scores seem to continue to reflect the impact on learning loss from the pandemic, even when looking at the results for all students. NDE set performance level ranges for the assessment on pre-pandemic expectations.

**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.**

Statewide Participation Data
https://www.education.ne.gov/sped/sped-assessment-participation-data/

Statewide Performance Data
https://nep.education.ne.gov/statedata.html
For statewide ELA performance data, scroll down, hover over NSCAS English Language Arts under the Performance heading, and click View Data. In the left menu click on English Language Arts and then Percent Proficient. From here you can use the dropdown menu in the center of the page to view All Students, Special Education Students, or Special Education Students – Alternate Assessment.
For statewide Math performance data, scroll down, hover over NSCAS Mathematics under the Performance heading, and click View Data. In the left menu click on Mathematics and then Percent Proficient. From here you can use the dropdown menu in the center of the page to view All Students, Special Education Students, or Special Education Students – Alternate Assessment.

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

The State changed its academic standards on which the assessment is based. The State changed its extended indicators to address the changed standards, but the assessment is not new.

## 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 | 30.18 |
| Reading | B | Grade 8 | 2020 | 34.57 |
| Reading | C | Grade HS | 2020 | 37.82 |
| Math | A | Grade 4 | 2020 | 25.83 |
| Math | B | Grade 8 | 2020 | 32.43 |
| Math | C | Grade HS | 2020 | 36.63 |

**Targets**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 29.68 | 28.68  | 27.68 | 26.68 | 25.68 |
| Reading | B <= | Grade 8 | 34.07 | 33.07 | 32.07 | 31.07 | 30.07 |
| Reading | C <= | Grade HS | 37.32 | 36.32 | 35.32 | 34.32 | 33.32 |
| Math | A <= | Grade 4 | 25.33 | 24.33 | 23.33 | 22.33 | 21.33 |
| Math | B <= | Grade 8 | 31.93 | 30.93 | 29.93 | 28.93 | 27.93 |
| Math | C <= | Grade HS | 36.13 | 35.13 | 34.13 | 33.13 | 32.13 |

**Targets: Description of Stakeholder Input**

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The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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 | 22,937 | 23,981 | 22,395 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 3,996 | 3,336 | 2,447 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 11,592 | 10,866 | 10,336 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 530 | 218 | 410 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 633 | 287 | 62 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 263 | 163 | 153 |

**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 | 22,930 | 23,949 | 22,378 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 3,994 | 3,323 | 2,444 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 10,182 | 9,761 | 9,778 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 442 | 228 | 426 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 531 | 189 | 70 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 251 | 162 | 171 |

**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 | 22.42% | 52.85% | 30.18 | 29.68 | 30.43 | Did not meet target | No Slippage |
| **B** | Grade 8 | 13.49% | 46.22% | 34.57 | 34.07 | 32.73 | Met target | No Slippage |
| **C** | Grade HS | 8.79% | 47.98% | 37.82 | 37.32 | 39.20 | Did not meet target | Slippage |

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

NDE attributes this drop to this being the first assessment administered on the new ELA Academic Standards, which align with the knowledge, skills, and abilities the ACT is intended to measure. The new standards increased the rigor of the assessments. NDE has previously experienced this type of drop in proficiency when standards are new or updated. High school third-year cohort students taking the NSCAS ACT increased by 384 in 2022. The slight increase of students taking the NSCAS ACT had an impact on reducing the gap in proficiency rate between all students and children with IEPs. Teachers basing instruction on updated ELA standards and the impact on learning loss due to the pandemic continues to impact students, especially at the higher grades.

**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 | 19.58% | 46.33% | 25.83 | 25.33 | 26.75 | Did not meet target | No Slippage |
| **B** | Grade 8 | 10.56% | 41.71% | 32.43 | 31.93 | 31.15 | Met target | No Slippage |
| **C** | Grade HS | 9.86% | 45.60% | 36.63 | 36.13 | 35.74 | 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** |
| --- | --- |
| 2005 | 0.40% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target <= | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| Data | 0.00% | 0.00% | 10.00% | 0.00% | 0.00% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets: Description of Stakeholder Input**

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The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

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**FFY 2021 SPP/APR Data**

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

YES

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

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| 0 | 8 | 0.00% | 0.00% | 0.00% | 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**

For indicator 4A, Nebraska defines a significant discrepancy as any district with a rate of out-of-school suspensions/expulsions for greater than 10 days for children with IEPs that is greater than 5% of children with IEPs among LEAs in the state. Five percent as the suspension/expulsion-rate threshold can be derived from the state-level suspension/expulsion rate of 1.2% (school year 2020-21). The 5% suspension/expulsion rate threshold is three percentage points higher than 1.2%, rounded up to the nearest whole percent. This method for setting the threshold is described as a “variation” to the example in Exhibit 8 of the IDEA Data Center’s Indicator B4 Technical Assistance Guide. Nebraska’s methodology uses a minimum cell- size of 10 [children with IEPs who were suspended in a LEA] and a minimum n-size of 30 [children with IEPs in the LEA]. Out of 244 districts, only eight suspended or expelled 10 or more students with disabilities for more than 10 days. Of those, none had a rate greater than 5% [of the state rate of children with IEPs], therefore, none were identified as having significant discrepancy for FFY 2021 (using school year 2020–21 data) for Indicator 4A.

Nebraska has been reviewing its data and analyses based on the OSEP discipline guidance and is considering alternate methodologies. Nebraska is intent on making informed data-based decisions to help determine the reasonableness of its methodology. Nebraska is developing a plan to engage stakeholders based on the findings of the data analysis to obtain informed recommendations on any changes in methodology.

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

**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.**

Nebraska did not identify a district with a significant discrepancy and is not required to do the review under 34 C.F.R. § 300.170(b). To select an accurate answer Nebraska would need an N/A option.

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

In the FFY 2021 SPP/APR the State included a very low percentage of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP reminds the State that if the examination for significant discrepancies in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

The State’s chosen methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspensions and expulsions of children with IEPs that falls above the median of thresholds used by all States.

## 4A - Required Actions

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

# 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** |
| --- | --- |
| 2009 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | NVR | 25.00% | 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** |
| 0 | 0 | 5 | 0.00% | 0% | 0.00% | Met target | No Slippage |

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

YES

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

Nebraska defines a significant discrepancy as any district with a rate of out-of-school suspensions/expulsions for greater than 10 days for children with IEPs of a specific race/ethnicity that is greater than 5% of children with IEPs among LEAs in the state. Five percent as the suspension/expulsion-rate bar can be derived from the state-level suspension/expulsion rate of 1.2% (school year 2020–21). The 5% suspension/expulsion-rate bar is three percentage points higher than 1.2%, rounded up to the nearest whole percent. This method for setting the threshold is described as a “variation” to the example in Exhibit 8 of IDC’s Indicator B4 Technical Assistance Guide. Nebraska’s methodology uses a minimum cell- size of 10 [children with IEPs of a specific race/ethnicity who were suspended in a LEA] and a minimum n-size of 30 [children with IEPs of all other races/ethnicities combined in the LEA]. Out of 244 districts, only five districts suspended or expelled 10 or more children with disabilities of a specific race/ethnicity for more than 10 days. Of those, none had a rate greater than 5% [of the state rate of children with IEPs], therefore, none were identified as having significant discrepancy for FFY 2021 (using school year 2020–21 data) for Indicator 4B.

NDE has been reviewing its data and analyses based on the OSEP discipline guidance and are considering alternate methodologies. Nebraska is intent on making informed data-based decisions to help determine the reasonableness of its methodology. Nebraska is developing a plan to engage stakeholders based on the findings of the data analysis to obtain informed recommendations on any changes in methodology.

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

**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.**

Nebraska requires LEAs with a significant discrepancy to submit their policies and procedures to the SEA for review. The SEA reviews both policies and procedures, as well as student files, to determine if the significant discrepancy is due to policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavior supports, or procedural safeguards. NDE informs districts of all findings, and the SEA will ensure any noncompliance issues are corrected within one year.

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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

In the FFY 2021 SPP/APR the State included a very low percentage of the State’s LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs. OSEP reminds the State that if the examination for significant discrepancies, by race and ethnicity, in the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs is not occurring in any meaningful way at the LEA level, OSEP may determine that a State’s chosen methodology is not reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of long-term suspensions and expulsions of children with IEPs.

The State’s chosen methodology results in a threshold for measuring significant discrepancy, by race and ethnicity, in the rate of long-term suspensions and expulsions of children with IEPs that falls above the median of thresholds used by all States.

## 4B- Required Actions

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

# 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 >= | 73.60% | 74.10% | 74.60% | 74.60% | 81.16% |
| A | 81.16% | Data | 76.75% | 77.78% | 78.20% | 79.08% | 81.16% |
| B | 2020 | Target <= | 6.45% | 6.39% | 6.33% | 6.33% | 5.72% |
| B | 5.44% | Data | 6.68% | 6.26% | 6.30% | 5.41% | 5.44% |
| C | 2020 | Target <= | 2.38% | 2.26% | 2.14% | 2.14% | 2.38% |
| C | 2.27% | Data | 2.08% | 2.32% | 2.17% | 2.13% | 2.27% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 81.32% | 81.47% | 81.63% | 81.78% | 81.94% |
| Target B <= | 5.44% | 5.43% | 5.43% | 5.42% | 5.42% |
| Target C <= | 2.25% | 2.24% | 2.22% | 2.20% | 2.19% |

**Targets: Description of Stakeholder Input**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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 | 48,851 |
| 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 | 39,500 |
| 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 | 2,707 |
| 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 | 837 |
| 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 | 42 |
| 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 | 119 |

**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 | 39,500 | 48,851 | 81.16% | 81.32% | 80.86% | 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 | 2,707 | 48,851 | 5.44% | 5.44% | 5.54% | 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] | 998 | 48,851 | 2.27% | 2.25% | 2.04% | Met target | No Slippage |

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

## 5 - Prior FFY Required Actions

The State did not provide Indicator 5B and 5C targets, 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.

If the State chooses to revise its Indicator 5B and 5C baseline, using FFY 2020 data, the State must ensure that the FFY 2020 data in the Historical Table matches the data reported in FFY 2020.

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

NDE determined the correct FFY 2020 5B and 5C baseline data following review of the previous Indicator 5 target setting determinations established with stakeholder input. Specifically, NDE confirmed that the accurate percentages for 5B and 5C baselines are 5.44% and 2.27%, respectively, as reported in FFY 2020. NDE determined the FFY 2020 5B and 5C baseline and targets were entered into EMAPS incorrectly and that NDE properly conducted stakeholder input on the correct Indicator 5 targets, as described in the FFY 2020 SPP/APR. The correct 5B and 5C baseline and targets are now correctly entered into the FFY 2021 SPP/APR. NDE revised the Target Data table to reflect expected improvement over the correct baselines by FFY 2025.

NDE also ensured that the FFY 2020 Baseline in the Historical Table matches the data reported in FFY 2020.

## 5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision for sub-indicators 5B and 5C.

The State provided targets for FFYs 2021 through 2025 for sub-indictors 5B and 5C, and OSEP accepts those targets.

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| **A** | Target >= | 73.00% | 74.00% | 75.00% | 75.00% |  |
| **A** | Data | 73.55% | 80.38% | 81.18% | 83.12% | 76.27% |
| **B** | Target <= | 5.60% | 5.60% | 5.50% | 5.50% |  |
| **B** | Data | 4.45% | 3.59% | 3.42% | 3.34% | 3.29% |

**Targets: Description of Stakeholder Input**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**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 | 65.45% |
| **A2, age 4** | 2020 | 81.65% |
| **A3, age 5** | 2020 | 78.63% |
| **B1, age 3** | 2020 | 4.51% |
| **B2, age 4** | 2020 | 2.70% |
| **B3, age 5** | 2020 | 2.98% |
| **C1, age 3** | 2020 | 20.16% |
| **C2, age 4** | 2020 | 7.16% |
| **C3, age 5** | 2020 | 6.83% |

**Individual Targets – 6A, 6B**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1, age 3 >= | 65.95% | 66.45% | 66.95% | 67.45% | 67.95% |
| Target B1, age 3 <= | 4.26% | 4.01% | 3.76% | 3.51% | 3.26% |
| Target A2, age 4 >=  | 82.15% | 82.65% | 83.15% | 83.65% | 84.15% |
| Target B2, age 4 <= | 2.60% | 2.50% | 2.40% | 2.30% | 2.20% |
| Target A3, age 5 >=  | 78.73% | 78.83% | 78.93% | 79.03% | 79.13% |
| Target B3, age 5 <=  | 2.78% | 2.58% | 2.38% | 2.18% | 1.98% |

**Individual Targets – 6C**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C1, age 3 <= | 19.66% | 19.16% | 18.66% | 18.16% | 17.66% |
| Target C2, age 4 <= | 7.06% | 6.96% | 6.86% | 6.76% | 6.66% |
| Target C3, age 5 <= | 6.63% | 6.43% | 6.23% | 6.03% | 5.83% |

**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 | 1,382 | 2,222 | 614 | 4,218 |
| 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 | 989 | 1,837 | 503 | 3,329 |
| b1. Number of children attending separate special education class | 55 | 33 | 4 | 92 |
| b2. Number of children attending separate school | 5 | 9 | 4 | 18 |
| b3. Number of children attending residential facility | 0 | 0 | 0 | 0 |
| c1**.** Numberof children receiving special education and related services in the home | 214 | 151 | 38 | 403 |

**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 | 989 | 1,382 | 65.45% | 65.95% | 71.56% | Met target | No Slippage |
| B1. Separate special education class, separate school or residential facility | 60 | 1,382 | 4.51% | 4.26% | 4.34% | Did not meet target | No Slippage |
| C1. Home | 214 | 1,382 | 20.16% | 19.66% | 15.48% | Met 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 | 1,837 | 2,222 | 81.65% | 82.15% | 82.67% | Met target | No Slippage |
| B2. Separate special education class, separate school or residential facility | 42 | 2,222 | 2.70% | 2.60% | 1.89% | Met target | No Slippage |
| C2. Home | 151 | 2,222 | 7.16% | 7.06% | 6.80% | Met 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 | 503 | 614 | 78.63% | 78.73% | 81.92% | Met target | No Slippage |
| B3. Separate special education class, separate school or residential facility | 8 | 614 | 2.98% | 2.78% | 1.30% | Met target | No Slippage |
| C3. Home | 38 | 614 | 6.83% | 6.63% | 6.19% | Met target | No Slippage |

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

Beginning with the FFY 2020 SPP/APR, Nebraska set its targets separately for each age. The platform in which the SPP/APR is submitted, EMAPS, does not provide for three separate target boxes within the Historical Data table. In this SPP/APR the FFY 2020 targets show as blank in the Historical Data table and the FFY 2020 data is automatically filled in and Nebraska cannot edit it. The FFY 2020 targets can be reviewed in the section Baselines for Individual Targets option (A, B, C) and the FFY 2020 data can be reviewed in the FFY 2021 SPP/APR Data sections for each age.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

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

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

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

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

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

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

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

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

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

**Instructions**

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

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A1 | 2021 | Target >= | 74.75% | 75.00% | 75.25% | 75.25% | 65.67% |
| A1 | 57.65% | Data | 76.45% | 67.57% | 65.64% | 63.24% | 65.67% |
| A2 | 2021 | Target >= | 70.00% | 70.25% | 70.50% | 70.50% | 59.60% |
| A2 | 60.54% | Data | 68.84% | 61.53% | 59.28% | 56.25% | 59.60% |
| B1 | 2021 | Target >= | 75.25% | 75.50% | 75.75% | 75.75% | 70.04% |
| B1 | 62.74% | Data | 78.00% | 74.23% | 68.52% | 64.85% | 70.04% |
| B2 | 2021 | Target >= | 70.00% | 70.25% | 70.50% | 70.50% | 62.64% |
| B2 | 55.95% | Data | 69.23% | 70.27% | 65.26% | 58.96% | 62.64% |
| C1 | 2021 | Target >= | 75.75% | 76.00% | 76.25% | 76.25% | 62.43% |
| C1 | 58.58% | Data | 74.28% | 95.77% | 24.03% | 45.03% | 62.43% |
| C2 | 2021 | Target >= | 75.25% | 75.50% | 75.75% | 75.75% | 51.80% |
| C2 | 64.65% | Data | 88.04% | 96.18% | 55.59% | 47.25% | 51.80% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 56.95% | 57.20% | 57.45% | 57.70% | 58.20% |
| Target A2 >= | 59.75% | 60.00% | 60.25% | 60.50% | 61.00% |
| Target B1 >= | 61.95% | 62.20% | 62.45% | 62.70% | 63.20% |
| Target B2 >= | 55.15% | 55.40% | 55.65% | 55.90% | 56.40% |
| Target C1 >= | 57.85% | 58.10% | 58.35% | 58.60% | 59.10% |
| Target C2 >= | 63.85% | 64.10% | 64.35% | 64.60% | 65.10% |

**Targets: Description of Stakeholder Input**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

In addition to the broad stakeholder input that NDE seeks on State targets in the SPP/APR, NDE sought specific stakeholder input from the Results Matter Nebraska Task Force for its changes to the Indicator 7 baseline and FFY 2021–25 targets. The Task Force, including its parent members, provided input in setting Indicator 7 targets, analyzing Indicator 7 data, developing Indicator 7 improvement strategies, and evaluating Indicator 7 progress. NDE considered the Task Force feedback and then provided the Task Force with its decision on Indicator 7 targets, shared the most recent Indicator 7 data, plans for Indicator 7 improvement strategies, and how it will evaluate Indicator 7 progress. NDE also regularly engages with district staff to evaluate Indicator 7 progress

**FFY 2021 SPP/APR Data**

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

2,311

**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 | 20 | 0.87% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 611 | 26.44% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 281 | 12.16% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 578 | 25.01% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 821 | 35.53% |

| **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)* | 859 | 1,490 | 65.67% | 56.95% | 57.65% | N/A | N/A |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,399 | 2,311 | 59.60% | 59.75% | 60.54% | N/A | N/A |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 7 | 0.30% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 616 | 26.66% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 395 | 17.09% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 654 | 28.30% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 639 | 27.65% |

| **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)* | 1,049 | 1,672 | 70.04% | 61.95% | 62.74% | N/A | N/A |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,293 | 2,311 | 62.64% | 55.15% | 55.95% | N/A | N/A |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 43 | 1.86% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 556 | 24.06% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 218 | 9.43% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 629 | 27.22% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 865 | 37.43% |

| **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)*  | 847 | 1,446 | 62.43% | 57.85% | 58.58% | N/A | N/A |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,494 | 2,311 | 51.80% | 63.85% | 64.65% | N/A | N/A |

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

YES

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

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

NO

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

Criteria for defining “comparable to same-aged peers” was determined through Item Response Theory (IRT) analyses by Teaching Strategies, based on a national sample. The algorithms result in a 7-point rating system that parallels the Child Outcomes Summary (COS) ratings. These ratings, by age, are input into the Teaching Strategies (TS) GOLD online system which generates a rating based on TS GOLD scores for each functional outcome. Research studies examining the reliability and validity of the TS GOLD are found at: https://teachingstrategies.com/research/#assessment

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

Teaching Strategies (TS) GOLD, an authentic, observational assessment designed for children birth through third grade, is the assessment used to gather data for Indicator C3. At the child’s entry or at six months of age and at the time of exit from Part C or at age 3, teachers/providers gather and document information from observations of the child or from an interview (e.g., Routine Based Interview) with the parent(s). This data forms the basis of the scoring across four areas of development (social emotional, physical, language, and cognitive) and two areas of content learning (literacy and mathematics). TS GOLD objectives and dimensions that comprise each of the functional outcomes that are reported are based on a crosswalk recommended by the national Early Child Outcomes (ECO) Center. Criteria for defining “comparable to same-aged peers” was determined through Item Response Theory (IRT) analyses by Teaching Strategies, based on a national sample. The algorithms result in a 7-point rating system that parallels the Child Outcomes Summary (COS) ratings. These ratings by age are programmed into the TS GOLD online system which generates a rating based on TS GOLD scores for each functional outcome. Research studies examining the reliability and validity of the TS GOLD may be found at https://teachingstrategies.com/research/#assessment .

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

In 2020, the Teaching Strategies GOLD (TSG) Research Team determined the GOLD thresholds for establishing age-expected functioning were too high for measuring progress in Part C and disproportionately higher than thresholds applied in other assessment tools that Part C providers in other states may choose to use. The discrepancy was attributed to a need for better guidance from OSEP and for a revised methodology from TSG. To update the scoring algorithm, TSG convened a council of stakeholders who use GOLD for OSEP reporting, and the stakeholder team included high representation from Nebraska. The team collaborated to determine the appropriate cut scores used for converting from scores on GOLD to a 7-point scale. The process included reviewing numerous simulations of impacts to data based on different thresholds for age-expected functioning and discussions of the potential impact to comparisons of historical and future data. After multiple reviews, the Council came to consensus on the new thresholds. The changes, while motivated by the need to revise the algorithm for Part C reporting, also have downstream effects on Part B reporting. For Part B services, effects will be more variable, but most programs will observe that Summary Statements 1 and 2 look lower with respect to previous years’ data across all outcome areas; however, with the new algorithm in place, it is anticipated that the Summary Statement data for all areas will stabilize in the upcoming reporting periods. Nebraska adopted the updated algorithm for the OSEP Part B reporting process for the 2021–22 reporting period; therefore, Nebraska reestablished baseline and targets for this reporting period with the two-year longitudinal data based on the new algorithm (Nebraska manually calculated FFY 2020 data for another year of longitudinal data). Additionally, to better match OSEP’s definition of no improvement in functioning, TSG revised its algorithm for assignment to progress category A. Previously, the algorithm assigned children to category A if there was no change or a regression in the total score for the outcome between entry and exit. The revised algorithm now evaluates progress at the item level. This change provides a more incremental way to measure children’s growth and development and, thus, enhances progress monitoring for children with severe developmental delays. This change yielded a positive effect on the progress category distributions this year resulting in a smaller proportion of children falling into progress category A and a larger proportion of children falling into progress category B.

## 7 - Prior FFY Required Actions

The State did not provide targets, 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 State has provided the required targets for FFY 2020 through FFY 2025 and described its stakeholder input process.

## 7 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2021, and OSEP accepts that revision.

The State provided targets for FFYs 2021 through 2025 for this indicator, and OSEP accepts those targets.

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 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**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2013 | 89.37% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= | 90.20% | 90.80% | 91.80% | 91.80% | 90.71% |
| Data | 89.40% | 91.56% | 86.75% | 90.71% | 84.63% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 90.76% | 90.81% | 90.86% | 90.91% | 90.98% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 9,190 | 10,979 | 84.63% | 90.76% | 83.71% | Did not meet target | No Slippage |

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

Parents of children with disabilities, including parents of preschool children with disabilities, are provided the opportunity to take the parent survey. Surveys are given to all parents of children with disabilities in the districts for students ages 3–21 via email with a link to the survey as the first attempt to provide parents an opportunity to share their satisfaction with their parent involvement in the process to improve services for their child. Parents are also provided with the information at parent teacher conferences, at the child’s IEP Team meeting, and other school events. Parents of preschool children with disabilities are also included in these same processes. If parents are unable to access a computer or the internet and have not responded, families receive the survey by mail. The return rate for surveys for preschool parents was the highest return rate for all grade levels. The questions in the survey are not specific to grade level but can be applied to parents of children of any age.

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

53,064

**Percentage of respondent parents**

20.69%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Response Rate  | 59.03% | 20.69% |

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

In 2023, NDE will continue to distribute the survey to parents of all students receiving special education services. Additionally, all districts will be required to create and submit a “Parent Survey Data Collection Plan” to ensure each district has an effective plan for collecting accurate parent feedback. Each district will have access to a planning template on the district’s individualized portal to the statewide online platform with instructions requiring the district to send the survey to each family of a child with an IEP, detail at least two methods for survey distribution, a minimum of two dates the district will provide follow-up reminders, and an attainable goal for the district’s parent response rate based on previous district data. NDE will communicate directly with districts with a high percentage of underrepresented groups and provide technical assistance to ensure a targeted effort towards those groups.

**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.**

To analyze response rate, NDE compared the responders to the parents who should have received the survey. NDE identified nonresponse bias for parents of children with disabilities who are African American or Black, Hispanic or Latino, and Asian. NDE did not identify any nonresponse bias based on geographic location. NDE sent the survey to all parents of children with disabilities in the 2021–22 school year, resulting in over three times the number of respondents compared to FFY 2020. NDE also worked with districts closely to make sure surveys were distributed to all parents of children with disabilities and that parents were encouraged and reminded to complete the survey. To avoid nonresponse bias in FFY 2022, NDE plans to provide technical assistance and support to the largest, most diverse districts in Nebraska. Increasing the response rate for these urban districts should improve overall representativeness.

**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.**

NDE assessed the representativeness of the survey responses by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of all children receiving special education services. This comparison indicates the percentage of responses received is representative of the percentage of surveys distributed by district. Results are not representative by race/ethnicity with responses from parents whose child with a disability is African American or Black, American Indian or Alaska Native, Hispanic/Latino, and multiple races are underrepresented, and responses from parents whose child is white are overrepresented. Responses are not representative for any geographic area, with rural areas overrepresented and the more urban areas underrepresented. The lack of representativeness is linked to issues with the response rate, the number of surveys distributed, and the unequal distribution of surveys.

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

NO

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

For 2023, NDE will conduct a census, sending the survey to all parents of children with disabilities in the state. NDE will work closely with districts to be sure the survey is distributed to all parents of children with disabilities. The “Parent Survey Data Collection Plan” will also promote improved representativeness across demographic categories by improving response rates. Namely, the planning template requires districts to create a specific plan for survey distribution that meets the needs of their district. This careful planning and follow-up from NDE are intended to result in the demographics of the children whose parents responded to the survey being representative of the children receiving special education services.

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

NDE used the Early Childhood Technical Assistance Center (ECTA) Representativeness Calculator to determine representativeness for race, grade, and disability. The ECTA Calculator uses an accepted formula (test of proportional difference) to determine whether the difference between the two percentages is statistically significant (or meaningful), based upon the 90% confidence intervals for each indicator (significance level = .10). The number of districts was too large to analyze using the Representativeness Calculator, so NDE instead used a metric of +/- 3% discrepancy in the proportion of responders per district compared to the proportion of surveys sent per district.

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

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

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

## 8 - Prior FFY Required Actions

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

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

Analysis of the FFY 2021 survey response data indicates the responses received are not representative by race/ethnicity with responses from parents whose child with a disability is African American or Black, American Indian or Alaska Native, Hispanic/Latino, and multiple races are underrepresented, and responses from parents whose child is white are overrepresented compared to the demographics of children receiving special education services. Responses are not representative for any geographic area, with rural areas overrepresented and the more urban areas underrepresented. For FFY 2022, NDE will conduct a census, sending the survey to all parents of children with disabilities in the state. NDE will work closely with districts to be sure the survey is distributed to all parents of children with disabilities. The “Parent Survey Data Collection Plan” will also promote improved representativeness across demographic categories by improving response rates. Namely, the planning template requires districts to create a specific plan for survey distribution that meets the needs of their district. This careful planning and follow-up from NDE is intended to result in the demographics of the children whose parents responded to the survey being representative of the children receiving special education services.

## 8 - OSEP Response

## 8 - Required Actions

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

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

5

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 1 | 0 | 239 | 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).**

Disproportionate representation is defined as a risk ratio of 3.0 and above for a single year. The minimum cell size for all calculations is 10 and the minimum n size is 30. The alternate risk ratio was used for any districts where the comparison group failed to meet the cell or n size.

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

Nebraska reviews policies, procedures, and student file review sheets and supporting documents submitted by the district from the district’s self-assessment, for districts with disproportionate representation to determine if the disproportionate representation is the result of inappropriate identification.

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

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

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

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

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

## 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 | 2.16% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | NVR | 0.00% | 2.16% |

**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.**

53

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 16 | 5 | 191 | 2.16% | 0% | 2.62% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

NDE believes the slippage is due to its increase of the rigor of the district’s self-assessment results. While NDE provided LEAs with disproportionate representation the same self-assessment tools as past years (other than minor revisions for clarification purposes) to determine whether the disproportionate representation was the result of inappropriate identification, NDE increased the rigor of its review of the LEA’s completed self–assessment. Specifically, NDE requested more evidence from LEAs to verify the self-assessment results, provided norming sessions for NDE staff who acted as reviewers, met as a team to discuss results, and developed a scoring rubric. Based on these additional efforts, NDE found a number of districts whose policies, procedures, or practices may lead to inappropriate identification and need correction. NDE is focused on ensuring policies, procedures, and practices prevent inequities and inappropriate identification.

**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).**

Disproportionate representation is defined as a risk ratio of 3.0 and above for a single year. The minimum cell size for all calculations is 10 and the minimum n size is 30. The alternate risk ratio was used for any districts where the comparison group failed to meet the cell or n size.

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

Each district who demonstrates disproportionate representation of a racial and ethnic group must complete a self-assessment related to district policies, procedures, and practices implementing the requirements of 34 C.F.R. 300.111 for child find and evaluation practices and provide evidence that supports the district’s analysis. Additionally, the district must complete file reviews for randomly selected files of students within the disproportionate subgroup (disability category and racial and ethnic group) to provide a review of practices. All self-assessments, evidence, and file reviews are returned to NDE. Upon receipt, NDE completes a desk audit review of each district's responses to the self-assessment and NDE determines if each district is correctly implementing the related regulatory requirements and has appropriate identification policies, procedures, and practices. If NDE finds that the disproportionate representation it identified of racial and ethnic groups in special education and related services is the result of inappropriate identification, NDE notifies the district of all findings and ensures any noncompliance is corrected within one year.

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 4 | 4 | 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 the LEAs where NDE found noncompliance, NDE required the LEA to put a Corrective Action Plan (CAP) in place and required the LEA to implement the CAP and correct all found noncompliance within one year. Within the CAP, NDE required the LEA to account for all instances of noncompliance and identify the root cause of the noncompliance, provide any needed professional development to staff, and, if needed, modify the policies, procedures, and/or practices that contributed to or resulted in noncompliance.

To meet the requirements of OSEP Memorandum 09-02, NDE collected an additional updated data set (i.e., i.e., a review of student files focusing on evaluations related to the disproportionate represented category that occurred following the LEA’s CAP implementation) from each of the LEAs with noncompliance through a state data system. Based on this subsequent review of the updated data, NDE verified that all LEAs have achieved 100% compliance with implementing the specific regulatory requirements following the district implementing its CAP and within one year of NDE issuing the finding of noncompliance.

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

NDE assigned NDE Equity team members to the identified LEAs to conduct follow up of all CAPs as well as conduct a review of student files that NDE found to be noncompliant within the initial review. NDE required the LEA to correct all individual instances of noncompliance and then NDE reviewed the corrected files to ensure accurate correction. NDE then followed with a review of additional files based on student population in the race category and disability category that led to NDE finding disproportionate representation, to verify the district’s corrections in process and procedures were translating accurately to practice. NDE maintains records to document its review of correction of noncompliance through review of individual student files which initially showed noncompliance and then NDE verified as corrected, and review of additional student files to ensure correction, as compared to the relevant regulations. NDE verified through this process that each LEA corrected each individual case of noncompliance, unless the child 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** |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

## 10 - Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the five districts identified in FFY 2021 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 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 (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 11: Child Find

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 92.76% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 98.43% | 99.07% | 99.54% | 85.24% | 96.51% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 9,259 | 8,716 | 96.51% | 100% | 94.14% | Did not meet target | Slippage |

**Provide reasons for slippage**

NDE reports slippage of 2.37% from FFY 2020 to FFY 2021. NDE attributes the overall slippage in the state compliance rate to significant shortages in district staff, particularly in the state’s largest school district. Most of the reasons for delay LEAs reported can be attributed to insufficient staff available to complete comprehensive evaluations within the 45-school day State-established timeline (that does not exceed the 60-calendar day timeline). Additionally, most districts reported delays due to substantial staff, parent or student illnesses that postponed assessment completion and/or the ability to schedule multidisciplinary meetings, where the team determines eligibility, within the required timeframe.

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

543

**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.**

Nebraska districts completed 94.14% of initial evaluations within the 45-school day State-established timeline (that does not exceed the 60-calendar day timeline) upon receipt of parent consent for the initial evaluation. Nebraska districts received 9,259 parental consents for an initial evaluation and completed 8,716 initial evaluations within the State-established timeline. Initial evaluations completed outside the State-established timeline ranged from 1 to 162 days beyond the timeline. Initial evaluations that exceeded the timeline between one and 60 days were the result of multidisciplinary team scheduling conflicts, staff shortages, school closures due to weather, timeline miscalculations, evaluator medical emergencies, and school breaks. For evaluations that were delayed 61 to 100 days beyond the timeline, reasons included timeline misunderstanding, evaluator shortages and illness, district team availability, and COVID-19. When initial evaluations were completed 101 to 162 days past the timeframe, limited staff availability to complete testing and missing paperwork from parents were the documented reasons for the delays. NDE data analysis revealed that the overall slippage in the state compliance rate was most attributed to significant shortages in district staff, particularly in the state’s largest school district. The other most frequent reasons for delay districts reported included insufficient staff availability to complete comprehensive evaluations within the 45-school day State-established timeline (that does not exceed the 60-calendar day timeline), school closure due to weather, staff scheduling conflicts, and evaluator absences. Additionally, most districts reported delays due to substantial staff illnesses that postponed assessment completion and/or ability to schedule multidisciplinary meetings, where eligibility is determined, within the required timeframe. Overall, there were 543 instances of delays for nonallowable reasons.

**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).**

Nebraska regulations, at Neb. Admin. Code § 92-009.04A1, establishes the timeline of 45 school days to complete an initial evaluation. This timeline does not exceed 60 calendar days.

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

State database that includes data for the entire reporting year

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

The Nebraska Department of Education, Office of Special Education annually requires LEAs to compile initial evaluation data including:

1. Total number of evaluations completed.

2. The number of students who qualified within the 45-school day timeline that does not exceed 60 calendar days.

3. The number of students who did not qualify within the timeframe established.

4. The number of students whose initial evaluation did not meet the timeline, and

5. The reason(s) for the initial evaluation not occurring within the 45-school day timeline that does not exceed 60 calendar days for each of the evaluations, whether the student qualified or not.

Based on this information, NDE made compliance determinations.

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 301 | 301 | 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 the LEAs where NDE found noncompliance, NDE required the LEA to develop and implement a Corrective Action Plan (CAP) to plan for the correction of noncompliance, within a required timeframe. Within the CAP, NDE required the LEA to: Account for all instances of noncompliance including the root cause of the noncompliance and; if needed, how it would modify the policies, procedures, and/or practices that contributed to or resulted in the noncompliance; and plan for staff training to ensure staff understood the requirements and how to implement them within the LEA. NDE reviewed all LEA staff training materials prior to each training to ensure compliance and reviewed updated LEA policies and procedures.

To meet the requirements of OSEP Memorandum 09-02, NDE collected an additional updated data set (i.e., initial student evaluation documentation for a specific number of students whose initial evaluation occurred following the LEA’s CAP implementation) from each of the LEAs with noncompliance through a state data system. Based on this subsequent review of the updated data, NDE verified that all LEAs have achieved 100% compliance with implementing the specific regulatory requirements following the district implementing its CAP and within one year of NDE issuing the finding of noncompliance.

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

NDE assigned individual monitoring teams to the LEAs with identified noncompliance to conduct follow up of all CAPs as well as conduct a review of the noncompliant initial evaluation data. The review of the noncompliant initial evaluation data included ensuring the LEA had appropriately planned in its CAP for the correct of the individual noncompliance. NDE required the LEA to address each individual case of noncompliance by considering compensatory services for individual delays in initial evaluations. NDE required the LEA to submit documentation showing the individual noncompliance had been corrected and NDE reviewed this documentation to ensure the noncompliance had been corrected. If the noncompliance had not been corrected appropriately, NDE provided specific feedback about how to correct the noncompliance and required the LEA to submit additional documentation showing correction. NDE reviewed the additional documentation to ensure the LEA corrected each individual case of noncompliance. The NDE has verified through a review of the documentation LEAs submitted that each individual case of noncompliance has been corrected (unless the child is no longer within the jurisdiction of the district or LEA) consistent with OSEP Memorandum 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** |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |

## 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**

NDE has reported on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, NDE reported that it has verified that all LEAs with noncompliance identified in FFY 2020 for this indicator: (1) are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data; and (2) have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. NDE also described the specific actions that it took to verify the correction.

## 11 - OSEP Response

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

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

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

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 92.81% | 100.00% |

**Targets**

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

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.  | 1,346 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.  | 11 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.  | 259 |
| 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.  | 33 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays.  | 108 |
| 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. | 911 |

| **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. | 259 | 283 | 100.00% | 100% | 91.52% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

NDE created a specific Indicator 12 data collection, which led to more accurate data reporting and revealed data inconsistencies with the prior Indicator 12 data collection. NDE’s Office of Special Education (OSE) is actively revising the data collection as well as the technical assistance provided to districts to ensure continued accurate data submissions. For those instances found to be outside of data reporting inaccuracies, districts note that the main reason for a delay in developing and implementing an IEP by a child’s third birthday was an inability to hold IEP Team meetings in a timely fashion due to parent requests to reschedule established meetings. Most districts noted continual struggles because of the impacts of COVID-19, such as substantial staff, parent, or student illness that postponed evaluation completion and/or the ability to schedule eligibility meetings within the required timeframe.

**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**

24

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

There are 24 children that were found eligible and the district did not develop and implement their IEP by their third birthday. The number of days beyond their third birthday when eligibility was determined and the IEP developed ranged from 1 to 273 days. Districts indicated the reasons for the delays were parents not making the child available for the evaluation and difficulty scheduling meetings due to staff, parent, or student illness. In cases where the district reported that the parent did not make the child available for evaluation, NDE determined that district staff did not make an early enough or adequate attempt to complete the evaluations to determine eligibility prior to the child's third birthday. Districts did not provide documentation showing the district made multiple attempts to contact the parent. For these reasons, NDE determined the exception under 34 C.F.R. § 300.301(d) did not apply.

**Attach PDF table (optional)**

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

State database that includes data for the entire reporting year

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

Nebraska's student information system (ADVISER) collects information on children with disabilities from birth through 21, which permits NDE to easily determine which children are to transition from Part C to Part B. LEAs report Indicator 12 data within ADVISER.

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

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

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

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

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

## 12 - Prior FFY Required Actions

None

## 12 - OSEP Response

## 12 - Required Actions

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** |
| --- | --- |
| 2009 | 86.73% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 89.41% | 85.16% | 90.85% | 29.29% | 55.66% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 36 | 68 | 55.66% | 100% | 52.94% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Nebraska has experienced slippage for FFY 2021 because of the Nebraska Department of Education’s (NDE) continued differentiated monitoring process. In addition to this, NDE, through the implementation of an annual risk analysis, shifted monitoring from a five-year set cycle to annual monitoring of all LEAs and targeted monitoring of those LEAs at the highest risk. Due to these shifts in monitoring, NDE found more LEAs out of compliance and in need of corrective action. In addition, Nebraska passed a new state statute that changed the age of transition planning to begin at 14 instead of 16. This change resulted in some districts beginning transition planning at age 14 before the statute went into effect and NDE chose to include youth younger than 16 in the Indicator 13 data collection and identified additional noncompliance with LEAs not correctly implementing transition requirements with youth ages 14 and 15. NDE identified areas of need through LEA file reviews and has established targeted monitoring on those areas to better structure corrective action.

**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.**

The Nebraska Department of Education, Office of Special Education requires school districts to participate in an annual risk analysis where all LEA data is reviewed and LEAs are provided differentiated monitoring based on their risk. One component of this differentiated monitoring is a district file review, where NDE staff monitor school district implementation of the secondary transition requirements in IDEA and Nebraska’s special education regulations, 92 Neb. Admin. Code § 51.

To complete the file review, NDE monitoring team reviewers use a checklist to collect data on district compliance with secondary transition requirements. The Indicator 13 requirements are all included in the checklist. NDE monitoring team members used the NTACT-C, National Technical Assistance Center on Transition-Collaborative, “Indicator 13 Checklist Form A” questions to collect the Indicator 13 data. NDE monitoring team reviewers are trained on the file review checklist in order to ensure reporting consistency and inter-rater reliability. The file review checklist is available electronically to allow for opportunity for NDE monitoring team members to review each other’s ratings. NDE monitoring team members meet to discuss findings and review the summary report for each district. The summary report provides individual findings for each Indicator 13 component. The monitoring team uses the summary report as Indicator 13 technical assistance for each district.

| **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)**

The Nebraska Department of Education, OSE have been utilizing district data to improve focused monitoring efforts. Reviewing Indicator 13 data shows NDE staff that we need to provide more statewide technical assistance on secondary transition in order to increase compliance with this indicator. NDE’s 2022 Focused Monitoring results led to the decision to conduct a statewide Indicator 13 monitoring as a pilot to determine best Indicator 13 monitoring practices going forward. NDE will report the statewide Indicator 13 Pilot results in the FFY 2022 SPP/APR. This pilot will begin an annual Indicator 13 monitoring of all districts.

**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** |
| --- | --- | --- | --- |
| 47 | 47 | 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 the LEAs where NDE found noncompliance, NDE established a Corrective Action Plan (CAP) to plan for the correction of noncompliance, within a required timeframe. Within the CAP, NDE required the LEA to: Account for all instances of noncompliance including the root cause of the noncompliance and; if needed, how the LEA would modify its policies, procedures, and/or practices that contributed to or resulted in the noncompliance; and plan for staff training to ensure staff understood the requirements and how to implement them within the LEA. NDE reviewed all LEA staff training materials prior to each training to ensure compliance and reviewed updated LEA policies and procedures.

To meet the requirements of OSEP Memorandum 09-02, NDE collected an additional updated data set (i.e., secondary transition documentation for a specific number of students following the LEA’s CAP implementation) from each of the LEAs with noncompliance through a follow-up to the monitoring that found noncompliance. Based on this subsequent review of the updated data, NDE verified that all LEAs have achieved 100% compliance with implementing the specific regulatory requirements following the district implementing its CAP and within one year of NDE issuing the finding of noncompliance.

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

NDE assigned monitoring teams to an LEA with individual cases of noncompliance to verify the implementation of the LEA’s CAP. A required CAP step for any LEA with individual cases of noncompliance was correcting each individual instance of noncompliance. Following implementation of the CAP, NDE monitoring team members reviewed updates to each of the student files that NDE found to be noncompliant within its initial review, to ensure each individual case was now compliant. NDE maintains a record of all student files reviewed and the regulations reviewed in each file to document full correction of individual noncompliance. Following the completion of the verification activities, NDE issued a letter to the LEAs that completed CAP activities and corrected individual noncompliance to notify the LEA of the completion of the CAP and verification of correction of each individual case of noncompliance.

**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 2018 | 29 | 29 | 0 |
| FFY 2017 | 42 | 42 | 0 |
|  |  |  |  |

**FFY 2018**

**Findings of Noncompliance Verified as Corrected**

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

NDE verified that the LEA is now correctly implementing the regulatory requirements at the source of noncompliance through technical assistance (TA) and training for the LEA as well as requiring the LEA to communicate with the NDE to document that the LEA adjusted its policies, practices, and procedures to ensure that secondary transitions requirements were followed. NDE conducted a review six months after finding noncompliance to ensure compliance in the LEA. If at the six-month review the LEA had not corrected the noncompliance, NDE worked with the LEA to outline additional actions the LEA must take to ensure compliance. After nine months, NDE again reviewed each LEA that had not achieved compliance at six months to ensure LEA policies, practices, and procedures were now compliant as and reviewed a random sampling of student files to ensure the LEA was correctly implementing the regulatory requirements with those students. At that point, NDE found each LEA to be 100% compliant. One year after making findings, NDE reviewed the LEAs where it found noncompliance and again found 100% compliance.

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

NDE worked with LEAs to develop a corrective action plan and approved the plan. After the LEA implemented its corrective action plan, NDE revisited any LEA with individual noncompliance to ensure the LEA had corrected each individual case of noncompliance. NDE ensured that each IEP that did not demonstrate compliance with secondary transition had been appropriately amended.

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

NDE verified that the LEA is now correctly implementing the regulatory requirements at the source of noncompliance through TA and training as well as requiring the LEA to communicate with NDE to document that the LEA adjusted its policies, practices, and procedures to ensure that secondary transition requirements were followed. NDE conducted a review six months after finding noncompliance to ensure compliance in the LEA. If at the six-month review, the LEA had not corrected the noncompliance, NDE worked with the LEA to outline additional actions the LEA must take to ensure compliance. After nine months, NDE again reviewed each LEA that had not achieved compliance at six months to ensure LEA policies, practices, and procedures were now compliant and reviewed a random sampling of student files to ensure the LEA was correctly implementing the regulatory requirements with those students. At that point, NDE found each LEA to be 100% compliant. One year after making findings, NDE reviewed the LEAs where it found noncompliance and again found 100% compliance.

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

NDE worked with LEAs to develop a corrective action plan and approved the plan. After the LEA implemented its corrective action plan, NDE revisited any LEA with individual noncompliance to ensure the LEA had corrected each individual case of noncompliance. NDE ensured that each IEP that did not demonstrate compliance with secondary transition had been appropriately amended.

## 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. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 29 uncorrected findings of noncompliance identified in FFY 2018, and the remaining 42 uncorrected findings of noncompliance identified in FFY 2017 were 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 2018 and FFY 2017: (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**

NDE has reported on the status of correction of noncompliance identified in FFY 2020, FFY 2018, and FFY 2017 for this indicator. When reporting on the correction of noncompliance, NDE reported that it has verified that all LEAs with noncompliance identified in FFY 2020, FFY 2018, and FFY 2017 for this indicator: (1) are correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data/file reviews; and (2) have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. NDE also described the specific actions that it took to verify the correction. NDE continues to work with all LEAs to provide technical assistance as it continues to ensure compliance.

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

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

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| A | 2019 | Target >= | 37.00% | 38.00% | 39.60% | 39.60% | 30.73% |
| A | 30.73% | Data | 38.16% | 36.20% | 30.86% | 30.73% | 20.84% |
| B | 2019 | Target >= | 66.00% | 66.50% | 67.00% | 67.00% | 34.78% |
| B | 34.78% | Data | 61.84% | 57.33% | 43.50% | 34.78% | 34.76% |
| C | 2019 | Target >= | 83.40% | 83.40% | 83.65% | 83.65% | 44.51% |
| C | 44.51% | Data | 78.69% | 75.30% | 57.23% | 44.51% | 46.81% |

**FFY 2020 Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 30.73% | 30.73% | 31.23% | 31.73% | 32.23% |
| Target B >= | 34.78% | 34.78% | 35.28% | 35.78% | 36.28% |
| Target C >= | 44.51% | 44.51% | 45.01% | 45.51% | 46.01% |

**Targets: Description of Stakeholder Input**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**FFY 2021 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 2,679 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 754 |
| Response Rate | 28.14% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school  | 239 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school  | 311 |
| 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) | 47 |
| 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). | 92 |

| **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) | 239 | 754 | 20.84% | 30.73% | 31.70% | Met target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 550 | 754 | 34.76% | 34.78% | 72.94% | 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) | 689 | 754 | 46.81% | 44.51% | 91.38% | Met target | No Slippage |

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

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

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2020** | **2021** |
| Response Rate  | 40.23% | 28.14% |

**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 outcome survey given in the spring of 2022, to survey students who graduated in the spring of 2021, moved from surveying a sample of graduating students to a census of all graduating students. NDE will continue to contract with the University of Nebraska-Lincoln's Bureau of Sociological Research (BOSR) to compile and analyze the collected data. BOSR also distributed survey materials to all districts with instructions for staff to survey the graduated students. The census method of collection has been shown, in other states, to more successfully gather the desired information from students. This change will provide more accurate data about graduating students and improve the response rate. Additionally, BOSR utilized a mixed-mode mail, web, and phone methodology. To increase the response rate, BOSR made multiple calls to numbers for which there was no answer. BOSR made additional calls at different times of the day and different days of the week, including the weekend, to increase the potential that a call would reach the respondent during an available time. NDE will communicate directly with districts with a high percentage of underrepresented groups and provide technical assistance to ensure a targeted effort towards those groups.

**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.**

To analyze response rate, NDE compared the responders to the youth who should have received the survey. NDE identified nonresponse bias for youth who are African American or Black, Hispanic or Latino, and youth who dropped out. NDE did not identify any nonresponse bias based on sex. NDE worked to promote a response from a broad cross section of youth by providing two rounds of mailed surveys, one reminder postcard, flexible web options, and multiple phone call attempts. To avoid nonresponse bias in FFY 2022, NDE plans to provide technical assistance and support to the largest, most diverse districts in Nebraska. Increasing the response rate for these urban districts should improve overall representativeness.

**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.**

NDE assessed the representativeness of the survey responses by examining the demographic characteristics of the youth who responded to the survey to the demographic characteristics of all youth who are no longer in secondary school and had an IEP in effect at the time they left school. This comparison indicates the percentage of responses received is representative by gender. Responses are not representative by race/ethnicity with responses from youth who are African American or Black and Hispanic or Latino underrepresented, and responses from youth who are white overrepresented. Responses are not representative by exit reason, with youth who graduated with a regular high school diploma overrepresented and youth who dropped out underrepresented.

**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.**

NDE will communicate directly with districts with a high percentage of underrepresented groups and provide technical assistance to ensure a targeted effort towards those groups.

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

NDE used a metric of +/- 3% discrepancy in the percentage of responders per district compared to the percentage of youth in the relevant population.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used?  | NO |
| **Survey Question** | **Yes / No** |
| Was a survey used?  | YES |
| If yes, is it a new or revised survey? | YES |
| If yes, attach a copy of the survey | NEW FFY 2021 Indicator 14 Survey |

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

## 14 - Prior FFY Required Actions

The State did not provide targets, 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**

NDE provided the required targets in the FFY 2021 SPP/APR. After submitting the FFY 2020 SPP/APR, NDE realized it did not report what it decided with its stakeholders, to change the Baseline Data for this indicator to FFY 2019 data. NDE reported this change in this SPP/APR and met all stakeholder input requirements as reported in the FFY 2020 SPP/APR.

## 14 - OSEP Response

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

The State provided targets for FFYs 2021 through 2025 for this indicator, and OSEP accepts those targets.

## 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 not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 2 |
| 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 | 2 |

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

NO

**Targets: Description of Stakeholder Input**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= |  |  | 0.00% | .00% |  |
| Data | 50.00% | 0.00% | 28.57% | 14.29% | 50.00% |

**Targets**

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

**FFY 2021 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2020 Data** | **FFY 2021 Target** | **FFY 2021 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 2 | 2 | 50.00% |  | 100.00% | N/A | N/A |

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

The number of resolution sessions is less than ten, which means the State is not required to set targets.

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2021. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

## 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 | 10 |
| 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 |  |
| 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 |  |

**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.**

YES

**If yes, provide an explanation below**

After submitting the IDEA Part B Dispute Resolution Survey, Nebraska realized the data submitted was incorrect. Nebraska intends to correct the submission during the period in which the collection is reopened.

**Targets: Description of Stakeholder Input**

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

In addition to the broad stakeholder input that NDE seeks on State targets in the SPP/APR, NDE sought specific stakeholder input from the Special Education Advisory Council (SEAC) to determine the type and specifications for targets for Indicator 16 as a result of the State reaching 10 mediations held for the first time. NDE provided SEAC with current and historical Indicator 16 data, the options for target setting allowed by OSEP, and potential targets for members to select. Based on SEAC’s feedback, NDE set targets and target type.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2021 | 70.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2016** | **2017** | **2018** | **2019** | **2020** |
| Target >= |  |  | 0.00% | .00% |  |
| Data | 100.00% | 0.00% | 100.00% | 75.00% | 100.00% |

**Targets**

| **FFY** | 2021 (low) | 2021 (high) | 2022 (low) | 2022 (high) | 2023 (low) | 2023 (high) | 2024 (low) | 2024 (high) | 2025 (low) | 2025 (high) |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Target >= | 60.00% | 70.00% | 70.00% | 80.00% | 70.00% | 80.00% | 80.00% | 90.00% | 90.00% | 100.00% |

**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 | 7 | 10 | 100.00% | 60.00% | 70.00% | 70.00% | N/A | N/A |

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

FFY 2021 is the first year the State had 10 mediation requests. As a result, FFY 2021 data is considered the baseline and the State established targets based on previous data collections.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2021, and OSEP accepts that revision.

The State provided targets for FFYs 2021 through 2025 for this indicator, and OSEP accepts those targets.

The State reported in its narrative that "After submitting the IDEA Part B Dispute Resolution Survey, Nebraska realized the data submitted was incorrect. Nebraska intends to correct the submission during the period in which the collection is reopened." OSEP notes that the State resubmitted its 2021-22 IDEA Part B Resolution data. Those resubmitted data are included on the Dispute Resolution attachment in the reporting tool. However, as noted in the IDEA Part B FFY 2021 SPP/APR User Guide, the 2021-22 IDEA Part B Dispute Resolution Survey as of the November 2, 2022 snapshot date, are used to prepopulate data under this Indicator.

## 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)?**

Nebraska’s State-Identified Measurable Result is to increase the reading proficiency for students with disabilities at the 4th grade level as measured by the statewide reading assessment.

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

NO

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

NO

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

NO

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

https://cdn.education.ne.gov/wp-content/uploads/2021/12/Theory-of-Action-v2-ACCESS-CHECKED-sped.pdf

**Progress toward the SiMR**

**Please provide the data for the specific FFY listed below (expressed as actual number and percentages)*.***

**Select yes if the State uses two targets for measurement. (yes/no)**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 25.63% |

**Targets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 26.13% | 27.13% | 28.13% | 29.13% | 30.13% |

**FFY 2021 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of Students with Disabilities at the 4th grade level who are proficient in reading?(both general assessment and alternate assessment)**  | **Total number of 4th grade students with disabilities tested on the statewide reading assessment (both general assessment and alternate assessment)?**  | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | **Status** | **Slippage** |
| 991 | 4,245 | 25.63% | 26.13% | 23.35% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Proficiency scores in reading for both students with IEPs and students without IEPs have decreased. Scores reflect the continued impact of learning loss that occurred during the pandemic. Cut scores to determine proficiency were set prior to the pandemic reflecting pre-pandemic expectations and will be altered as a result of new standards put in place for the 2022-23 school year and post-pandemic proficiency.

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

Data comes from the same source as Indicator 3 (NSCAS proficiency scores for 4th grade students who received a valid score and for whom a proficiency level was assigned for both students with IEPs against grade level academic achievement standards and proficiency rate for children with IEPs against alternate academic achievement standards.

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

Data is collected based on the requirements of Indicator 3. For the analysis for the SiMR, the state adds together the number of students with IEPs who received a valid score and a proficiency level was assigned against grade level academic achievement standards to the number of students with IEPs who received a valid score and proficiency level was assigned against alternate academic achievement standards divided by the total number of students at the 4th grade 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.**

Based on feedback from stakeholders, the State broke down the NCSAS data by disability category to help give meaning to the data and allow districts to see what groups of students needed to be targeted in their improvement work.? The data in the table shows the proficiency of students at the 4th grade level by disability category and includes both students who took the general education assessment as well as the alternate assessment.? The scores are arranged from the lowest to highest levels of proficiency.? Students with specific learning disabilities are the lowest performing group of students with 11.49% being proficient, while our students with speech and language impairments are the highest performing with 42.43% being proficient. There is a huge gap in performance from our students with SLD to our students with OHI (18.39% proficient), followed by another gap between our students with ID (24.55% proficient) ED (24.79% proficient), and Autism (26.50% proficient), another gap for SLI (42.43% proficient).

Nebraska also disaggregated data by race/ethnicity. Although in the past there hasn’t been much variance in scores based on race/ethnicity, with the increased emphasis on equity, the Office of Special Education felt it was important to see if over the progression of time, circumstances have changed. Based on that disaggregation, we see there are differences that exist between racial/ethnic groups but those differences are not as significant as those between disability categories. Students who are white were 29.45% proficient; students who are Asian were 21.42% proficient; students who are 2 or more races were 19.84% proficient; students who are Hispanic/Latino were 12.67% proficient; students are Black/African American are 11.07% proficient; students who are Native American/Alaskan Native are 8.53% proficient; and students who are Native Hawaiian/Pacific Islander are 0% proficient.

Nebraska tested 13,281 fourth-grade students using the MAP assessment. 10,782 students without disabilities and 2,499 students with disabilities were tested. According to an analysis of the MAP reading scores, districts had an average RIT (Rasch Unit) score in the fall 2021 administration for students without disabilities was 177.63 and 167.66 for students with disabilities. During the winter 2021 administration, the average RIT score for students without disabilities was 180.81 and for students with disabilities was 171.16. During the spring 2022 administration, the average RIT score for students without disabilities was 181.63 and for students with disabilities was 172.83. A comparison of fall to spring scores shows students with disabilities demonstrated slightly more growth of 5.17 points whereas students without disabilities showed 4 points of growth.

When looking specifically at students with disabilities and performance on the MAP reading assessment, scores varied by disability with students with Emotional Disability and Speech/Language Impairments out-scoring students with other disabilities in all three administrations of the MAP assessment. Students with Intellectual Disabilities and Autism had the lowest RIT scores for all test administrations. In comparison, the performance by disability category on the MAP is different from what we saw in performance with the NSCAS. Average RIT scores for the fall of 2021, winter of 2021 and spring of 2022 are as follows for each category.

Emotional Disability was 175.43; 177.70; 178.29 respectively
Speech/Language Impairment was 171.68; 175.70; 177.69 respectively
Other Health Impaired was 171.11; 1743.95; 175.52 respectively
Specific Learning Disability was 169.30; 173.71; 175.26 respectively
Autism was 165.68; 168.12; 169.24 respectively
Intellectual Disability was 156.24; 157.57; and 158.30 respectively

Nebraska also uses the MAP RIT scores to determine the percentage of students considered at-risk for not becoming proficient readers. Nebraska begins looking at “at-risk” numbers beginning with kindergarten to determine the extent to which students are getting the supports needed to become proficient readers by 4th grade. Based on the 2022 spring administration of the MAP assessment, 15,139 kindergarten students took the assessment with 12,697 students without disabilities and 2,442 students with disabilities; 16,085 first grade students took the assessment with 13,278 students without disabilities and 2,798 students with disabilities; 20,923 second grade students took the assessment with 16,996 students without disabilities and 3,927 students with disabilities; 6,116 third grade students took the assessment with 4,945 students without disabilities and 1,171 students with disabilities. In looking at percent of students considered at risk, kindergarten had 16.67% students without disabilities and 30.10% of students with disabilities; 1st grade had, 19.43% students without disabilities and 44.67% students with disabilities; 2nd grade had 19.36% students without disabilities and 47.47% students with disabilities; and 3rd grade had 14.98% students without disabilities and 45.60% students with disabilities.

Nebraska also analyzes the pre-literacy and language data from the Teaching Strategies (TS) Gold assessment for 3- and 4-year-old students. During the Fall 2022 fall benchmark assessment on TS Gold, 7,035 3-year-olds were tested (3,854 were without disabilities and 3,181 were with disabilities) and 9,9551 4-year-olds were tested (6,890 were without disabilities and 2,571 were with disabilities. Based on the 2022 fall benchmark, 6.07% of 3-year-olds without disabilities and 6.37% of 4-year-olds without disabilities were considered below expectations. 42.15% of 3-year-olds with disabilities and 29.13% of 4-year-olds with disabilities were considered below expectations. 93.93% of 3-year-olds without disabilities and 93.63% of 4-year-olds without disabilities were considered to meet or exceed expectations whereas 57.85% of 3-year-olds with disabilities and 70.87% of 4-year-olds with disabilities met or exceeded expectations.

**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)**

YES

**Describe any data quality issues, unrelated to COVID-19, specific to the SiMR data and include actions taken to address data quality concerns.**

Northwest Evaluation Association (NWEA), the institution responsible for the reporting of the MAP data to the state, began a pilot of the NSCAS Growth Assessment which is intended to replace the MAP Assessment beginning in the 2023-24 school year. As a result, the number of students administered the MAP reading assessment, especially for the 3rd grade was considerably lower than past years affecting the representativeness of the data overall. Nebraska uses MAP data to show progress toward the SiMR and to determine the number of students with disabilities who are considered “at-risk” for not becoming proficient readers.

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

NO

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

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

https://cdn.education.ne.gov/wp-content/uploads/2022/01/Revised-Logic-Model-.pdf

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

NO

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

Nebraska’s main infrastructure strategy is MTSS focusing on aligning resources and programs within the State educational system.

For the main strategy of implementing MTSS statewide, the State Implemented Language Essentials for Teacher of Reading and Spelling (LETRS), held an MTSS conference, and provide MTSS systems level training and training specific to English Language Arts.

To further align resources and programs within the system, Nebraska engaged in the assistance of Instructional Partners to identify specific areas that require further alignment of programs and initiatives at the State level.

**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.**

Between January 1, 2022 and October 21, 2022, the MTSS State Facilitators provided training and support to districts dependent on their needs. Eight districts received NeMTSS System training which entails 4 days of training total. Two of the 8 districts received the full 4-day training, and 6 received 3 of the 4 days of training.

After each training, participants filled out a survey to gather information related to the quality, relevance, and usefulness of the training. Over the course of the four days of training, surveys were conducted after each and the aggregated results are shown in the table below. A total of 161 responses were captured showing that a majority of the participants strongly agreed or agreed with the following: presenters’ knowledge and effectiveness (110 and 43 responses respectively); learning objectives were met (89 and 63 responses); training maintained the participants’ focus (88 and 62 responses respectively); the difficulty of the content was appropriate (91 and 60 responses respectively) ; and the training was worth participants’ time (81 and 63 responses respectively).

As part of the Targeted Improvement Plan, Districts were asked to report the level of implementation of MTSS based on a Likert scale. Based on that information, the May 2022 submission shows that 38% of Districts reported they implement the MTSS “most of the time”; 42% of Districts reported they implement MTSS “at least half of the time”; 13% reported they “rarely implemented”; 6% reported the MTSS was “not implemented”; and 1% indicated they “don’t know”.

To better support reading, MTSS provided training in the Language Essentials for Teachers of Reading and Spelling (LETRS). In the area of professional development and technical assistance, the state trained 115 individuals in the essentials of reading and spelling. Participants included teachers, administrators, instructional coaches. LETRS training is essential for achievement toward the SiMR as is focuses on teaching the fundamentals of reading to ensure students can achieve proficiency.

WORDS is professional development based on the Science of Reading that provides an observation/coaching component as well as an opportunity for teachers to tutor other teachers. The 2022-23 school year was the first year of this professional development opportunity for districts with 9 school participating. Data regarding the quality, relevance, and usefulness will be evaluated at the end of the 2022-23 school year.

The annual MTSS Summit was attended by 691 individuals (490 in person and 201 virtual) who ranged in role from teachers to administrators. The annual MTSS Summit relates to professional development and/or technical assistance to support achievement toward the SiMR, sustainability of systems improvement efforts, and scale-up. There were 105 respondents to the evaluation of the Summit. Overall, the evaluation of the Summit data shows that it was rated very well (95% rated excellent or very good), people who attended were likely to use the information presented (95% rated likely or very likely) and would share the information learned with others (95% rated likely or very likely).

Since the inception of the SSIP, the Nebraska Department of Education with the assistance of Instructional Partners has been working to align the work of the Office of Special Education and other offices within the Department including the following: MTSS; High-Quality Instructional Materials (HQIM); Continuous Improvement; Social-Emotional and Social-Emotional/Behavioral Learning; Whole Child Wellbeing. Through the focus of these initiatives, districts have expressed a need for further clarification of each of the initiatives including how each supports and ties to the others. As a result of the investigation into the alignment of these initiatives, the NDE has established the following activities:

Strengthen coherence of MTSS and Continuous Improvement

Strengthen intersection of MTSS and academics with attention to non-summative assessment guidance in the context of high-quality instructional materials

Development of a common visual about how MTSS, Continuous Improvement, Whole Child Supports and High-Quality Instructional Materials work together

Streamline and strengthen school supports and monitoring processes

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

YES

**Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved*.***

With Nebraska’s emphasis on implementing evidence-based practices within a multi-tiered system of supports, the Department of Education kicked off the “Journey to Inclusion” to support educators in serving students with disabilities in the general education classroom. With the “Journey to Inclusion” work, the Office of Special Education in conjunction with Sped Strategies, an organization who works with education leaders across the nation, to provide professional development activities including guidance documents, workshops and implementing pilot sites. The function of the pilot sites is to support districts as they look at shifts that can be made to school structure and classroom practices to create opportunities for students with disabilities to learn alongside their peers without disabilities. Resources related to the Journey to inclusion can be found at https://www.education.ne.gov/sped/journey-to-inclusion/.

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

With Nebraska’s main infrastructure strategy being MTSS, the priorities moving forward will be to continue focusing on aligning resources and programs within the State educational system.

For the main strategy of implementing MTSS statewide, the State will continue to implement Language Essentials for Teacher of Reading and Spelling (LETRS) and WORDS, hold an MTSS conference, and provide MTSS systems level training and training specific to English Language Arts. These all will continue, building sustainability and implementation supports based on areas of needs determined through evaluation of data collected.

To continue to support districts who have selected reading as a focus for improvement on their Targeted Improvement Plans (TIPs) adding supports for measuring fidelity of implementation, the MTSS State Facilitators also will continue to implement training specific to reading. Our ELA specific training will have a high focus on the selection of high-quality instructional materials with detail in aligning the Interventions at Tiers II and III to the materials. The Journey to inclusion work along with the MTSS Summit will ensure connectivity to ELA system support in schools.

With the Department’s focus on renewal and acceleration for all students, specifically students with disabilities as a historically marginalized subgroup, it continues to be apparent that the focus within schools and thus within the SEA needs to continue on system alignment. Across American Rescue Plan consultation meetings, there was a consistent push to create more coherence, efficiency, and mutual reinforcement across the major processes and to create a clearer sense of connection of how these processes interact and to plan into these processes tiers of support based on need. This work seeks to align, define, and streamline NeMTSS, high-quality instructional materials (HQIM), and continuous improvement processes and tools with attention to social emotional learning and whole-child wellbeing.

At the end of this process:
We want to have a shared vision of success - shared within the entire State Educational Agency and statewide, including our Educational Service Units
We want our stakeholders to hear us speaking with one voice
We want to have functional and trusting spaces to identify and productively work through tension and conflict and ensure the work is cohesive
We want to make it clearer what actions school and system leaders need to take to support students and to make it easier for them to take those actions

Creating this alignment will ensure that schools have the resources they need to support student well-being, ultimately supporting academic growth.

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

Nebraska continued to require districts to submit and report on the evidence-based practices used to improve the outcomes of students with disabilities through the development of a Targeted Improvement Plan.

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

Nebraska continued to require districts to create a Targeted Improvement Plan (TIP) to report the evidence-based strategy implemented to improve student outcomes. Based on a review of the TIP, 83% of the 244 districts focused on reading as their area of improvement which is an increase from the year before.

The evidence-based practices selected by districts include explicit instruction (60%), strategies to promote active student engagement (18%), implementing flexible grouping (15%), and providing positive and constructive feedback to guide students’ learning and behavior (7%) among other strategies.

239 districts provided a numerical target to demonstrate improvement toward their goal. 80% of those districts provided performance data and 49% of the districts indicated they met or exceeded their target.

**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.**

The targeted improvement plan focuses on the core components of continuous improvement and is designed to help districts focus on analyzing data to make decisions to improve the outcomes of students with disabilities. It also requires districts to select a specific evidence-based practice to implement to achieve those results and develop fidelity measures to ensure practices are implemented with fidelity. Districts are provided feedback on the targeted improvement plans submitted to further guide the continuous improvement process. When Nebraska developed Phase I of the SSIP, it was identified that students with disabilities were not achieving at the level anticipated due to the lack of evidence-based practices in use. The targeted improvement plan has required districts to focus on evidence-based practices and has moved to measuring the fidelity of the practices to improve results. To help support districts in assessing level of implementation, NDE has provided regional trainings to districts that focused on providing examples of fidelity measures.

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

Districts self-reported the level of fidelity of implementation of the evidence-based practice (EBP) in use as well as fidelity of implementation of MTSS. Information specific to the fidelity of implementation of MTSS can be found in the Continued Evidence-Based Practices section above.

As part of the Targeted Improvement Plan, Districts were asked to report the level of implementation of the evidence-based practice selected based on a Likert scale. Based on that information, 52% of Districts reported they implement the evidence-based practice “most of the time”; 39% of Districts reported they implement evidence-based practice “at least half of the time”; 6% reported they “rarely implemented’; 2% reported the evidence-based practice was “not implemented”; 1% indicated they “don’t know”.

**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.**

No additional data was collected.

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

Based on a review of the TIPs submitted in 2022, the State will provide additional professional development to assist districts in understanding the differences between outcome and implementation measures, measuring fidelity, and applying data-based decision making within a continuous improvement model. With an increase in additional professional development the state anticipates seeing a higher percentage of districts indicating they are implementing with fidelity supported by data and obtaining the targets set to ultimately impact student achievement.

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

NO

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

The Department of Education will be setting new cut scores for the ELA NSCAS assessment to reflect changes in performance post-pandemic and the new ELA standards that took effect. Changes in cut scores and the adoption of new standards will require stakeholder feedback to reset targets.

A proposed change from using the Measures of academic Progress (MAP) to using the Nebraska Student Centered Assessment System (NSCAS) for assessing growth which will align more closely with the statewide assessment system so teachers have increased knowledge of how students are performing in order to achieve reading standards is currently under discussion with the State Board and is on hold until further notice which will likely cause gaps in data for the 2024 SSIP interim measures.

Focus of Multi-Tiered System of Supports (MTSS) on Social, Emotional, and Behavioral Learning (SEBL) and impact on reading proficiency due to data showing an increase in mental health issues among students and staff because of the pandemic.

Timeline for establishing interim targets using NSCAS growth due to the upcoming change in interim measures from the MAP assessment to the NSCAS growth assessment will be established as soon as decisions are made with the State Board of Education.

Alignment activities to clarify for districts the interconnectedness between MTSS, High Quality Instructional Materials, SEBL, Continuous School Improvement, and the whole child based on data gathered indicating the confusion districts have about those initiatives.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

Nebraska regularly seeks input from stakeholders when establishing policy, regulation, or implementation strategies. Specific to the development of the State Performance Plan and Annual Performance Report (SPP/APR), Nebraska established a broad-based stakeholder group called the RDA Stakeholder Group. The RDA Stakeholder Group includes representation from the following: parents, special education directors, special education staff, general education administrators (principals, superintendents), institutions of higher education, NDE teams (Office of Accountability, Accreditation, and Program Approval; School Improvement; Curriculum, Instruction, and Assessment), community agencies, nonpublic schools, the Nebraska State Education Association, and the Nebraska Association of Special Education Supervisors.

The RDA Stakeholder Group has met periodically throughout the past year and will continue meeting to establish and review targets, needed revisions to targets, and performance as indicated in the SPP/APR and the development and implementation of the State Systemic Improvement Plan (SSIP). Thus far the RDA Stakeholder Group has reviewed historical data around each of the indicators, the targets for each of the indicators, and needed revisions to certain indicator targets. Additionally, the RDA Stakeholder Group assisted NDE in establishing the State Identified Measurable Result (SIMR). As the RDA Stakeholder Group continues meeting, it will provide guidance and input on the development of the continued phases of the SSIP process.

In addition to the RDA Stakeholder Group, established specifically for the purpose of gathering input on the SPP/APR, Nebraska also obtained input from two longstanding stakeholder groups with some members serving as liaisons to the RDA Stakeholder Group: Special Education Advisory Council (SEAC) and the Results Matter Nebraska Task Force (Task Force). SEAC is established pursuant to 34 C.F.R. § 300.167 and, as such, provides input from a diverse group of stakeholders. SEAC and the Task Force, which regularly discusses the SPP/APR and provides input on the targets and strategies contained therein, has reviewed, and supported the work of the RDA Stakeholder Group. NDE continues to work collaboratively with stakeholders, including SEAC and the Task Force, to analyze and review data to assist in making changes to the SSIP in relation to the SiMR data, interim measures of progress, and any needed changes to infrastructure and programmatic activities, along with any changes needed to the targets within each indicator.

The Office of Special Education and stakeholders continue to have an ongoing collaborative relationship while implementing and evaluating the SSIP. Stakeholder have included the following:
Results Based Accountability (RDA) Stakeholders
Special Education Advisory Council (SEAC)
MTSS Stakeholder’s Group

Each of the groups consisted of the following:
Parents
Special Education Directors
Special Education staff
General Education Administrators (including principals and superintendents)
Staff from Institutions of Higher Education
Community agencies
Nonpublic school staff
Nebraska State Education Association members
Nebraska Association of Special Education Supervisors members
Members from various Offices within the Nebraska Department of Education including:
Office of Accountability, Accreditation, and Program Approval
School Improvement
Curriculum, Instruction, and Assessment

The State has met with stakeholders in person and virtually, to be responsive to community needs while providing opportunities for decision-making inclusive of broad stakeholder perspectives.

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

Each of the groups met at different frequencies. Stakeholders collaborated with the State in making decisions about the data for the SiMR including analyzing and reviewing the following data:
SiMR
MAP
TS Gold
Implementation
Infrastructure

Stakeholders also worked collaboratively with the State to determine next steps based on the data analyzed and reviewed.

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

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

Stakeholders expressed concern with the impact new standards for English/Language Arts will have on proficiency scores. Stakeholders were informed of the change in cut scores that will occur to address the new standards and will take into account the changes needed to cut scores based on post-pandemic national and state trends. Stakeholders have also been informed that new targets will need to be set and opportunities to participate will be announced to allow for feedback.

**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.**

All activities have already been described.

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

See Evaluation Plan at https://cdn.education.ne.gov/wp-content/uploads/2021/12/Theory-of-Action-v2-ACCESS-CHECKED-sped.pdf

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

January 1, 2023 our Commissioner of Education resigned. The Nebraska Department of Education has already hired a firm to hire a new Commissioner. The Department has been asked to continue its work as it has been. When a new Commissioner is hired, the Office of Special Education will work to provide information about the work being done. Changes may be required based on the Commissioner’s goals for the Department.

Although the Department has been working on moving from the MAP assessment to the NSCAS Growth Assessment, the Department was asked to stop this work by the State Board of Education. Pausing this move from the MAP to NSCAS Growth will cause a lapse in interim data to measure progress toward the SiMR. The Office of Special Education is working with Data Management and Application Development (DMAD) to ensure we get both MAP assessment and NSCAS Growth Assessment results until decisions are made and the full transition from MAP to NSCAS Growth is completed.

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

## 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:**

Amy Rhone

**Title:**

Administrator/State Director

**Email:**

amy.rhone@nebraska.gov

**Phone:**

531-207-9978

**Submitted on:**

04/27/23 5:09:51 PM

# Determination Enclosures

## RDA Matrix

**Nebraska**

2023 Part B Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination[[3]](#footnote-4)**

| **Percentage (%)** | **Determination** |
| --- | --- |
| 84.03% | Meets Requirements |

**Results and Compliance Overall Scoring**

|  | **Total Points Available** | **Points Earned** | **Score (%)** |
| --- | --- | --- | --- |
| **Results** | 24 | 19 | 79.17% |
| **Compliance** | 18 | 16 | 88.89% |

**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** | 94% | 2 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 92% | 2 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 24% | 1 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 94% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 27% | 1 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 92% | 1 |

**Math Assessment Elements**

| **Math Assessment Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 94% | 2 |
| **Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments** | 92% | 2 |
| **Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 54% | 2 |
| **Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 93% | 1 |
| **Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress** | 22% | 1 |
| **Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress** | 90% | 1 |

**Exiting Data Elements**

| **Exiting Data Elements** | **Performance (%)** | **Score** |
| --- | --- | --- |
| **Percentage of Children with Disabilities who Dropped Out** | 14 | 1 |
| **Percentage of Children with Disabilities who Graduated with a Regular High School Diploma\*\*** | 76 | 1 |

\*\*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[[4]](#footnote-5)** | **Performance (%)**  | **Full Correction of Findings of Noncompliance Identified in FFY 2020** | **Score** |
| --- | --- | --- | --- |
| **Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.** | 0.00% | N/A | 2 |
| **Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.** | 0.00% | N/A | 2 |
| **Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.** | 2.62% | YES | 2 |
| **Indicator 11: Timely initial evaluation** | 94.14% | YES | 2 |
| **Indicator 12: IEP developed and implemented by third birthday** | 91.52% | N/A | 2 |
| **Indicator 13: Secondary transition** | 52.94% | YES | 0 |
| **Timely and Accurate State-Reported Data** | 97.62% |  | 2 |
| **Timely State Complaint Decisions** | 100.00% |  | 2 |
| **Timely Due Process Hearing Decisions** | N/A |  | N/A |
| **Longstanding Noncompliance** |  |  | 2 |
| **Specific Conditions** | None |  |  |
| **Uncorrected identified noncompliance** | None |  |  |

## Data Rubric

**Nebraska**

FFY 2021 APR[[5]](#footnote-6)

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

|  |  | **618 Data[[6]](#footnote-7)** |  |  |
| --- | --- | --- | --- | --- |
| **Table** | **Timely** | **Complete Data** | **Passed Edit Check** | **Total** |
| **Child Count/****Ed Envs** **Due Date: 4/6/22** | 1 | 1 | 1 | 3 |
| **Personnel Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **Exiting Due Date: 11/2/22** | 1 | 0 | 1 | 2 |
| **Discipline Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **State Assessment Due Date: 12/21/2022** | 1 | 1 | 1 | 3 |
| **Dispute Resolution Due Date: 11/2/22** | 1 | 1 | 1 | 3 |
| **MOE/CEIS Due Date: 5/4/22** | 1 | 1 | 1 | 3 |
|  |  |  | **Subtotal** | 20 |
| **618 Score Calculation** |  |  | **Grand Total** (Subtotal X 1.23809524) = | 24.76 |

| **Indicator Calculation** |  |
| --- | --- |
| A. APR Grand Total | 26 |
| B. 618 Grand Total | 24.76 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 50.76 |
| 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\*) = | 0.9762 |
| E. Indicator Score (Subtotal D x 100) = | 97.62 |

**\*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. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-3)
3. 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-4)
4. 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-5)
5. 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-6)
6. 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-7)