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

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

**For reporting on
FFY 2020**

**Oklahoma**



**PART B DUE February 1, 2022**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

Seventeen accountability indicators are reported to the Office of Special Education Programs (OSEP) on an annual basis, including the State Systemic Improvement Plan (SSIP). Indicator data are drawn from the district end-of-year reports, October child counts, and various other sources (including annual assessment reports and parent and student surveys). Districts are responsible to the Oklahoma State Department of Education (OSDE) for meeting a target for each indicator, just as the State is responsible to OSEP. The Office of Special Education Services in the OSDE uses a District Data Profile tool to share results with the districts annually. The data are aggregated to report to OSEP.

FFY2020 marks the first year of a new six-year SPP/APR reporting cycle. New cycles can bring big changes to state performance ratings, either by requiring new measurements or calculations, or by allowing states and territories to re-consider their baselines and targets. This year, indicators 1, 3, 6, 8 and 17 are entirely new or reflect calculation changes in Oklahoma. The state took advantage of the opportunity to reset a number of targets across indicators to reflect the successes of and challenges faced by districts and students over the past two years, incorporating stakeholder input into the selection of current and future targets. As a result of this process, Oklahoma met target on all performance indicators this year, even in areas where the state struggles such as assessment proficiency.

Oklahoma improved or maintained high quality results on all indicators that measure compliance with IDEA mandates: indicators 4, 9, 10, 11, 12 and 13.

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

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

543

**General Supervision System:**

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

Oklahoma’s general supervision system is designed to ensure the implementation of the Individuals with Disabilities Education Improvement Act (IDEA) of 2004. The main purpose of the State system is to support and build capacity for effective implementation of the IDEA by the State and local education agencies (LEAs), in order to improve outcomes for students with disabilities in Oklahoma. This system is designed to: a) ensure compliance with federal and state regulations and b) improve services and results for students with disabilities.

Policies, Procedures, and Effective Implementation
Oklahoma’s special education policies and procedures support state and local implementation of the IDEA. Agencies responsible for special education and related services must abide by Oklahoma State law, policies, procedures, and the federal regulations for the IDEA Part B and C. Agencies having these responsibilities are: local educational agencies (LEA), public charter schools not otherwise included as LEAs, other public agencies (e.g., State schools for students with deafness and blindness and State and local juvenile and adult correctional facilities), and accredited private schools and facilities as described in the applicable federal regulations and established by Oklahoma State laws. The OSDE-SES has outlined specific strategies for implementation of the IDEA in the Oklahoma Special Education Handbook. Additional information about Oklahoma’s policies and procedures are included in the Oklahoma Special Education Policies and the Oklahoma Special Education Process Guide. LEAs are responsible for developing policies and procedures and ensuring effective implementation. LEAs are required annually to complete the Local Education Agency Agreement for Special Education in Oklahoma which ensures all eligible students in the LEA will have access to a free and appropriate public education (FAPE) (34 CFR § 300.17). In addition, LEAs are required to submit Local Education Agency Assurances which demonstrate that the LEA understands its responsibilities under the IDEA. All handbooks and guides are available on the OSDE-SES website at https://sde.ok.gov/documents-forms.

IDEA B State Advisory Panel
The OSDE-SES develops policies and procedures with the support of the IDEA B State Advisory Panel. The IDEA B State Advisory Panel for Special Education serves as an advisory group to the OSDE-SES on issues related to special education and related services for students with disabilities (34 CFR §300.167). The Panel includes the following stakeholders: parents of students with disabilities; individuals with disabilities; state and local education officials; state and local agency representatives; general and special education school administrators and teachers; advocacy groups; representatives of institutions of higher education that prepare special education and related services personnel; representatives of private schools and charter schools; representatives of vocational, community, and business organizations concerned with the provision of transition services to youth with disabilities; and representatives of state juvenile and corrections agencies (34 CFR §300.168). The Panel participates in the annual review and revision of the SPP/APR, including the development of state targets, the review of data of improvement activities, and making suggestions for updates to the activities and targets. More information, including the IDEA B State Advisory Panel Operating Guidelines, can be found here: http://ok.gov/sde/idea-b-advisory-panel.

Integrated Monitoring
Refer to http://sde.ok.gov/sde/compliance for the general supervision system manual that governs differentiated monitoring and compliance monitoring.

Federal Fiscal Management
Oklahoma’s system of general supervision includes a process to provide oversight in the distribution and use of IDEA funds at the State and local level. Information on these processes can be found in the Special Education Funding Manual for IDEA Part B found at http://sde.ok.gov/sde/finance. Each LEA must complete Assurances and Agreements annually at the beginning of each fiscal year. This activity must take place before the IDEA Consolidated Application is available for LEAs to budget IDEA Part B funds.

Data on Processes and Results
As part of Oklahoma’s general supervision responsibilities, data are used for decision making about program management and improvement. This process includes: (1) data collection and verification, (2) data examination and analysis, (3) public reporting of data, (4) status determination, and (5) improvement activities. The OSDE-SES posts information on its website to support LEAs as they work to improve their data collection and reporting capacity. Such information includes data collection and reporting guidance, definitions, timelines, and templates. (http://sde.ok.gov/sde/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21)

Effective Dispute Resolution
Several mechanisms are available through the OSDE to assist in resolving disputes (see http://sde.ok.gov/sde/special-education-dispute-resolution). These processes include IEP facilitation, mediation, formal complaints, due process hearings, facilitated resolution sessions and expedited due process hearings. The Special Education Resolution Center (SERC) manages the special education due process hearing system for the State of Oklahoma. SERC’s duties have been expanded to implement innovative programs to assist parents and LEAs to settle disputes at the earliest stage possible. At no cost to either party, SERC provides highly trained mediators to assist with disputes which may develop at any time during the relationship of the parties over special education issues and highly trained facilitators during required resolution sessions of due process. SERC also provides stakeholder training that supports mutual collaboration. More information on SERC can be located at https://ok.gov/abletech/Special\_Education\_Resolution\_Center/.

**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.**

Technical Assistance (TA) is designed to link directly to indicators in the SPP/APR and to improve the level of compliance in LEAs. The comprehensive approach to technical assistance enables the OSDE-SES to differentiate the scope of services provided for LEAs based on local needs. For example, the OSDE-SES makes TA available for all LEAs, such as meetings with local LEAs, webinars to support compliant implementation of the IDEA, updates via email, webinars, and in-person training on a variety of topics:
• the Oklahoma Special Education Handbook,
• best practices for the use and implementation of accommodations,
• the special education online IEP system,
• high quality data collection and reporting,
• the differentiated monitoring process, and
• high quality financial accountability and budgeting, among others.

Basic TA includes providing documentation of evidence-based practices and disseminating examples of success to assist others in planning, implementation and use of tools to achieve positive outcomes. TA ranges from general levels, such as providing a review of best practices, to providing targeted technical assistance (TTA), which includes more focused levels of support such as the state directing root cause analysis and monitoring of CAP development and subsequent correction.

TTA includes a purposeful and planned series of activities that result in changes to policy, program, or operations that support increased capacity at the state/system/school levels. LEAs can access resources for technical assistance on the OSDE-SES webpage and request technical assistance via a help desk form on the OSDE-SES webpage or by contacting via phone or email. The OSDE-SES has created multiple self-assessments based on OSEP indicators and other special education areas for use by LEAs in determining their level of compliance and/or best practice. The self-assessments can be used at the classroom, school, or district level. For more information please see http://sde.ok.gov/sde/ses-tech-assistance. LEAs may also conduct the School Level Technical Assistance Survey to help determine areas in need of assistance. The OSDE-SES’s role in this process is to: a) provide data and information as requested; b) provide technical assistance and professional development; c) provide guidance on the development and implementation of improvement plans; and d) ensure compliance with the IDEA and State regulations regarding the provision of special education services.

**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.**

Professional Development ranges from a basic level of providing general information to targeted and intensive PD, which is focused on data driven school improvement in LEAs, schools and classrooms. The OSDE-SES offers PD or suggests PD resources based on various concerns in collaboration with other divisions in the agency. PD is provided in three ways: 1) as requested by LEAs, school sites, teachers, or other interested stakeholders; 2) providing professional development resources for use by LEAs, school sites, teachers, or other interested stakeholders; and 3) as part of regional or statewide conferences hosted by the OSDE, other state agencies, or technical assistance centers. The OSDE-SES has also implemented an online professional development platform (PEPPER) accessible through the online IEP system and webpage and provides courses to teachers and the general public through OSDE's online training site. Special Education teachers and staff have access to additional modules and may be directed by district leadership or the OSDE-SES, through compliance monitoring, to complete selected modules.

The OSDE-SES also offers PD resources through its webpage. The OSDE-SES has created Professional Development Modules for use by LEAs, schools, and other interested stakeholders (http://sde.ok.gov/sde/professional-development-directory). These modules are intended for use in a workshop or other professional development settings. When LEAs or schools identify a particular PD need for special education, they can easily access PD modules and provide local PD in a timely fashion. Importantly, these modules are intended to build coherence around best practices for the provision of special education services. Each module includes relevant background information, activities/materials, and a scripted PowerPoint presentation for a particular topic area. Requests for technical assistance and professional development form the OSDE-SES can be made through an online help desk. Requests are tracked to determine areas of district need.

Additionally, the OSDE-SES contracts with other agencies and providers to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities. A few examples are agreements with Oklahoma ABLE Tech, the Oklahoma Autism Center, and the Oklahoma Department of Rehabilitation Services. Oklahoma ABLE Tech (https://www.ok.gov/abletech/) provides training on developing AT teams and acquiring AT devices, and collaborates with the OSDE-SES on updates to technical assistance documents for AT and AEM. The Oklahoma Autism Center, through the University of Oklahoma Health Sciences Center, provides comprehensive professional development services to build the state’s capacity for educating children and youth with autism spectrum disorder and related disabilities. This includes providing services statewide to local education agencies, SoonerStart (Part C services), and pre-service educators in teacher and related service preparatory programs. Professional development is provided by maintaining an inclusive model demonstration and training site for observation and hands-on experience and by providing training and technical assistance, including demonstration, coaching and mentoring in the classroom, at LEA sites. Training and support to families is also incorporated into professional development activities. The OSDE-SES also collaborates with the Oklahoma Department of Rehabilitation Services to provide training and professional development regarding secondary transition services, to collaborate on updates to the technical assistance document on secondary transition, and to provide an annual conference on secondary transition.

**Broad Stakeholder Input:**

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

In the APR target-setting meetings, stakeholders were presented with historical trend data for each performance indicator and several possible future trend lines to provide them context for setting performance targets. Historical trends were more difficult to present for new indicators, but at least two years of data were available for each of these (1, 3 and 6c), except 17. Stakeholders were also provided information about the various methods with which targets could be set over time and their differences (forecasting based on historical trend lines versus annual percentage changes, for example). Descriptions of stakeholder feedback are provided separately for each indicator.

SSIP meetings began in 2020 and continued through 2021, and several are planned for 2022 as well. SPP/APR meetings began in August 2021. Four were held to cover all the indicators, divided into broad topic areas: early childhood outcomes, secondary outcomes, assessment and 'miscellaneous' indicators. Subsequent meetings were held specifically with the IDEA B Advisory Panel and district special education representatives in September and October to collect additional feedback about proposed targets (taking into account the initial stakeholder input). A third round of meetings was held in December to announce the final targets to stakeholders. The state SSIP Leadership Team conducted data and infrastructure analyses, shared program ideas, and held long discussions with stakeholders about what should be done to improve student outcomes. Stakeholder input and program decisions are provided in more detail in the section for Indicator 17.

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

NO

**Number of Parent Members:**

207

**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.**

Through the mechanisms described earlier, OSDE-SES sought to create an open environment for parents to share their thoughts on target setting, data analysis, program improvement, and evaluating progress with each other and program administration throughout the stakeholder input process.

Parents from the SAP, the Oklahoma Parent Center, several disability advocacy and support organizations, districts, as well as the general community participated in all stakeholder activities at some level. Parents attended one or more of ten virtual meetings to discuss improvement strategies and future targets for the APR and SSIP. In these meetings, parents contributed to the discussions and responded to polling questions that requested input into targets, target setting methodologies, program goals/outcomes and project design.

**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.**

OSDE-SES has conducted activities to increase the ability of parents to be engaged in the development of implementation activities. First, the state used several outreach mechanisms to ensure that parents from all backgrounds would have the opportunity to participate in stakeholder feedback sessions, including updated website resources for the SPP/APR and the SSIP, notifications and invitations sent through social media and email, and information shared through parent and advocacy organizations across the state. The state worked with the Oklahoma Parent Center in particular to increase outreach to parents and hosted several stakeholder meetings together.

Substantial work was completed to ensure that participants would have the knowledge they would need to meaningfully participate in defining future plans, targets and goals for the state. During stakeholder meetings to set APR targets, for example, participants were provided detailed explanations of each indicator, including calculation methods, historical data trends, and contextual information.

To support parents’ and other participants’ understanding of the fairly complex data presented, each discussion incorporated visual displays of historical results and targets to help examine trends in the state and the impact of the pandemic. Additionally, stakeholders were given information to allow them to make meaningful contributions about setting targets over time. This included a detailed discussion of a variety of target-setting approaches:
-standard forecast using historical data trendline
-average year-to-year difference, added annually
-maintain historic trendline target lines
-annual percentage or number change annually
-defined long-term goal with interim growth
-if close to goal, minimal annual change

OSDE-SES encouraged discussion and questions to ensure that parent stakeholders had adequate information to make well-informed suggestions and/or decisions. It also asked participants to directly vote on their preferences related to targets and target setting methods to ensure that every one would have the opportunity to contribute, whether or not they felt comfortable speaking in an online forum.

**Soliciting Public Input:**

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

Oklahoma used several mechanisms to solicit and collect stakeholder input to inform targets and program development related to the SPP/APR (including the SSIP): online discussions, surveys, and meeting polling. By collecting qualitative and quantitative data, the state was able to develop targets and design the SSIP with meaningful stakeholder participation. Meetings and discussions were held with a broad variety of stakeholders, including members of the state’s IDEA B Advisory Panel, parents, district personnel (teachers and administrators), and parent and community advocates. Stakeholders were invited to participate through the Oklahoma Parent Center, social media, email notices, and special invitations made to community and disability advocacy groups. Information about final targets has been posted online for all to view and review.

**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.**

Oklahoma has created a website for SPP/APR target setting and associated activities: https://sde.ok.gov/apr-target-setting. This website houses a wide variety of documents to support stakeholder engagement and increase capacity to participate. The final target results are also posted on this site.

A similar page has been created to post information about the SSIP: https://sde.ok.gov/state-systemic-improvement-plan.

**Reporting to the Public**

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

The State's performance plan is available on the OSDE-SES Part B data webpage located at http://sde.ok.gov/sde/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21, and is also distributed through public agencies. Each year, special education reporting dates are posted to build capacity for LEAs to report timely and accurate data. Additional information about the special education reports and due dates are included in the Oklahoma Special Education Data Manual, in the General Supervision System guidance on Differentiated Monitoring and Results-based Accountability, and in all training materials.

Oklahoma reports annually on the targets in the SPP/APR in writing to each LEA located in the State. Additionally, the State reports annually to the public on the performance of each LEA located in the State by posting current redacted DDPs and District Determinations on the OSDE webpage (see above). The FFY 2019 district performance reports ("FY 2020 Public Reporting") are located on the Part B data webpage listed above (and directly at the link provided). The FFY 2020 district performance reports are already posted in the same location.

## Intro - Prior FFY Required Actions

None

## Intro - OSEP Response

## Intro - Required Actions

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

## 1 - Indicator Data

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

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 84.63% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 87.00% | 87.00% | 87.00% | 87.00% | 87.00% |
| Data | 75.55% | 74.44% | 76.97% | 58.34% | 79.1%[[2]](#footnote-3) |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 84.00% | 85.00% | 86.00% | 87.00% | 88.00% | 89.00% |

**Targets: Description of Stakeholder Input**

Ten outside stakeholders participated in the initial target-setting meeting for secondary outcomes. Indicators 1 and 2 were presented together and targets were jointly set because their results mirror each other. (Oklahoma does not have an alternate diploma and only a handful of students exit by reaching maximum age, so the graduate rate and the dropout rate will sum close to 100 percent.)

Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma, and the change in the data source for indicator 1 was considered. After a discussion about long-term goals and measurements for indicators 1 and 2, stakeholders were asked to vote their preferences among a) possible pairs of end-of-cycle targets and b) methods for setting interim targets.

Half of the eight voting stakeholders opted for the two final target options (90/9% and 88/11%) that were in the middle of the proffered range. The other four opted for the highest or the lowest targets (84/15% and 95/4%, which are the state’s ESSA targets). As a result, the state selected final targets that balance those preferences: 89% for graduation and 10.9% for drop out.

Stakeholders preferred either using an average annual difference method to set interim targets or selecting a specific annual percentage change. Because historical data for graduation is not representative of the new calculation, the state chose to select an annual percentage change.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 6,631 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 8 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 1,196 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6,631 | 7,835 | 79.1%[[3]](#footnote-4) | 84.00% | 84.63% | N/A | N/A |

**Graduation Conditions**

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

In order to graduate from a public high school accredited by the State Board of Education with a standard diploma, students shall either complete the requirements for the college preparatory/work ready curriculum or the core curriculum. Please see the following link for the graduation requirements checklists for both curriculum paths (https://sde.ok.gov/achieving-classroom-excellence-resources). Students with disabilities do not have different graduation requirements. No alternative diploma exists.

**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)**

The data for indicator 1 reflect school year 2019-20. The graduation rate was not affected substantially by the pandemic that school year, as students maintained their enrollment status during the remote learning months of late March through mid May.

Exiting data for SY 20-21 are already known, and the graduation rate has decreased precipitously as a result of the pandemic. It is possible that Oklahoma will reconsider baseline and targets again next year, depending on the graduation results for SY 21-22. We expect rates to improve closer to the historical trend, but also know that the pandemic has created many challenges for students and schools.

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

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

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

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

**Measurement**

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

**Instructions**

*Sampling is not allowed.*

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

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

OPTION 1:

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

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

OPTION 2:

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

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

Options 1 and 2:

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

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2011 | 20.70% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 18.00% | 17.00% | 16.00% | 15.00% | 15.00% |
| Data | 19.75% | 16.60% | 14.25% | 14.45% | 13.92% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 15.90% | 14.90% | 13.90% | 12.90% | 11.90% | 10.90% |

**Targets: Description of Stakeholder Input**

Ten outside stakeholders participated in the initial target-setting meeting for secondary outcomes. Indicators 1 and 2 were presented together and targets were jointly set because their results mirror each other. (Oklahoma does not use an alternate diploma and only a handful of students exit by reaching maximum age, so the graduate rate and the dropout rate will sum close to 100 percent.)

Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma, and the change in the data source for indicator 1 was considered. After a discussion about long-term goals and measurements for indicators 1 and 2, stakeholders were asked to vote their preferences among a) possible pairs of end-of-cycle targets and b) methods for setting interim targets.

Half of the eight voting stakeholders opted for the two middle final target options (90/9% and 88/11%). The other four opted for the highest or the lowest targets (84/15% and 95/4%, which are the state’s ESSA targets). As a result, the state selected final targets of 89% for graduation and 10.9% for drop out that balance those preferences.

Stakeholders preferred either using an average annual difference method to set interim targets or selecting a specific annual percentage change. Because historical data for graduation is not representative of the new calculation, the state chose to select an annual percentage change of one point for both indicators 1 and 2, moving in opposite directions. This method will ensure that if one target is met, the other will be also.

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

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 6,631 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | 0 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 8 |
| SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/26/2021 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 1,196 |

**FFY 2020 SPP/APR Data**

| **Number of youth with IEPs (ages 14-21) who exited special education due to dropping out** | **Number of all youth with IEPs who exited special education (ages 14-21)**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,196 | 7,835 | 13.92% | 15.90% | 15.26% | Met target | No Slippage |

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

A student who leaves an accredited public local education agency prior to graduation, without re-enrolling in another public LEA, is considered a drop-out for that academic year. Students who move to private institutions and homeschool are generally considered "return to regular education," and may or may not continue to be eligible for special education (depending on the nature of the exit). Students whose next educational agency is not known are also considered drop-outs, the equivalent of “Moved, not known to be continuing in a diploma-issuing agency.”

**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)**

The data for indicator 2 reflect school year 2019-20. The drop out rate, which had been decreasing for several years in a row, increased by about 1.3 percentage points. The increase is due in part by the pandemic, when some students exited (as dropouts) in late spring 2020 when schools did not return in person.

Exiting data for SY 20-21 are already known, and the dropout rate has increased dramatically as a result of the pandemic. It is possible that Oklahoma will reconsider baseline and targets again next year, depending on the exit data for SY 21-22. We expect the number of dropouts to decrease closer to the historical trend, but also know that the pandemic has created many challenges for students and schools.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

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

## 2 - Required Actions

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 92.18% |
| Reading | B | Grade 8 | 2020 | 88.50% |
| Reading | C | Grade HS | 2020 | 82.04% |
| Math | A | Grade 4 | 2020 | 92.39% |
| Math | B | Grade 8 | 2020 | 87.79% |
| Math | C | Grade HS | 2020 | 87.24% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 92.00% | 95.00%  | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | B >= | Grade 8 | 87.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | C >= | Grade HS | 87.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | A >= | Grade 4 | 92.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | B >= | Grade 8 | 87.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | C >= | Grade HS | 87.00% | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial target-setting meeting for assessment (indicator 3). Several others from the OSDE-SES also participated, increasing the number of voting responses. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma, and the changes to the indicator were considered. After a discussion about long-term goals and measurements for indicator 3, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets.

Stakeholders overwhelmingly preferred to set annual targets at 95% for 3A, except for the first year. Because testing in spring 2021 was affected by the pandemic, the state has proposed to set current year targets to match the reduced testing participation and the differences across grades and subjects. FFY 2021 targets will return to 95% and remain there for all grades and subjects regardless of current levels. Baselines are changing because of the change to the indicator. Stakeholders have agreed with this approach.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/30/2022

**Reading Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 9,446 | 8,386 | 7,245 |
| b. Children with IEPs in regular assessment with no accommodations | 2,613 | 1,687 | 2,608 |
| c. Children with IEPs in regular assessment with accommodations | 5,458 | 5,110 | 2,752 |
| d. Children with IEPs in alternate assessment against alternate standards | 636 | 625 | 584 |

**Data Source:**

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

**Date:**

03/30/2022

**Math Assessment Participation Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs\* | 9,443 | 8,378 | 7,244 |
| b. Children with IEPs in regular assessment with no accommodations | 2,496 | 1,536 | 2,825 |
| c. Children with IEPs in regular assessment with accommodations | 5,592 | 5,192 | 2,913 |
| d. Children with IEPs in alternate assessment against alternate standards | 636 | 627 | 582 |

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

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

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 8,707 | 9,446 |  | 92.00% | 92.18% | N/A | N/A |
| **B** | Grade 8 | 7,422 | 8,386 |  | 87.00% | 88.50% | N/A | N/A |
| **C** | Grade HS | 5,944 | 7,245 |  | 87.00% | 82.04% | N/A | N/A |

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

| **Group** | **Group Name** | **Number of Children with IEPs Participating** | **Number of Children with IEPs** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 8,724 | 9,443 |  | 92.00% | 92.39% | N/A | N/A |
| **B** | Grade 8 | 7,355 | 8,378 |  | 87.00% | 87.79% | N/A | N/A |
| **C** | Grade HS | 6,320 | 7,244 |  | 87.00% | 87.24% | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

https://sde.ok.gov/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21

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

The pandemic affected state testing participation and results in SY 20-21. Participation decreased and proficiency declined.

The SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589) data submitted in December 2021 were not accurate; the state dataset that populates the files was found to be incomplete in January. The file will be resubmitted in March 2022.

The correct Reading Assessment participation for Group C (Grade HS) aligns with the Math Assessment participation count and rate for children with IEPs (near 6300 rather than 5944, for a rate of 87% instead of 82%). The inaccurate submission means that the FFY baseline and target for Group C – Reading are temporarily set to match the incorrect FFY 2020 data as submitted. They will be updated next year to reflect the resubmitted counts, though it is possible that changes will be made before the correction period closes.

It is likely that the corrected base dataset will force changes in other files that populate APR indicators in both reading and math for all grades (3B, 3C and 3D). As a result, the state anticipates that all targets and baselines may need to be changed to match the corrected file data submitted after the APR is final.

ADDED DURING CLARIFICATION: Data were resubmitted on April 21 and again on April 27, when both participation and performance data were determined by the state Assessment Office to be inaccurate. The updated participation numbers for both reading and math for SY 20-21 students in HS (11th grade only) are as follows:

Math:
7286 a. Children with IEPs
2839 b. Children with IEPs in regular assessment with no accommodations
2918 c. Children with IEPs in regular assessment with accommodations
584 d. Children with IEPs in alternate assessment against alternate standards
The math participation rate for HS decreases slightly to 87.03% with the adjusted numbers.

Reading:
7288 a. Children with IEPs
2840 b. Children with IEPs in regular assessment with no accommodations
2924 c. Children with IEPs in regular assessment with accommodations
586 d. Children with IEPs in alternate assessment against alternate standards
The reading participation rate for HS increases to 87.13%.

## 3A - Prior FFY Required Actions

None

## 3A - OSEP Response

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

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets. OSEP notes that, for the 2020-2021 school year, the State received, from the Department’s Office of Elementary and Secondary Education, a waiver of accountability and school identification requirements in sections 1111(c)(4) and 1111(d)(2)(C)-(D) of the Elementary and Secondary Education Act of 1965 (ESEA), including a waiver of the requirement that the Academic Achievement indicator be adjusted to account for a participation rate below 95 percent, based on the State’s data from the 2020-2021 school year. Therefore, the targets below 95 percent are accepted for FFY 2020. OSEP accepts the targets of 95 percent for FFYs 2021 through 2025 because the targets are consistent with the requirement in ESEA section 1111(c)(4) to annually measure the achievement of not less than 95 percent of all students, and 95 percent of all students in each subgroup of students, who are enrolled in public schools on the State’s assessments, and the requirement in ESEA section 1111(b)(2)(B)(i)(II) that a State's assessments be administered to all public elementary and secondary school students in the State.

The State reported it resubmitted assessment data to the Department on April 25 and 27, 2022; however, the assessment data prefilled in the Indicator is as of March 30, 2022. Therefore, the assessment data in the APR Reporting Tool is not the most recent assessment data submitted by the State.

## 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 | 7.00% |
| Reading | B | Grade 8 | 2020 | 4.46% |
| Reading | C | Grade HS | 2020 | 5.93% |
| Math | A | Grade 4 | 2020 | 11.45% |
| Math | B | Grade 8 | 2020 | 2.39% |
| Math | C | Grade HS | 2020 | 2.96% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 7.00% | 7.49% | 8.01% | 8.58% | 9.18% | 9.82% |
| Reading | B >= | Grade 8 | 4.46% | 4.77% | 5.11% | 5.45% | 5.85% | 6.26% |
| Reading | C >= | Grade HS | 5.93% | 6.35% | 6.79% | 7.26% | 7.77% | 8.32% |
| Math | A >= | Grade 4 | 11.45% | 12.25% | 13.11% | 14.03% | 15.03% | 16.06% |
| Math | B >= | Grade 8 | 2.39% | 2.56% | 2.74% | 2.93% | 3.13% | 3.35% |
| Math | C >= | Grade HS | 2.96% | 3.17% | 3.39% | 3.63% | 3.88% | 4.15% |

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial target-setting meeting for assessment (indicator 3). Several others from the OSDE-SES also participated, increasing the number of voting responses. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma, and the changes to the indicator were considered. After a discussion about long-term goals and measurements for indicator 3, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets.

At the time that targets were discussed, OSDE-SES did not yet have official assessment data to share with stakeholders. As a result, instead of talking about actual targets, the data analysis consisted of sharing information about what the targets should be (depending on the results when they are known). Stakeholders overwhelmingly preferred to set a long-term goal (final target) with incremental increases, and to differentiate targets by grade and subject.

The state’s ESSA goals were rejected by nearly all participants for this indicator. Five of eleven voters preferred setting final targets between 5 and 10 points higher than current proficiency, while four voted for setting targets no more than 5 percentage points higher. The potential problem with these goals is that 5 or 10 points might be too much (or too little) to realistically achieve depending on the actual baseline proficiency rate.

The state chose to balance these preferences by proposing to set interim targets at 7% annual growth over the previous year’s proficiency rate. The final target for 3B will therefore be a 40.25 percent increase over baseline for each grade and subject, regardless of the starting point. For example, if the current proficiency were 4%, the final target would be 5.6%, but if the current proficiency were 15%, the final target would be 21%.

In subsequent meetings in which these target lines were presented based on theoretical proficiency rates for FFY2020, stakeholders approved this methodology and agreed that it takes into account current starting points. Stakeholders acknowledged that proficiency rates would likely be substantially lower this year than in the past because of the challenges presented to districts and students as a result of the pandemic. Furthermore, the effects of the pandemic over time are not yet known, so we are setting targets without enough data. Targets may need to be adjusted in future years.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 8,071 | 6,797 | 5,360 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 402 | 136 | 134 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 163 | 167 | 184 |

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 8,088 | 6,728 | 5,738 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 573 | 80 | 79 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 353 | 81 | 91 |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 565 | 8,071 |  | 7.00% | 7.00% | N/A | N/A |
| **B** | Grade 8 | 303 | 6,797 |  | 4.46% | 4.46% | N/A | N/A |
| **C** | Grade HS | 318 | 5,360 |  | 5.93% | 5.93% | N/A | N/A |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 926 | 8,088 |  | 11.45% | 11.45% | N/A | N/A |
| **B** | Grade 8 | 161 | 6,728 |  | 2.39% | 2.39% | N/A | N/A |
| **C** | Grade HS | 170 | 5,738 |  | 2.96% | 2.96% | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

https://sde.ok.gov/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21

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

The pandemic affected state testing participation and results in SY 20-21. Participation decreased and proficiency declined.

The state’s dataset that populates the federal assessment files was reviewed and found to be incomplete. When it was updated and corrected in January, the state found that the federal assessment files submitted in December were incorrect. The files will be resubmitted in March 2022.

The inaccurate submission means that the currently posted FFY baselines and targets for all indicator 3 measures may not match the true data. After resubmission, the state will review how the counts for participation and proficiency change and whether baselines and targets must be adjusted. It is possible that changes to these values for FFY 2020 (and future targets, if necessary) will be made before the correction period closes.

ADDED DURING CLARIFICATION: Data were resubmitted on April 21 and again on April 27, when both participation and performance data were determined by the state Assessment Office to be inaccurate. The updated performance counts were not made available to our office prior to the clarification submission.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

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

The State did not provide targets for FFYs 2020 through 2025 for this indicator.

The State resubmitted assessment data to the Department on April 25 and 27, 2022; however, the assessment data prefilled in the Indicator is as of March 30, 2022. Therefore, the assessment data in the APR Reporting Tool is not the most recent assessment data submitted by the State

## 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 | 27.04% |
| Reading | B | Grade 8 | 2020 | 30.40% |
| Reading | C | Grade HS | 2020 | 38.70% |
| Math | A | Grade 4 | 2020 | 53.62% |
| Math | B | Grade 8 | 2020 | 14.51% |
| Math | C | Grade HS | 2020 | 45.70% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 27.04% | 28.93% | 30.96% | 33.13% | 35.44% | 37.92% |
| Reading | B >= | Grade 8 | 30.40% | 32.53% | 34.80% | 37.24% | 39.85% | 42.64% |
| Reading | C >= | Grade HS | 38.70% | 41.41% | 44.31% | 47.41% | 50.73% | 54.28% |
| Math | A >= | Grade 4 | 53.62% | 57.37% | 61.39% | 65.69% | 70.28% | 75.20% |
| Math | B >= | Grade 8 | 14.51% | 15.53% | 16.61% | 17.78% | 19.02% | 20.35% |
| Math | C >= | Grade HS | 45.70% | 48.90% | 52.32% | 55.98% | 59.90% | 64.10% |

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial target-setting meeting for assessment (indicator 3). Several others from the OSDE-SES also participated, increasing the number of voting responses. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma, and the changes to the indicator were considered. After a discussion about long-term goals and measurements for indicator 3, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets.

At the time that targets were discussed, OSDE-SES did not yet have official assessment data to share with stakeholders. As a result, instead of talking about actual targets, the data analysis consisted of sharing information about what the targets should be (depending on the results when they are known). Stakeholders overwhelmingly preferred to set a long-term goal (final target) with incremental increases, and to differentiate targets by grade and subject.

The state’s ESSA goals were rejected by nearly all participants for this indicator. Seven of eleven voters preferred setting final targets between 5 and 10 points higher than current proficiency, while four voted for setting targets no more than 5 percentage points higher. The potential problem with these goals is that 5 or 10 points might be too much (or too little) to realistically achieve depending on the actual baseline proficiency rate.

The state chose to balance these preferences by proposing to set interim targets at 7% annual growth over the previous year’s proficiency rate. The final target for 3B will therefore be a 40.25 percent increase over baseline for each grade and subject, regardless of the starting point. For example, if the current proficiency were 4%, the final target would be 5.6%, but if the current proficiency were 15%, the final target would be 21%.

In subsequent meetings in which these target lines were presented based on theoretical proficiency rates for FFY2020, stakeholders approved this methodology and agreed that it takes into account current starting points. Stakeholders acknowledged that proficiency rates would likely be substantially lower this year than in the past because of the challenges presented to districts and students as a result of the pandemic. Furthermore, the effects of the pandemic over time are not yet known, so we are setting targets without enough data. Targets may need to be adjusted in future years.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 636 | 625 | 584 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 172 | 190 | 226 |

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment | 636 | 627 | 582 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 341 | 91 | 266 |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 172 | 636 |  | 27.04% | 27.04% | N/A | N/A |
| **B** | Grade 8 | 190 | 625 |  | 30.40% | 30.40% | N/A | N/A |
| **C** | Grade HS | 226 | 584 |  | 38.70% | 38.70% | N/A | N/A |

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

| **Group** | **Group Name** | **Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards** | **Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 341 | 636 |  | 53.62% | 53.62% | N/A | N/A |
| **B** | Grade 8 | 91 | 627 |  | 14.51% | 14.51% | N/A | N/A |
| **C** | Grade HS | 266 | 582 |  | 45.70% | 45.70% | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

https://sde.ok.gov/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21

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

The pandemic affected state testing participation and results in SY 20-21. Participation decreased and proficiency declined.

The state’s dataset that populates the federal assessment files was reviewed and found to be incomplete. When it was updated and corrected in January, the state found that the federal assessment files submitted in December were incorrect. The files will be resubmitted in March 2022.

The inaccurate submission means that the currently posted FFY baselines and targets for all indicator 3 measures may not match the true data. After resubmission, the state will review how the counts for participation and proficiency change and whether baselines and targets must be adjusted. It is possible that changes to these values for FFY 2020 (and future targets, if necessary) will be made before the correction period closes.

ADDED DURING CLARIFICATION: Data were resubmitted on April 21 and again on April 27, when both participation and performance data were determined by the state Assessment Office to be inaccurate. The updated performance counts were not made available to our office prior to the clarification submission.

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

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

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

The State resubmitted assessment data to the Department on April 25 and 27, 2022; however, the assessment data prefilled in the Indicator is as of March 30, 2022. Therefore, the assessment data in the APR Reporting Tool is not the most recent assessment data submitted by the State.

## 3C - Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3D - Indicator Data

**Historical Data:**

| **Subject** | **Group**  | **Group Name**  | **Baseline Year**  | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 15.27 |
| Reading | B | Grade 8 | 2020 | 19.45 |
| Reading | C | Grade HS | 2020 | 24.48 |
| Math | A | Grade 4 | 2020 | 16.55 |
| Math | B | Grade 8 | 2020 | 11.10 |
| Math | C | Grade HS | 2020 | 16.66 |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 15.27 | 14.27  | 13.27 | 12.27 | 11.27 | 10.27 |
| Reading | B <= | Grade 8 | 19.45 | 18.45 | 17.45 | 16.45 | 15.45 | 14.45 |
| Reading | C <= | Grade HS | 24.48 | 23.48 | 22.48 | 21.48 | 20.48 | 19.48 |
| Math | A <= | Grade 4 | 16.55 | 15.55 | 14.55 | 13.55 | 12.55 | 11.55 |
| Math | B <= | Grade 8 | 11.10 | 10.10 | 9.10 | 8.10 | 7.10 | 6.10 |
| Math | C <= | Grade HS | 16.66 | 15.66 | 14.66 | 13.66 | 12.66 | 11.66 |

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial target-setting meeting for assessment (indicator 3). Several others from the OSDE-SES also participated, increasing the number of voting responses. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma, and the changes to the indicator were considered. After a discussion about long-term goals and measurements for indicator 3, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets.

At the time that targets were discussed, OSDE-SES did not yet have official assessment data to share with stakeholders. As a result, instead of talking about actual targets, the data analysis consisted of sharing information about what the targets should be (depending on the results when they are known). Stakeholders overwhelmingly preferred to set a long-term goal (final target) with incremental increases, and to differentiate targets by grade and subject.

Challenges to measuring this indicator and setting reasonable targets were also discussed. The primary challenge is that if the levels of proficiency are made by all students being compared (students with disabilities and students without disabilities), the gap may not decrease. Improvement in this indicator requires that students with disabilities increase proficiency at a greater rate than the general population. A secondary challenge is that we do not yet know the effects of the pandemic over time, so we are setting targets without enough data.

Stakeholders overwhelmingly preferred to set a long-term goal (final target) with incremental increases and to differentiate targets by grade and subject. Nearly half of stakeholders voted for moderate improvement, while the other half voted for minimal improvement over baseline (moderate was framed as improvement between five and 10 percentage points over baseline; minimal was setting a final target close to baseline). Two of the twelve voters opted for improvement targets greater than ten points better than baseline.

To balance these preferences, the state proposed final year targets that are five percentage points better than baseline (decreasing the gap by five points), with one percentage point improvements annually. Stakeholders approved this proposal.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 45,479 | 47,290 | 41,752 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,071 | 6,797 | 5,360 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 9,955 | 11,126 | 12,301 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 171 | 181 | 396 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 402 | 136 | 134 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 163 | 167 | 184 |

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Grade 4** | **Grade 8** | **Grade HS** |
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 45,461 | 46,863 | 42,737 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 8,088 | 6,728 | 5,738 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 12,362 | 6,231 | 8,155 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 365 | 92 | 229 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 573 | 80 | 79 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 353 | 81 | 91 |

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

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 7.00% | 22.27% |  | 15.27 | 15.26 | N/A | N/A |
| **B** | Grade 8 | 4.46% | 23.91% |  | 19.45 | 19.45 | N/A | N/A |
| **C** | Grade HS | 5.93% | 30.41% |  | 24.48 | 24.48 | N/A | N/A |

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

| **Group** | **Group Name** | **Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards**  | **Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards**  | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grade 4 | 11.45% | 28.00% |  | 16.55 | 16.55 | N/A | N/A |
| **B** | Grade 8 | 2.39% | 13.49% |  | 11.10 | 11.10 | N/A | N/A |
| **C** | Grade HS | 2.96% | 19.62% |  | 16.66 | 16.65 | N/A | N/A |

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

The state’s dataset that populates the federal assessment files was reviewed and found to be incomplete. When it was updated and corrected in January, the state found that the federal assessment files submitted in December were incorrect. The files will be resubmitted in March 2022.

The inaccurate submission means that the currently posted FFY baselines and targets for all indicator 3 measures may not match the true data. After resubmission, the state will review how the counts for participation and proficiency change and whether baselines and targets must be adjusted. It is possible that changes to these values for FFY 2020 (and future targets, if necessary) will be made before the correction period closes.

ADDED DURING CLARIFICATION: Data were resubmitted on April 21 and again on April 27, when both participation and performance data were determined by the state Assessment Office to be inaccurate. The updated performance counts were not made available to our office prior to the clarification submission.

## 3D - Prior FFY Required Actions

None

## 3D - OSEP Response

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

The State did not provide targets for FFYs 2020 through 2025 for this indicator.

The State resubmitted assessment data to the Department on April 25 and 27, 2022; however, the assessment data prefilled in the Indicator is as of March 30, 2022. Therefore, the assessment data in the APR Reporting Tool is not the most recent assessment data submitted by the State.

## 3D - Required Actions

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 14.71% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 7.00% | 6.60% | 6.30% | 6.00% | 6.00% |
| Data | 1.45% | 14.71% | 14.71% | 3.98% | 36.36% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 40.00% | 45.00% | 37.00% | 29.00% | 21.00% | 13.00% |

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial meeting where targets were discussed for the “miscellaneous” indicators, which included numbers 4, 5, 8, 15 and 16. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma, and the challenges of collecting discipline data were considered. After a discussion about long-term goals for indicator 4, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets.

The primary challenge with measuring and improving in this indicator is based in the frequency of disciplinary events across districts. Annual rates of discrepant districts have increased dramatically in recent years as fewer districts use out-of-school suspensions and expulsions as disciplinary tools. As the total number of districts that meet the minimum cell and n-counts decreases (in SY 19-20, the number dropped to 23), the percent of discrepant districts has increased dramatically despite being fewer in number (9 in SY 19-20 compared to 12 in the prior year). The count of discrepant districts has already been identified for SY 20-21, and the rate of discrepancy is even higher than in FFY 2020. Thus, just reaching baseline in future years could be difficult if this trend continues.

Stakeholders preferred conservative improvement on this indicator compared to baseline, voting either to stay close to baseline or improve on baseline by less than 5%. They also preferred incremental annual improvement as the interim target-setting methodology.

After getting this feedback, the state proposed setting the final target just below baseline, and stakeholders approved this plan in subsequent meetings. Targets will align with current rates of discrepancy this year and next , improving annually by eight percentage points until baseline is surpassed.

**FFY 2020 SPP/APR Data**

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

YES

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

521

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 9 | 23 | 36.36% | 40.00% | 39.13% | 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**

The OSDE-SES, with stakeholder input from its IDEA Part B Advisory Panel, has defined “significant discrepancy” as a risk ratio of suspension or expulsion of 2.5 or greater for students with disabilities in a LEA compared to students with disabilities among all LEAs in the State. Oklahoma used only students with IEPs (ages 3 to 21) to calculate significant discrepancy. The state rate for suspensions or expulsions for students with disabilities is used as the comparison group.

To be included in the analysis, an LEA must have at least 10 students with disabilities who were suspended or expelled more than 10 days and at least 10 students with disabilities enrolled. 521 districts were excluded from the analysis because they did not meet the minimum n-size of students with disabilities who were suspended or expelled more than 10 days.

A finding of significant discrepancy generates an analysis of policies, procedures, and practices by SEA personnel. LEAs are also required to conduct this review (consistent with CFR § 300.170(b)). If appropriate, the LEAs will revise policies, practices, and procedures relating to any of the following topics: development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to comply with the requirements of the IDEA. Corrections will be reviewed for consistency with OSEP Memorandum 09-02 dated October 17, 2008.

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

The data for indicator 4 reflect school year 19-20, and were substantially affected by the pandemic. We found that suspensions and expulsions are more common during the final quarter of the school year, and when schools were no longer in-person during that quarter, LEAs used suspensions significantly less frequently. The number of suspensions dropped substantially. As a result, fewer LEAs met the minimum cell and n-count. Thus, while the number of LEAs that were discrepant also decreased, the overall percentage of discrepant LEAs increased because the denominator was smaller. The same will occur in FFY 2021.

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

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

Annually, LEAs are required to upload their policies, practices and procedures related to special education identification in their LEA Assurances and Agreement. LEAs are notified of any discrepancies when they receive their annual District Data Profile. Those identified as having discipline discrepancies as compared to the state average rate are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of IEPs, the use of PBIS practices, and procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.

In 2019-2020, nine LEAs were found to have significant discrepancy in discipline rates among students with disabilities. The LEAs were notified of their discrepancy in October 2020 on their District Data Profiles. At that time, SEA personnel conducted detailed reviews of the policies, practices and procedures of these LEAs and determined that none demonstrated noncompliance.

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

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

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

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

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

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

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

## 4A - Required Actions

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**Targets**

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

**FFY 2020 SPP/APR Data**

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

YES

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

532

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of LEAs that have a significant discrepancy, by race or ethnicity** | **Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of LEAs that met the State's minimum n/cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 6 | 0 | 12 | 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**

The OSDE-SES, with stakeholder input from its IDEA Part B Advisory Panel, has defined “significant discrepancy” as a risk ratio of suspension or expulsion of 2.5 or greater for students with disabilities in each racial/ethnic category in a LEA compared to students with disabilities among LEAs in the State in the same category. The OSDE has chosen the following comparison method (one of the methods recommended by the OSEP): The rates of expulsions and suspensions (out-of-school) that total more than 10 days in a school year for children with IEPs among LEAs in the State in each racial/ethnic category (34 CFR §300.170(a)). Oklahoma used only students with IEPs to calculate significant discrepancy.

To be included in the analysis, a racial/ethnic group must have at least 10 students with disabilities who were suspended out of school or expelled for more than 10 days by the LEA and at least 10 students with disabilities enrolled in that racial/ethnic category. The state rate for students with disabilities in the same racial/ethnic category was used as the comparison group. 532 districts were excluded from the analysis because of their n-size at the subcategory level. This is an increase in LEAs from the previous year.

Any findings of significant discrepancy will generate an analysis of policies, procedures, and practices by SEA personnel. LEAs are also required to conduct this review (consistent with CFR § 300.170(b)). If appropriate, the LEAs will revise policies, practices, and procedures relating to each of the following topics: development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to comply with the requirements of the IDEA. Corrections will be reviewed for consistency with OSEP Memorandum 09-02 dated October 17, 2008.

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

The data for indicator 4 reflect school year 19-20, and were substantially affected by the pandemic. We found that suspensions and expulsions are more common during the final quarter of the school year, and when schools were no longer in-person during that quarter in 2020, LEAs used suspensions significantly less frequently. The number of suspensions dropped substantially. As a result, fewer LEAs met the minimum cell and n-count. Thus, while the number of LEAs that were discrepant also decreased, the overall percentage of discrepant LEAs increased because the denominator was smaller.

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

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

Annually, districts are required to upload their policies, practices and procedures related to special education identification in their LEA Assurances and Agreement. Districts are notified of any discrepancies when they receive their annual District Data Profile. Those identified as being discrepant in discipline in one or more racial and ethnic groups are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of IEPs, the use of PBIS practices, and procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.

In 2019-2020, six LEAs were found to have significant discrepancy in discipline rates by race and/or ethnicity. The LEAs were notified of their discrepancy in October 2020 on their District Data Profiles. At that time, SEA personnel conducted detailed reviews of the policies, practices and procedures of these LEAs and determined that none demonstrated noncompliance.

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

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

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

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

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

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

## 4B- Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target >= | 65.50% | 65.50% | 66.00% | 66.00% | 66.00% |
| A | 75.73% | Data | 66.76% | 70.87% | 67.98% | 68.96% | 71.18% |
| B | 202 | Target <= | 9.50% | 9.50% | 9.25% | 9.25% | 9.25% |
| B | 6.68% | Data | 9.44% | 8.26% | 9.19% | 8.32% | 7.94% |
| C | 2020 | Target <= | 1.85% | 1.85% | 1.85% | 1.83% | 1.83% |
| C | 0.61% | Data | 1.23% | 0.79% | 0.64% | 0.70% | 0.76% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 71.00% | 71.50% | 72.00% | 72.50% | 73.00% | 75.75% |
| Target B <= | 8.00% | 8.00% | 8.00% | 7.50% | 7.50% | 6.65% |
| Target C <= | 0.75% | 0.75% | 0.73% | 0.73% | 0.71% | 0.60% |

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial meeting where targets were discussed for the “miscellaneous” indicators, which included numbers 4, 5, 8, 15 and 16. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma. After a discussion about long-term goals for indicator 5, stakeholders were asked to vote their preferences among a) possible sets of end-of-cycle targets and b) methods for setting interim targets.

One critical question was posed to stakeholders: what is the expected rate of full inclusion for students with disabilities, and is there an upper limit? Stakeholders were asked to consider that rate as the long-term goal (final target) for 5A for the state. About 65% of those who responded to the poll (4 of 6 voters) about full-inclusion stated that they expect about 70 to 80 percent of students to be fully included in general education (that is, falling into the LRE category of 80% or more general education).

Oklahoma has had high rates of inclusion historically and has trended toward this stakeholder expectation of full inclusion for about 70 to 80 percent of students. As a result, all stakeholders preferred maintaining final targets close to current levels, with only modest improvements over baseline. Based on these recommendations, the state proposed an annual increase of one-half percentage point for 5A, a total decrease of one-half percentage point for 5B over the six years, and a 0.04 percentage point total decrease for 5C over the six years. Stakeholders agreed with this approach to making small improvements against baseline for each measure.

Baselines were reset for all three measures because the data source and collection were re-defined federally to now include five-year-old children in kindergarten. The state set baselines to FFY 2019 in case SY 20-21 was an anomalous year due to the pandemic and the associated effects on enrollment and educational settings, and stakeholders concurred with this decision. For this same reason, targets were set to align with FFY 2019 data instead of beginning with FFY 2020 data.

ADDED DURING CLARIFICATION: OSEP responded to the initial plan to set baseline to FFY 2019 with a requirement to instead make baseline FFY 2020. Oklahoma is changing the baseline to FFY 2020 data and resetting the the FFY 2025 targets to reflect that change and the requirement to be better than baseline in the last year of the cycle. However, these changes have been made without stakeholder involvement. They will be notified at the first opportunity, and the baseline and targets will be revisited with stakeholders when appropriate if FFY 2020 is shown to be an anomalous year as first suspected.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | Total number of children with IEPs aged 5 (kindergarten) through 21 | 110,423 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 83,628 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 7,375 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 45 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 221 |
| SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/07/2021 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 407 |

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

NO

**FFY 2020 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 5 (kindergarten) through 21 served** | **Total number of children with IEPs aged 5 (kindergarten) through 21** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 83,628 | 110,423 | 71.18% | 71.00% | 75.73% | N/A | N/A |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 7,375 | 110,423 | 7.94% | 8.00% | 6.68% | Met target | No Slippage |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 673 | 110,423 | 0.76% | 0.75% | 0.61% | N/A | N/A |

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

The 2020 child count was affected by the pandemic. In Oklahoma, enrollments in grades PK through 2 dropped in fall 2020 by several thousand. This naturally affected the count of students with disabilities.

Note that the number of students 5 in KG through 21 increased from the prior year because of the changes in FS002. In the prior year, five year olds in KG were not included in the total.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

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

The State provided targets for FFYs 2020 through 2025 for this indicator, but OSEP cannot accept those targets because the State was unable to obtain stakeholder input. Specifically, the State reported that, "OSEP responded to the initial plan to set baseline to FFY 2019 with a requirement to instead make baseline FFY 2020...the changes have been made without stakeholder involvement. They will be notified at the first opportunity, and the baseline and targets will be revisited with stakeholders when appropriate if FFY 2020 is shown to be an anomalous year as first suspected."

## 5 - Required Actions

In its FFY 2021 SPP/APR, the State must describe its stakeholder input process in setting the FFY 2020-2025 targets.

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A** | Target >= | 42.00% | 42.50% | 43.00% | 43.75% | 43.75% |
| **A** | Data | 48.54% | 34.07% | 32.54% | 32.76% | 34.76% |
| **B** | Target <= | 17.75% | 17.00% | 16.50% | 16.00% | 16.00% |
| **B** | Data | 13.01% | 15.03% | 16.75% | 16.79% | 16.15% |

**Targets: Description of Stakeholder Input**

Ten outside stakeholders participated in the initial meeting where targets were discussed for early childhood outcomes and associated indicators. Stakeholders were presented information about the indicator definitions, data collection methods and changes, and historical trends in Oklahoma. After a discussion about long-term goals for indicator 6, stakeholders were asked to vote their preferences among a) possible sets of end-of-cycle targets and b) methods for setting interim targets.

Historically, Oklahoma has set high targets for 6A and 6B, but those have not been met in recent years. Stakeholders voiced a strong preference for resetting baselines to reflect current trends and to set moderate improvement over time. Half of stakeholders preferred to maintain targets for 6A and 6B near current levels, while the other half preferred to increase 6A and decrease 6B more substantially. Stakeholders preferred to set the interim and final targets for 6C close to baseline for two reasons: a) it is a new measure, and b) in-home services are in a natural environment and should be encouraged for 3 and 4 year old children who are not receiving other institutional education.

In response to these recommendations, the state proposed the following target lines, which were approved by stakeholders in subsequent meetings:
6A: annual improvement of one percentage point with a final target six points better than baseline
6B: annual improvement of 0.5 percentage points with a final target three points better than baseline
6C: annual improvement of 0.01 percentage points with a final target 0.5 points better than baseline

Baselines were reset for all three measures because the data source and collection were re-defined federally to no longer include five-year-old children in kindergarten.

**Targets**

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

Inclusive Targets

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

Target Range not used

Baselines for Inclusive Targets option (A, B, C)

| **Part** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- |
| **A** | 2020 | 35.65% |
| **B** | 2020 | 19.22% |
| **C** | 2020 | 1.02% |

**Inclusive Targets – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 35.50% | 35.00% | 36.00% | 37.00% | 38.00% | 39.00% |
| Target B <= | 19.50% | 19.50% | 19.00% | 18.50% | 18.00% | 17.50% |

**Inclusive Targets – 6C**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C <= | 1.02% | 1.01% | 1.00% | 0.99% | 0.98% | 0.97% |

**Prepopulated Data**

**Data Source:**

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

**Date:**

07/07/2021

| **Description** | **3** | **4** | **5** | **3 through 5 - Total** |
| --- | --- | --- | --- | --- |
| Total number of children with IEPs | 1,297 | 2,775 | 724 | 4,796 |
| 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 | 432 | 1,019 | 259 | 1,710 |
| b1. Number of children attending separate special education class | 343 | 461 | 104 | 908 |
| b2. Number of children attending separate school | 4 | 6 | 1 | 11 |
| b3. Number of children attending residential facility | 0 | 3 | 0 | 3 |
| c1**.** Numberof children receiving special education and related services in the home | 20 | 22 | 7 | 49 |

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

NO

**FFY 2020 SPP/APR Data - Aged 3 through 5**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 1,710 | 4,796 | 34.76% | 35.50% | 35.65% | N/A | N/A |
| B. Separate special education class, separate school or residential facility | 922 | 4,796 | 16.15% | 19.50% | 19.22% | N/A | N/A |
| C. Home | 49 | 4,796 |  | 1.02% | 1.02% | N/A | N/A |

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

The 2020 child count was affected by the pandemic. In Oklahoma, enrollments in grades PK through 2 dropped in fall 2020 by several thousand. This naturally affected the count of students with disabilities.

Note that the number of students in PK decreased from the prior year in part because of the changes in FS089. In the prior year, five year olds in KG were included in the total.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

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

The State established baseline for Indicator 6C, using data from FFY 2020, and OSEP accepts the baseline.

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

## 6 - Required Actions

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

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

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

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

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

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

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

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

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

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

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

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

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

**Instructions**

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

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

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

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

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

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

## 7 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A1 | 2008 | Target >= | 89.75% | 90.00% | 90.50% | 93.40% | 93.40% |
| A1 | 93.30% | Data | 93.10% | 92.95% | 93.43% | 93.53% | 94.50% |
| A2 | 2008 | Target >= | 58.25% | 58.50% | 58.75% | 59.00% | 59.00% |
| A2 | 54.50% | Data | 61.36% | 59.91% | 63.73% | 60.66% | 61.81% |
| B1 | 2008 | Target >= | 89.25% | 89.50% | 89.75% | 92.90% | 92.90% |
| B1 | 92.80% | Data | 92.25% | 92.57% | 91.65% | 92.66% | 93.96% |
| B2 | 2008 | Target >= | 57.30% | 57.30% | 57.30% | 58.30% | 58.30% |
| B2 | 55.00% | Data | 58.32% | 58.22% | 60.11% | 58.97% | 60.04% |
| C1 | 2008 | Target >= | 91.25% | 91.50% | 91.75% | 93.00% | 93.00% |
| C1 | 92.90% | Data | 93.27% | 92.78% | 93.86% | 93.78% | 94.81% |
| C2 | 2008 | Target >= | 72.00% | 72.00% | 72.00% | 73.00% | 73.00% |
| C2 | 67.70% | Data | 72.66% | 73.49% | 76.27% | 73.62% | 73.77% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 93.50% | 93.50% | 94.00% | 94.00% | 94.50% | 94.50% |
| Target A2 >= | 60.00% | 60.50% | 61.00% | 61.50% | 62.00% | 62.50% |
| Target B1 >= | 93.50% | 93.50% | 94.00% | 94.00% | 94.50% | 94.50% |
| Target B2 >= | 59.00% | 59.50% | 60.00% | 60.50% | 61.00% | 61.50% |
| Target C1 >= | 93.50% | 93.50% | 94.00% | 94.00% | 94.50% | 94.50% |
| Target C2 >= | 70.50% | 71.00% | 71.50% | 72.00% | 72.50% | 73.00% |

**Targets: Description of Stakeholder Input**

Ten outside stakeholders participated in the initial meeting where targets were discussed for early childhood outcomes and associated indicators. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma. After a discussion about long-term goals for indicator 7, stakeholders were asked to vote their preferences among a) possible sets of end-of-cycle targets and b) methods for setting interim targets. Outcomes were discussed in two sets: growth (A1, B1 and C1) and peer-level (A2, B2 and C2). Baselines are not being changed.

Oklahoma has demonstrated very high achievement in early child growth over time in all three outcomes, with nearly 93% or more of children showing meaningful growth in their PK programs since 2014. Stakeholders chose one of two options for final year targets in each outcome, with near even vote counts: increase incrementally toward 95% growth or stay close to baseline. The state proposed to balance these preferences, with annual increases toward 95%, but not reaching it. Stakeholders agreed to this approach, and all three growth measures will have the same target lines this SPP/APR cycle.

Peer-level outcome results vary depending on the outcome, with A and B about ten percentage points lower than C over time. Year to year variation has been small, though C has drifted down in recent years. Stakeholders were presented with various options for final targets, and just over half preferred to substantially increase the percentage of students exiting at peer-level. The other half preferred to maintain targets close to baseline. Because the statewide results have not trended higher in the past few years, the state proposed setting small annual increases to temper future targets. In a subsequent meeting, stakeholders agreed with this approach. Each outcome has its own target line reflecting historical data patterns, but targets will all increase by 0.5 percentage points annually (final target is 2.5 points higher than FFY 2020).

**FFY 2020 SPP/APR Data**

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

7,071

**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 | 30 | 0.42% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 293 | 4.14% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,437 | 34.47% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 3,451 | 48.81% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 859 | 12.15% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 5,888 | 6,211 | 94.50% | 93.50% | 94.80% | Met target | No Slippage |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 4,310 | 7,070 | 61.81% | 60.00% | 60.96% | Met target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 36 | 0.51% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 321 | 4.54% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 2,500 | 35.36% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 3,405 | 48.15% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 809 | 11.44% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 5,905 | 6,262 | 93.96% | 93.50% | 94.30% | 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)* | 4,214 | 7,071 | 60.04% | 59.00% | 59.60% | 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 | 34 | 0.48% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 255 | 3.61% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,776 | 25.12% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 3,569 | 50.47% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,437 | 20.32% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.*Calculation:(c+d)/(a+b+c+d)*  | 5,345 | 5,634 | 94.81% | 93.50% | 94.87% | Met target | No Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 5,006 | 7,071 | 73.77% | 70.50% | 70.80% | Met target | No Slippage |

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

YES

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

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

YES

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

Program data for this indicator are collected through Oklahoma's online IEP record system, called EdPlan. LEAs use the system to create electronic records for all students with IEPs, including those in early childhood programs. The Child Outcome Summary Form is completed electronically for each child between the ages of three and five years of age if he or she has had at least six months of service. It is SEA practice that personnel first enter the COSF ratings and evaluation information when the student enters their district and again when the child completes his or her preschool program (end of year prior to kindergarten, completion of IEP, or age six, whichever comes first). If a student moves districts between the ages of 3 and 5 (after receiving entry ratings), the district in which the child is enrolled will report the exit ratings. The online IEP system reminds personnel (via warning notices) to enter the data if they neglect to do so in a timely manner.

The data for this indicator are then pulled through reporting functions in the online system and cleaned to ensure that all relevant records are included.

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

Child outcomes do not appear to have been negatively affected by the covid-19 pandemic.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

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

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

## 8 - Indicator Data

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

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial meeting where targets were discussed for the “miscellaneous” indicators, which included numbers 4, 5, 8, 15 and 16. Stakeholders were presented information about the indicator definitions, data collection methods and changes, and historical trends in Oklahoma. After a discussion about long-term goals for indicator 8, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets.

Oklahoma proposed changes to the calculation for indicator 8 and asked stakeholders for their feedback on the proposal. The calculation used to determine a ‘favorable’ parent response to the question of how well schools facilitated parent involvement is made by adding up the total points across all survey questions and dividing by the 18 possible total points. Historically, if the individual score was at least 50% of the total (a score of 10 or better), it was coded as a favorable response. The state proposed increasing the cutoff to at least 70%. By doing this, parents whose survey scores were below the new cutoff but above 50% would no longer be counted toward the number of parents who report that the school facilitated parent involvement.

Stakeholders were asked directly to state their preferred cutoff scores. Four of the six opted for a cutoff between 70 and 75%, while the others chose a higher or lower value. The state has moved forward with changing the cutoff score for identifying a favorable response to 13 of 18 points, or 72% of the possible total score. Prior to this change, the state reported that more than 98% parent approval annually, which we believe is unrealistic and inaccurate. Although revising the calculation results in a decrease in the percentage of parents with favorable responses, the state believes the data now more accurately reflect parents’ perspectives with regard to their local programs.

The change in calculation has led the state to change the baseline year to FFY 2020. When asked, stakeholders preferred to maintain future targets close to this baseline or to pursue modest increases. With this feedback, the state has proposed to increase the target for indicator 8 to 94% and maintain that level coming years. Stakeholders have agreed that this is the right course for Oklahoma.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 93.71% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 89.50% | 90.50% | 91.75% | 93.00% | 93.00% |
| Data | 90.14% | 97.24% | 98.38% | 98.66% | 98.02% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 93.70% | 94.00% | 94.00% | 94.00% | 94.00% | 94.00% |

**FFY 2020 SPP/APR Data**

| **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 8,610 | 9,188 | 98.02% | 93.70% | 93.71% | N/A | N/A |

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

The Parent Survey used to calculate this indicator does not differentiate between preschool children and school age children. All families answer the same survey. Because preschool children are served in public schools, we believe that it is appropriate for parents of preschool children to answer the same survey as school-age children.

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

115,228

**Percentage of respondent parents**

7.97%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 10.49% | 7.97% |

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

All parents are supposed to have an opportunity to voluntarily respond to the survey; a weighted sample is not used. As a result, a perfect representation of child count is unlikely to occur. The pandemic had a strong negative effect on the response rate in SY20-21. Districts reported that it is difficult to ensure parents respond to the parent survey when meetings are remote. Parents are less likely to take the initiative to respond outside the meeting, despite it being available online and over the phone, in English and Spanish.

The State continues to work with local districts to increase response rates, particularly those that are larger and have had low rates in the past. We have encouraged them to plan more deliberately when surveys are provided to families and to ensure that all families have the opportunity to respond. Because larger districts are more likely to have lower response rates while also serving a more diverse student population, by increasing response rates in these districts, representation should improve. In particular, we expect that working with larger districts to increase local response rates will result in a response pool that more adequately represents families of students in high school and/or who identify as Black and African-American or Hispanic/Latino.

**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.**

Non-response bias may occur when a sub-section of parents are unwilling or unable to respond to a survey. The error comes from the absence of participants and not from collecting erroneous data. Each parent is supposed to be offered an opportunity to complete the parent survey annually, typically at the IEP meeting. To reflect this expectation, our total count of surveys distributed is the annual child count. However, because of the method chosen by Oklahoma to distribute the survey to parents (via the local school district), the state does not know which parents were actually offered the opportunity to respond. Therefore, the state has determined that an evaluation of non-response bias is not feasible. The actual count of "parents who received the survey and declined to participate" is not known.

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

Table 1: Age Demographics SY 20-21
Percentage of CC & Percentage of Respondents
3-5 years: 7.8%, 12.7%
6-10 years: 35.2%, 39.1%
11-13 years: 23.9%, 21.1%
14-18 years: 32.3%, 23.2%
19+ years old: 0.8%, 0.6%
Prefer not to answer: 0.0%, 3.3%

The age distribution does not align with child count (Table 1), but does match typical historical voluntary response patterns for the State's survey: parents of young children are much more likely to respond than parents of older children, especially those with high school students. Using a z-score test for differences in proportions, the proportion of respondents' children’s ages differs significantly from the proportion of those ages in the annual child count (October 1, 2020) for every age group. As a result, the perspectives of parents with younger children outweigh those of parents with older children in the survey results, who tended to have slightly less favorable opinions of their school's support than did the former (see the published report on the OSDE-SES Data webpage at https://sde.ok.gov/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21).

Regarding race and ethnicity: Hispanics are under-represented in the survey response pool compared to child count, as are African-Americans, both by about 5 percent. White respondents are over-represented by about the same percentage. The differences in proportions between respondents and child count are significantly different for those three groups. Native Americans, Asians, Pacific Islanders and students of "two or more races" are present in the survey results in about the same proportions as child count, but the differences in proportions are not significant for these groups. A substantial 3.3% of respondents chose not to reveal racial or ethnic identities. Asian and African-American respondents had slightly lower average favorability ratings than did parents of other race and ethnic identities (2% difference).

Table 2: Race Demographics SY 20-21
Percentage of CC & Percentage of Respondents
Native American/Indian: 15.1%, 16.7%
Asian: 0.9%, 0.4%
Black: 9.2%, 3.7%
Hispanic/Latino: 15.5%, 10.4%
Pacific Islander/Native Hawaiian: 0.2%, 0.2%
Two or More Races: 11.1%, 11.4%
White: 48.0%, 53.9%
Prefer not to answer: 0.0%, 3.3%

The regional response patterns are very similar to last year. The central region (which includes several of the largest districts in the state) is substantially under-represented in the survey response pool, while the Northwest and Southeast regions (areas of very small districts that emphasize survey participation) are substantially over-represented.

Table 3: Region SY 20-21
Percentage of CC & Percentage of Respondents
Panhandle: 0.6%, 1.7%
Northwest: 4.0%, 8.9%
Northeast: 31.8%, 31.0%
Central: 40.0%, 21.9%
South Central: 5.7%, 8.9%
Southeast: 8.4%, 14.2%
Southwest: 9.6%, 13.4%

There are several meaningful differences in survey response frequencies across certain races (Table 2) and regions (Table 3). We believe the variation in these two demographic areas is based in the differential response rates of small and large districts. Small districts—those with a special education child count of 80 or fewer (80 was the median 2020 child count in Oklahoma)—have an average response rate of 16.8% while large districts (child counts of 1000 or higher) have an average response rate of 1.9%. Nearly all of these are located in the Central region. Small districts are more common in the outlying regions of the state and are more likely to have higher enrollments of white and Native American students, raising the overall participation rate for those groups and those regions. As mentioned earlier, increasing response rates in larger districts to be even with smaller districts should balance representation across the state and among the various race and ethnic groups.

**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.**

The state does not collect parent demographics, and therefore cannot say definitively if the demographics of responding parents are representative of the demographics of children receiving services. All parents are supposed to have an opportunity to voluntarily response to the survey; a weighted sample is not used. As a result, a perfect representation of child count is unlikely to occur. Largely because of the pandemic, the response rate dropped by 2.5 percentage points last year, reflecting the challenges faced by LEAs to ensure parents respond. This represents 3000 fewer respondents in 2020-2021. Districts reported that it was difficult last year to encourage parents to respond to the survey remotely, despite it being available online and over the phone, in English and Spanish. We expect these challenges to decrease this school year since most districts are in-person full time.

The State continues to work with local districts to increase response rates, particularly those that are larger and have had low rates in the past. We have encouraged them to plan more deliberately when surveys are provided to families and to ensure that all families have the opportunity to respond. Because larger districts are more likely to have lower response rates while also serving a more diverse student population, by increasing response rates in these districts, representation should improve. In particular, we expect that working with larger districts to increase local response rates will result in a response pool that more adequately represents families of students in high school and/or who identify as Black and African-American or Hispanic/Latino.

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

The State uses a statistical formula (Z-test for two population proportions) to determine if two proportions (i.e., % of surveys received versus % of families in the target population) should be considered statistically different. A p-value less than 0.05 indicates a statistically significant difference between the proportions (non-representativeness).

| **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)**

The pandemic appears to have reduced responsiveness of parents to the request to complete the survey.

## 8 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

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

See the prior section for a description of representativeness of the children receiving special education services. The survey does not collect data about parent demographics, so a comparison of parents responding to children served is not possible at this time. The survey only collects demographic information about the children receiving special education services.

## 8 - OSEP Response

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

The State did not provide targets for FFYs 2020 through 2025 for this indicator.

The State did not analyze the response rate to identify potential non-response bias, as required by the Measurement Table.

## 8 - Required Actions

In its FFY 2021 the State must 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 as required by the Measurement Table.

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.

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.20% | 0.00% | 0.00% | 0.00% |

**Targets**

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

**FFY 2020 SPP/APR Data**

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

YES

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

22

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 11 | 0 | 521 | 0.00% | 0% | 0.00% | N/A | N/A |

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

YES

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

The OSDE-SES has defined “disproportionate representation” as a risk ratio of 2.6 or greater (overrepresentation) in any given year (every one year). When disproportionate representation is determined for a district, the OSDE-SES will determine if the disproportionality is the result of inappropriate identification by reviewing policies, practices and procedures as submitted by the LEA. Data for each district and charter school were analyzed for all racial and ethnic groups.

Calculating Disproportionate Representation
OSDE-SES calculated a risk ratio for each of the seven racial/ethnic category in each LEA: overall risk of identification is determined by comparing the risk of any racial/ethnic group to the risk of all other racial/ethnic groups.

To be included in the analysis, a group must have at least 10 students with disabilities of a particular racial/ethnic category and at least 10 students in the same racial/ethnic category in overall enrollment. That group risk is then compared to either the LEA or the state risk for all other students. For the LEA comparison group to be used, the LEA must have at least 10 students with disabilities in 'all other' racial/ethnic categories and at least 10 students in 'all other' racial/ethnic categories in overall enrollment; otherwise the statewide comparison group risk was used. OSDE-SES identified districts with a risk ratio of 2.6 or greater as disproportionate in the relevant racial/ethnic category or categories. The data source for Oklahoma’s analysis was Table 1 (Child Count) of Information Collection 1820-0043 (Report of Children with Disabilities Receiving Special Education under Part B of the IDEA) for all children with disabilities aged 5 in KG through 21 served under the IDEA.

**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.**

Annually, districts are required to upload their policies, practices and procedures related to special education identification in the LEA Assurances and Agreement. Districts are notified of any disproportionality when they receive their annual District Data Profile. Those identified as being disproportionate in one or more racial and ethnic groups are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of a comprehensive referral and evaluation process, including procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel who flag problematic policies, practices and procedures for discussion and additional review. If any indicate inappropriate identification is a concern, OSDE-SES will work with the LEA for revision and improvement. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.

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

The data for indicator 9 reflect the child count collected on October 1, 2020.

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

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

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

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

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

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**Targets**

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

**FFY 2020 SPP/APR Data**

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

YES

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

118

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of districts that met the State's minimum n and/or cell size** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 57 | 0 | 425 | 0.00% | 0% | 0.00% | N/A | N/A |

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

YES

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

The OSDE-SES has defined “disproportionate representation” as a risk ratio of 2.6 or greater (overrepresentation) in any given year (every one year). When disproportionate representation is determined for a district, the OSDE-SES will determine if the disproportionality is the result of inappropriate identification by reviewing policies, practices and procedures as submitted by the LEA. Data for each district and charter school were analyzed for all racial and ethnic groups and the six most common disability categories.

Calculating Disproportionate Representation
OSDE-SES calculated a risk ratio for each of the seven racial/ethnic categories in each LEA: overall risk of identification is determined by comparing the risk of any racial/ethnic group to the risk of all other racial/ethnic groups in each of six disability categories.

To be included in the analysis, a group must have at least 10 students in a specific primary disability category (or suspected, if developmental delay) of a particular racial/ethnic category and at least 10 students in the same racial/ethnic category in overall enrollment. That group risk is then compared to either the LEA or the state risk for all other students. For the LEA comparison group to be used, the LEA must have at least 10 students in the particular disability category in 'all other' racial/ethnic categories and at least 10 students in 'all other' racial/ethnic categories in overall enrollment; otherwise the statewide comparison group risk was used. OSDE-SES identified districts with a risk ratio of 2.6 or greater as disproportionate in a particular disability category for a specific racial/ethnic category. The data source for Oklahoma’s analysis was Table 1 (Child Count) of Information Collection 1820-0043 (Report of Children with Disabilities Receiving Special Education under Part B of the IDEA) for all children with disabilities aged 5 in KG through 21 served under the IDEA.

**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.**

Annually, districts are required to upload their policies, practices and procedures related to special education identification in the LEA Assurances and Agreement. Districts are notified of any disproportionality when they receive their annual District Data Profile. Those identified as being disproportionate in one or more racial and ethnic groups are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of a comprehensive referral and evaluation process, including procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel who flag problematic policies, practices and procedures for discussion and additional review. If any indicate inappropriate identification is a concern, OSDE-SES will work with the LEA for revision and improvement. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.

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

The data for indicator 9 reflect the child count collected on October 1, 2020.

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

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

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

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

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

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

## 10 - Required Actions

# Indicator 11: Child Find

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 90.89% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 96.69% | 98.09% | 97.65% | 98.77% | 95.66% |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **(a) Number of children for whom parental consent to evaluate was received** | **(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 16,564 | 15,987 | 95.66% | 100% | 96.52% | Did not meet target | No Slippage |

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

577

**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.**

Maximum range of days past 45 days to complete an evaluation: 170

Reasons for delay reported to the state (a single delay may have multiple reasons):
LEA failure to follow appropriate procedures: 162
MEEGS team needed additional data: 20
Lack of appropriate resources: 4
Breaks in school calendar and/or staff not on contract: 60
Parents did not show for scheduled meeting or delayed meeting: 49
Extreme weather or other atypical events such as pandemics: 349

**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).**

45 school days. Exceptions are not allowed.

**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.**

Each LEA is required to report aggregated counts of "Total Referrals," "Evaluations completed within 45 school days from parent consent," "Evaluations not completed within 45 school days from parent consent" broken down by reason, "The maximum amount of days after 45 school days to complete the tardy evaluation", and "Reasons why evaluations were not completed with the 45 day timeline" through the online IEP system. The LEA must validate the End-of-Year report and certify the data being submitted is accurate and true. The SEA then monitors LEAs through District Data Profiles and on-site comprehensive monitoring. Technical assistance is provided by the compliance and program specialists. After LEAS report their counts, the state reviews all records to determine whether all delayed evaluations were reported. Unreported delays are reviewed with the district and final numbers are adjusted to reflect additional findings.

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

As reported in the reasons for delay, the pandemic did affect timely completion of evaluations. Most often this was because staff or children were quarantined, buildings were closed, or tests were delayed because of the availability of qualified personnel.

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 213 | 115 | 90 | 8 |

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

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

In July 2021 the OSDE-SES conducted Verification of Continuous Compliance (Prong II) procedures for FFY 2019 findings to ensure systemic compliance across each LEA for Indicator 11 data. Continuous compliance reviews are completed by using a random sampling process, in which student records are randomly selected for a compliance check. If all selected records are compliant, the LEA is resolved and removed from the compliance watch-list for the fiscal year. If the LEA does not yet demonstrate 100 percent compliance, additional sanctions are applied and records continue to be monitored.

To check for compliance, an indicator-specific report was pulled from the online IEP system (in the same manner other data reviews are made) for each of the 213 LEAs identified with findings of non-compliance in FFY 2019. Each report included a representative, randomly-selected sample of student records (depending on the size of the district). These indicator-specific reports were reviewed by OSDE-SES specialists for systemic compliance in July 2020. 115 LEAs were verified as continuously compliant (100 percent compliant), and were removed from the compliance watch-list. Ninety-eight LEAs had not yet achieved 100 percent compliance.

The 98 LEAs that had additional findings of noncompliance were required to examine their student records to determine the reason(s) for continued noncompliance. They identified SMART goals to improve problem areas and clarified internal monitoring processes and procedures. During a subsequent State review of records (in winter 2021) for students in these LEAs whose parent consent was signed between Sept 1 and November 30, 2021, 90 LEAs demonstrated full compliance with Indicator 11. The other eight LEAs did not. These eight continue to be under review, and are receiving intensive technical assistance that includes corrective action planning and root cause analysis. A third compliance review will be conducted in July 2022.

Note: The random samples of student records selected for the prong II reviews are pulled from the LEA’s population of student records relevant to the indicator. Only records of students with initial evaluations in one quarter of the most recent fiscal year were sampled for indicator 11. OSDE-SES checked all records in LEAs with a total of 11 or fewer records that met this criterion. Otherwise, sample sizes ranged from 11 to 34, depending on the size of the LEA. The sample sizes are statistically representative, within the following assumptions:
• Margin of error of 10 percent: this is the chance of missing (not finding) noncompliance in the sample when it exists.
• Confidence level of 95 percent: this is the level of confidence that results found are true and representative.
• Expected response distribution of minimum 90 percent compliance.

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

The OSDE-SES annually conducts monitoring activities for 100% of the State’s LEAs to determine if all LEAs are in compliance for Indicator 11. Non-compliance is identified through data submitted by LEAs through the annual June end-of-year data collection as well as specific monitoring activities such as desk audits and onsite visits.

After analyzing data collected for Indicator 11 in June 2020, non-compliance was identified in 213 LEAs. The 213 LEAs identified as non-compliant were issued a letter of findings and required to make child-specific corrections within 30 days of receipt of the letter. All LEAs were notified by November 15, 2020. Subsequently, LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed Parent Consent forms and Multidisciplinary Evaluation and Eligibility Group Summary (MEEGS) forms submitted by all LEAs through the statewide online IEP system (OK EdPlan) in order to determine that evaluations were conducted in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.

All individual cases of noncompliance across all 213 LEAs were corrected and the records are now compliant.

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

**Actions taken if noncompliance not corrected**

If noncompliance is not corrected--meaning LEAs continue to not demonstrate systemic compliance--LEAs are monitored through the differentiated monitoring process for a second consecutive year and are marked as having "longstanding noncompliance" in indicator 11 on their annual determinations. LEAs identified with continuing noncompliance must revisit their improvement plans from the prior year and review and revise to ensure compliance can be achieved. A subsequent analysis of IEPs is conducted at the end of the school year as described in the prior section ("Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements").

If an LEA has been noncompliant (below 95%) for three consecutive years for indicator 11, the LEA is required to complete the following additional activities:
o Review the past two years root cause analyses to assist in developing an improvement plan.
o Use professional development special education grant funds to address the improvement plan implementation. The amount or percentage of funds directed will be determined in consultation with the state.
o Invite parents of affected students to the school board meeting to participate in the discussions for the plan for improvement.

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

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2018 | 7 | 7 | 0 |
| FFY 2017 | 1 | 1 | 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***

In the FFY 2019 SPP/APR submission, seven LEAs continued to be under review for noncompliance from FFY 2018. The LEAs received continuing intensive technical assistance that included required corrective action planning and root cause analysis, and the LEAs had to develop targeted plans focused on improving compliance on Indicator 11. The LEAs were considered non-compliant in FFY 2019 because continuous compliance was not demonstrated during the prong 2 reviews, but were not counted as new findings. These LEAs had to resolve child-specific findings of noncompliance for FFY 2019, also.

In subsequent data reviews (random record checks in late winter 2021), the seven LEAs demonstrated 100 percent compliance. Data reviews were conducted as described in the prior section ("Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements").

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

LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed Parent Consent forms and Multidisciplinary Evaluation and Eligibility Group Summary (MEEGS) forms submitted by all LEAs through the statewide online IEP system (OK EdPlan) in order to determine that evaluations were conducted in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.

Any additional FFY 2019 individual cases of noncompliance across the seven LEAs were corrected and the records are now compliant.

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

In the FFY 2019 SPP/APR submission, one LEA was reported as continuing to be under review for noncompliance from FFY 2017. The LEA received continuing intensive technical assistance that included required corrective action planning and root cause analysis, and the LEA had to develop targeted plans focused on improving compliance on Indicator 11. The LEA was considered non-compliant in FFY 2019 because continuous compliance was not demonstrated during the prong 2 review, but was not counted as a new finding. The LEA had to resolve child-specific findings of noncompliance for FFY 2019, also.

In a subsequent data review a (random record check in winter 2021), the LEA demonstrated 100 percent compliance. The data review was conducted as described in the prior section ("Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements").

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

LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed Parent Consent forms and Multidisciplinary Evaluation and Eligibility Group Summary (MEEGS) forms submitted by all LEAs through the statewide online IEP system (OK EdPlan) in order to determine that evaluations were conducted in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.

All FFY 2019 individual cases of noncompliance in the LEA were corrected and the records are now compliant.

## 11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining seven uncorrected findings of noncompliance identified in FFY 2018 and one uncorrected finding of noncompliance identified in 2017 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018 and 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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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

Reporting completed as required in prior sections.

## 11 - OSEP Response

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 8 uncorrected findings of noncompliance identified in FFY 2019 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 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

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

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

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 86.72% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.06% | 98.52% | 95.94% | 95.38% | 90.75% |

**Targets**

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

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.  | 1,376 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.  | 211 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.  | 735 |
| 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.  | 326 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays.  | 58 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. | 735 | 781 | 90.75% | 100% | 94.11% | Did not meet target | No Slippage |

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

46

**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.**

Maximum range of days past third birthday when eligibility was determined and the IEP developed: 117

Reasons for delay reported to the state (a single delay may have multiple reasons):
LEA failure to follow appropriate procedures: 10
MEEGS team needed additional data: 3
Breaks in school calendar and/or staff not on contract: 3
Delayed referral from Part C: 5
Parents did not show for scheduled meeting or delayed meeting: 11
Extreme weather or other atypical events such as pandemics: 29

**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.**

All LEAs are required to enter specific data (including "Total referred from Part C", "Total determined 'Not Eligible'; Determination complete before 3rd birthday", "Total determined 'Eligible'; IEP completed before 3rd Birthday", "Total parents that declined services", "Total referred less than 90 days prior to 3rd birthday", "IEP not completed prior to 3rd birthday", "Maximum number of days beyond 3rd birthday IEP completed", as well as the reasons for delay) into the End-of-Year District Data Summary Report through the online IEP system.

The district superintendent must login to the End-of-Year Report and certify the data being submitted is accurate and true. LEAs are monitored through District Data Profiles and comprehensive monitoring. Technical assistance is then provided by compliance and program specialists.

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

As reported in the reasons for delay, the pandemic did affect timely completion of eligibility determinations and IEPs for children transitioning from the state early intervention program (SoonerStart). Many families were less willing to bring their children to school sites for evaluation than in years past, affecting timely completion by the district. Oklahoma does not excuse testing delays when the parents have already given consent.

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 37 | 29 | 8 | 0 |

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

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

In July 2021 the OSDE-SES began conducting Verification of Continuous Compliance (Prong II) procedures for FFY 2019 findings to ensure systemic compliance across each LEA for Indicator 12 data. Continuous compliance reviews are completed by using a random sampling process, by which student records are randomly selected for a compliance check. If all selected records are compliant, the LEA is resolved and removed from the compliance watch-list for the fiscal year. If the LEA does not yet demonstrate 100 percent compliance, additional sanctions are applied and records continue to be monitored.

To check for subsequent noncompliance, an indicator-specific report was pulled from the online IEP system (in the same manner other data reviews are made) for each of the 37 LEAs identified with findings of noncompliance in FFY 2019. Each report included a representative, randomly-selected sample of student records (depending on district size). These indicator-specific reports were reviewed by OSDE-SES specialists for systemic noncompliance in July 2021. Twenty-nine LEAs were verified as continuously compliant (100 percent compliant), and were removed from the compliance watch-list. Eight LEAs had not yet achieved 100 percent compliance.

The eight LEAs that had additional findings of noncompliance was required to examine their student records to determine the reason(s) for continued noncompliance. They identified SMART goals to improve problem areas and clarified internal monitoring processes and procedures. During a subsequent State review of records for students in this LEA who transitioned from the Part C program to the Part B program since September 1, 2021, the State found all eight LEAs to be in 100 percent compliance with Indicator 12.

Note: The random samples of student records selected for the prong II reviews are pulled from the LEA’s population of student records relevant to the indicator. Only records of students who turned 3 and were in transition from Part C to Part B in one quarter of the recent fiscal year were sampled for indicator 12. OSDE-SES checked all records in LEAs with a total of 11 or fewer records that met this criterion. Otherwise, sample sizes ranged from 11 to 34, depending on the size of the LEA. The sample sizes are statistically representative, within the following assumptions:
• Margin of error of 10 percent: this is the chance of missing (not finding) noncompliance in the sample when it exists.
• Confidence level of 95 percent: this is the level of confidence that results found are true and representative.
• Expected response distribution of minimum 90 percent compliance.

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

The OSDE-SES annually conducts monitoring activities for 100% of the State’s LEAs to determine if all LEAs are in compliance for Indicator 12. Noncompliance is identified through data submitted by LEAs through the annual June end-of-year data collection as well as specific monitoring activities such as desk audits and onsite visits.

After analyzing data collected for Indicator 12 in June 2020, non-compliance was identified in 39 LEAs. The 39 LEAs identified as non-compliant were issued a letter of findings and required to make child-specific corrections within 30 days of receipt of the letter. All 39 LEAs were notified by November 15, 2020. Subsequently, LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed eligibility and IEP documentation through the statewide online IEP system (OK EdPlan) in order to determine that both were completed in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.

All individual cases of noncompliance across all 39 LEAs were corrected and the records are now compliant.

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

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2018 | 2 | 2 | 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***

In the FFY 2019 SPP/APR submission, two LEAs continued to be under review for noncompliance from FFY 2018. The LEAs received continuing intensive technical assistance that included required corrective action planning and root cause analysis, and the LEAs had to develop targeted plans focused on improving compliance on Indicator 12. The LEAs were considered non-compliant in FFY 2019 because continuous compliance was not demonstrated during the prong 2 reviews, but were not counted as new findings. These LEAs had to resolve child-specific findings of noncompliance for FFY 2019, also.

In subsequent data reviews using the same sampling procedures described earlier, both LEAs demonstrated 100 percent compliance.

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

LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed eligibility and IEP documentation through the statewide online IEP system (OK EdPlan) in order to determine that both were completed in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.

Both LEAs identified as non-compliant have since demonstrated that they have corrected all individual cases of noncompliance.

## 12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining two uncorrected findings of noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

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

Reporting completed as required in prior sections.

## 12 - OSEP Response

## 12 - Required Actions

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

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

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 95.21% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target  | 100% | 100% | 100% | 100% | 100% |
| Data | 99.72% | 99.57% | 99.86% | 99.96% | 99.32% |

**Targets**

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

**FFY 2020 SPP/APR Data**

| **Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition** | **Number of youth with IEPs aged 16 and above** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 26,443 | 26,518 | 99.32% | 100% | 99.72% | Did not meet target | No Slippage |

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

State database that includes data for the entire reporting year

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

Data on secondary transition is collected through the State's online IEP system through the end of year data collection, collected on July 1 for the prior FY. Secondary transition plans are required to be completed as part of the IEP process in the online system for all students above the age of 16 or prior to entering 9th grade (possibly as young as 14), whichever comes first. Since an LEA cannot complete an IEP within the system without a comprehensive secondary transition plan, the SEA monitors all LEAs that had IDEA-eligible students that did not have one or more compliant IEPs as of June 30 (or prior, in some cases). These LEAs are in non-compliance with Indicator 13.

| **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)**

Compliance in FFY 2020 was not substantially affected by the pandemic.

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 38 | 29 | 3 | 6 |

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

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

In July 2021 the OSDE-SES began conducting Verification of Continuous Compliance (Prong II) procedures for FFY 2019 findings to ensure systemic compliance across each LEA for Indicator 13 data. Continuous compliance reviews are completed by using a random sampling process, by which student records are randomly selected for a compliance check. If all selected records are compliant, the LEA is resolved and removed from the compliance watch-list for the fiscal year. If the LEA does not yet demonstrate 100 percent compliance, additional sanctions are applied and records continue to be monitored.

To check for subsequent noncompliance, an indicator-specific report was pulled from the online IEP system (in the same manner other data reviews are made) for each of the 38 LEAs identified with findings of non-compliance in FFY 2019. Each report included a representative, randomly-selected sample of student records, depending on the size of the district. These indicator-specific reports were reviewed by OSDE-SES specialists for systemic non-compliance in July 2021. Twenty-nine LEAs were verified as continuously compliant (100 percent compliant), and were removed from the compliance watch-list. Nine LEAs had not yet achieved 100 percent compliance.

The LEAs that had additional findings of noncompliance was required to examine their student records to determine the reason(s) for continued noncompliance. They identified SMART goals to improve problem areas and clarified internal monitoring processes and procedures. During a subsequent State review of records of high school students in this LEA enrolled in the winter of 2021, the State found that three of the LEAs were in 100 percent compliance with Indicator 13. Six remain noncompliant and continue their improvement work through spring 2022. A third review of compliance will be conducted in July 2022 to ascertain systemic compliance.

Note: The random samples of student records selected for the prong II reviews are pulled from the LEA’s population of student records relevant to the indicator. Only records of active high school students with IEPs in one quarter of the recent fiscal year were sampled for indicator 13. OSDE-SES checked all records in LEAs with a total of 11 or fewer records that met this criterion. Otherwise, sample sizes ranged from 11 to 34, depending on the size of the LEA. The sample sizes are statistically representative, within the following assumptions:
• Margin of error of 10 percent: this is the chance of missing (not finding) noncompliance in the sample when it exists.
• Confidence level of 95 percent: this is the level of confidence that results found are true and representative.
• Expected response distribution of minimum 90 percent compliance.

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

The OSDE-SES annually conducts monitoring activities for 100% of the State’s LEAs to determine if all LEAs are in compliance for Indicator 13. Noncompliance is identified through data submitted by LEAs through the annual June end-of-year data collection as well as specific monitoring activities such as desk audits and onsite visits. All active high school student records are reviewed. A sample is not conducted for annual compliance.

After analyzing data collected for Indicator 13 in June 2020, noncompliance was identified in thirty-eight LEAs, much of which was due to the pandemic. The 38 LEAs identified as noncompliant were issued a letter of findings and required to make child-specific corrections within 30 days of receipt of the letter. All 38 LEAs were notified by November 15, 2020. Subsequently, LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed IEP documentation through the statewide online IEP system (OK EdPlan) in order to determine that they were completed in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.

The 38 LEAs identified as being noncompliant have since demonstrated that they have corrected child specific (Prong I) noncompliance.

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

**Actions taken if noncompliance not corrected**

If noncompliance is not corrected--meaning LEAs continue to not demonstrate systemic compliance--LEAs are monitored through the differentiated monitoring process for a second consecutive year and are marked as having "longstanding noncompliance" in indicator 13 on their annual determinations. LEAs identified with continuing noncompliance must revisit their improvement plans from the prior year and review and revise to ensure compliance can be achieved. A subsequent analysis of IEPs is conducted at the end of the school year--as described in the prior section ("Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements").

If an LEA has been noncompliant (below 95%) for three consecutive years for indicator 13 , the LEA is required to complete the following additional activities:
o Review the past two years root cause analyses to assist in developing an improvement plan.
o Use professional development special education grant funds to address the improvement plan implementation. The amount or percentage of funds directed will be determined in consultation with the state.
o Invite parents of affected students to the school board meeting to participate in the discussions for the plan for improvement.

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

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

## 13 - Prior FFY Required Actions

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

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

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

Reporting completed as required in prior sections.

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 6 uncorrected findings of noncompliance identified in FFY 2019 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 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

Collect data by September 2021 on students who left school during 2019-2020, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2019-2020 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Beginning with the FFY 2021 SPP/APR, due Feb. 1, 2023,** when reporting the extent to which the demographics of respondents are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, States must include race/ethnicity in its analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline**  | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2020 | Target >= | 32.00% | 32.00% | 32.00% | 32.75% | 32.75% |
| A | 20.02% | Data | 24.27% | 22.32% | 24.56% | 26.42% | 22.27% |
| B | 2020 | Target >= | 47.25% | 47.50% | 48.00% | 49.00% | 49.00% |
| B | 54.72% | Data | 60.19% | 62.74% | 60.58% | 57.19% | 51.27% |
| C | 2020 | Target >= | 60.25% | 60.50% | 61.00% | 73.60% | 73.60% |
| C | 64.73% | Data | 82.28% | 74.74% | 76.60% | 73.36% | 70.18% |

**FFY 2020 Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 20.00% | 21.00% | 22.00% | 23.00% | 24.00% | 25.00% |
| Target B >= | 54.00% | 55.00% | 56.00% | 57.00% | 58.00% | 59.00% |
| Target C >= | 64.00% | 66.00% | 68.00% | 70.00% | 72.00% | 74.00% |

**Targets: Description of Stakeholder Input**

Ten outside stakeholders participated in the initial target-setting meeting for secondary outcomes. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma. After a discussion about long-term goals and measurements for indicator 14, stakeholders were asked to vote their preferences among a) possible sets of end-of-cycle targets and b) methods for setting interim targets.

An essential question was framed to stakeholders: what percentage of students with disabilities who leave high school should we expect to be engaged in education and/or work after high school? Five of the seven who responded to the poll said 85 to 90% is their expectation. When asked about their preferred final targets, the vast majority of these same stakeholders preferred a final year target of 75% for 14C (25% for 14A and 55% for 14B). When asked about this disparity, stakeholders responded that the target may need to be lower than the expectation until services and structures can improve in the state.

The rates of post-secondary outcomes across 14 A, B and C have been decreasing over the past few years, and this trend was exacerbated by the pandemic. Many fewer students were engaged in education or work after leaving high school in SY 18-19 and SY 19-20, compared to prior years. Because of the effects of the pandemic, stakeholders agreed with the state’s proposal to reset baseline to FFY 2020 data. The long-term implications for post-secondary outcomes may not be known for years, and a new baseline will allow more room for improvement over time.

Using stakeholders’ input and aligning those preferences to current data levels, the state proposed to increase 14A and 14B by one percentage point annually, with a final year target that is five points above baseline. A more ambitious goal was proposed for 14C, with annual increases of two percentage points to a final target of 74 percent. In a subsequent meeting, stakeholders agreed with this approach.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 6,889 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 1,069 |
| Response Rate | 15.52% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school  | 214 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school  | 371 |
| 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) | 44 |
| 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). | 63 |

| **Measure** | **Number of respondent youth** | **Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 214 | 1,069 | 22.27% | 20.00% | 20.02% | N/A | N/A |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 585 | 1,069 | 51.27% | 54.00% | 54.72% | N/A | N/A |
| 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) | 692 | 1,069 | 70.18% | 64.00% | 64.73% | N/A | N/A |

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

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

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate  | 19.79% | 15.52% |

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

OSDE-SES has directed its contracted polling organization to conduct surveys equitably, regardless of student demographics. All exiters are contacted in a variety of ways, and weighted sampling is not conducted. The polling organization attempts to contact students multiple times if the contact information is not "unreachable." We expect that if the response rate increases through the efforts described previously, then the respondent pool will continue to become more representative. Unfortunately, if under-represented students (such as drop-outs) are more likely to have their contact information change after exiting high school, those students will be less likely to respond to the survey, and those groups will continue to be under-represented.

The state has worked to improve contact information by encouraging districts to update contacts at the end of students' senior year. Oklahoma has also encouraged districts to collect their own survey responses. Districts that conduct the surveys themselves have response rates close to 100%, much higher than the state average. Districts who make their own calls have found it easier to find missing contact information or to update that information when it has changed.

**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.**

The state has identified the potential for nonresponse bias in the survey results in two areas. The first is related to Hispanic respondents, who are significantly less represented among respondents than in the sampling pool. They are over-represented in the set of nonrespondents as a result. Importantly, Hispanic respondents have higher rates of engagement than other groups, with 68 percent in Measure B and 77 percent in Measure C. These rates are significantly higher than other groups’ rates of education and employment engagement. If more Hispanics participated in the survey, it is possible that the overall state rates for Measures B and C would be higher. (But only if the population of non-respondents is the same as respondents.)

The second area with potential nonresponse bias is related to the reason for exiting. Students who exited by dropping out of school and who answered the survey were substantially less likely to be engaged: zero reported being enrolled in higher education, while 32 percent fell into Measure B and 40 percent in Measure C. These engagement rates are significantly lower than for graduates. If the population of non-respondents is the same as respondents, then the overall state rates for all three indicator 14 measures may be lower if more dropouts responded to the survey.

However, we are not able to know if non-respondents have the same characteristics as respondents, and do not know whether they are engaged in education or employment at the same rates as respondents. Thus, there is only potential non-response bias and none has been definitively identified.

The state’s solution to resolving potential non-response bias is to increase the response rate to include more respondents of all types.

**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.**

As shown in the demographic comparison below, the set of respondents resembles the sampling pool in most categories. Significance tests were conducted to assess whether the differences in proportions between the full exiting population and the respondents were significant. Three comparisons stand out. First, females' response rate dropped in FFY 2020 compared to prior years, and there is now a significant difference in the representation of females among respondents compared to the sampling pool.

Students who dropped out of school were substantially less likely to respond to the survey than graduates. Although 89.5 percent of the sampling pool were graduates, 95.4 percent of respondents were graduates. The survey results over-represent the current status of graduates compared to dropouts as a result.

Similarly, White students were more likely to respond to the survey than African-American and Hispanic students. Students identifying with other racial groups were not significantly less likely to respond. The percentage of White students among respondents dropped by two percentage points from the prior year, so the entire dataset is marginally more representative than before.

Representation by groups:
Females: 37.3% of exiters; 32.4% of respondents (significant difference)

Asians: 0.4% of exiters; 0.56% of respondents (no significant difference)
African-Americans: 11.1% of exiters; 9.0% of respondents (significant difference)
Hispanic/Latino: 13.4% of exiters; 10.1% of respondents (significant difference)
Native American: 15.3% of exiters; 15.8% of respondents (no significant difference)
Pacific Islander/Native Hawaiian: 0.16% of exiters; 0.19% of respondents (no significant difference)
Two or more races: 7.0% of exiters; 8.0% of respondents (no significant difference)
White: 45.1% of exiters; 50.8% of respondents (significant difference)

Dropouts: 10.4% of exiters; 4.4% of respondents (significant difference)
Graduates: 89.5% of exiters; 95.4% of respondents (significant difference)
Other: 0.1% of exiters; 1.0% of respondents (no significant difference)

**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.**

The response rate dropped several percentage points compared to last year, from 19.79 percent to 15.52 percent. The pool of possible respondents included all school leavers (graduated or dropped out) in SY 2019-2020. 6889 individuals were included in the list and all contact information was shared with the contracted polling organization. Of these, 1069 could be contacted and were willing to respond (the total count of respondents was about the same as last year, but the sampling pool was substantially larger, reducing the response rate). OSDE-SES recognizes that this rate may not be sufficient to ensure representation of all special education school leavers for the state or LEAs, reducing the validity and reliability of the data.

Efforts are being made to improve low response rates due to inaccurate contact information and leavers’ unwillingness to respond to the survey request (1,250 of the 6,889 exiters had blocked, business, disconnected, fax/computer tone, unknown, or wrong phone numbers). Districts have begun to assist the state by updating contact information just prior to graduation and by raising awareness of the importance of the survey among personnel. In FFY 2020, nine districts opted to conduct the survey with their own students, resulting in much higher local response rates (66.79% on average). More districts have expressed interest in conducting their own surveys in FFY 2021. OSDE-SES personnel and stakeholders such as the Oklahoma Transition Council are working to develop additional strategies to encourage participation.

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

The State uses a statistical formula (Z-test for two population proportions) to determine if two proportions (i.e., % of surveys received versus % of families in the target population) should be considered statistically different. A p-value less than 0.05 indicates a statistically significant difference between the proportions (non-representativeness).

| **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 |

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

As described earlier, the pandemic affected the rates of students who are enrolled in any type of educational activity and who are employed.

The 2019-2020 survey protocol is posted on the OSDE Office of Special Education Services' website, on the secondary transition page: https://sde.ok.gov/secondary-transition.

## 14 - Prior FFY Required Actions

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

OSEP notes that one or more of the attachments included in the State’s FFY 2019 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 2019 SPP/APR**

The required analysis is provided in a previous section. The attachment was updated to be 508 compliant, but the 2019-2020 survey protocol is also posted on the OSDE Office of Special Education Services' website, on the secondary transition page: https://sde.ok.gov/secondary-transition.

## 14 - OSEP Response

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

## 14 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

# 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 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1 Number of resolution sessions | 7 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/03/2021 | 3.1(a) Number resolution sessions resolved through settlement agreements | 6 |

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

NO

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial meeting where targets were discussed for the “miscellaneous” indicators, which included numbers 4, 5, 8, 15 and 16. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma. After a discussion about long-term goals for indicators 15 and 16, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets. Because of their similarities, indicators 15 and 16 were presented together.

Stakeholders overwhelmingly preferred to set moderate targets for these indicators, acknowledging that the state has little to no control over outcomes. Additionally, the high level of variation from year to year in both counts and outcomes makes reasonable targets difficult to define. With this feedback, the state proposed to set targets for both 15 and 16 at 70% annually. Stakeholders concurred with this approach in subsequent meetings.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2012 | 62.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 65.00% | 0.00% | 65.00% - 70.00% | 65.00% - 70.00% | 65.00%-70.00% |
| Data | 66.67% | 78.57% | 100.00% | 100.00% | 87.50% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 70.00% | 70.00% | 70.00% | 70.00% | 70.00% | 70.00% |

**FFY 2020 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 6 | 7 | 87.50% | 70.00% | 85.71% | Met target | No Slippage |

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

The State does not believe the quality or validity of the data for indicator 15 were affected by the pandemic.

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2020. The State is not required to meet its 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 not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1 Mediations held | 12 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/03/2021 | 2.1.b.i Mediations agreements not related to due process complaints | 12 |

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

NO

**Targets: Description of Stakeholder Input**

Six outside stakeholders participated in the initial meeting where targets were discussed for the “miscellaneous” indicators, which included numbers 4, 5, 8, 15 and 16. Stakeholders were presented information about the indicator definitions, data collection methods, and historical trends in Oklahoma. After a discussion about long-term goals for indicators 15 and 16, stakeholders were asked to vote their preferences among a) possible end-of-cycle targets and b) methods for setting interim targets. Because of their similarities, indicators 15 and 16 were presented together.

Stakeholders overwhelmingly preferred to set moderate targets for these indicators, acknowledging that the state has little to no control over outcomes. Additionally, the high level of variation from year to year in both counts and outcomes makes reasonable targets difficult to define. With this feedback, the state proposed to set targets for both 15 and 16 at 70% annually. Stakeholders concurred with this approach in subsequent meetings.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 92.31% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 82.75% | 83.50% | 84.25% | 85.00% | 85.00% |
| Data | 75.00% | 85.71% | 60.00% | 84.62% | 88.89% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 70.00% | 70.00% | 70.00% | 70.00% | 70.00% | 70.00% |

**FFY 2020 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 12 | 12 | 88.89% | 70.00% | 100.00% | Met target | No Slippage |

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

The State does not believe the quality or validity of the data for indicator 16 were affected by the pandemic.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State provided targets for this indicator, and OSEP accepts those targets.

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan

**Instructions and Measurement**

**Monitoring Priority:** General Supervision

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

**Measurement**

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

**Instructions**

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

**Targets*:*** In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State’s FFY 2025 target must demonstrate improvement over the State’s baseline data.

**Updated Data:** In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2, 2022, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

*Phase I: Analysis:*

- Data Analysis;

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

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

- Selection of Coherent Improvement Strategies; and

- Theory of Action.

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

- Infrastructure Development;

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

- Evaluation.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

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

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

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

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

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State’s last SSIP submission (i.e., Feb 2021). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

## 17 - Indicator Data

**Section A: Data Analysis**

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

By FFY 2025, Oklahoma will see improved early literacy skills in targeted low-performing schools as identified by the state’s ESSA plan.

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

YES

**Provide a description of the system analysis activities conducted to support changing the SiMR.**

Upon the completion of the previous SSIP, the Office of Special Education Services at the Oklahoma State Department of Education (OSDE-SES) began consultations with stakeholders to reconsider the SSIP and SiMR for this new SPP/APR cycle. As described in previous reports, Oklahoma was not satisfied with the previous plan and has intended for several years to implement substantial changes. Stakeholders have also pushed to change the SSIP and the SiMR to meet the current needs of the state.

Initial conversations held in 2020 and again in January 2021 incorporated a systems analysis of the strengths and challenges of the former SSIP, as well as the current status of the infrastructure in Oklahoma that supports the improvement of students’ academic outcomes. Two systems analyses were conducted. The first was concluded in early 2020 when the first iteration of a new SSIP was planned (which proposed a SiMR that was subsequently rejected by OSEP). That analysis was described in the FFY 2018 SSIP narrative report submitted in April 2020. More recently, the state conducted a second systems analysis targeted on the infrastructure that exists to support academic improvement. This review was completed in January 2021.

Stakeholder discussions led to a decision that a stronger internal infrastructure and an implementation plan with substantial fidelity monitoring would lead to greater outcomes for students. The systems analysis found that a variety of projects exist to support districts and sites that have substantial deficits, including funding dedicated to Comprehensive Support Improvement (CSI) sites, along with a Striving Readers Comprehensive Literacy Grant and a School Improvement Grant. But few resources were found to be available for use by Additional Targeted Supports and Improvement (ATSI) sites. Indeed, the Office of School Support reached out to the Office of Special Education Services to develop additional supports for sites designated for special education factors. Stakeholders agreed that it would be appropriate to focus the newly designed SSIP on providing support to these school sites in collaboration with the Office of School Support.

Various options were discussed among stakeholders, and consensus emerged on implementing an MTSS framework to support struggling school sites with various types of interventions and resources based on the sites’ needs. Fortunately, several units in OSDE have been working to imbed MTSS approaches in the agency’s work, including the Oklahoma SPDG. An agency-wide initiative called the Oklahoma Interconnected Systems Framework was started in October 2020 to expand structured systems of support (now called the OKMTSS Initiative, with an MTSS Leadership Team and MTSS Implementation Team) . Stakeholders provided feedback on these approaches and appreciated the tiered delivery approach of an MTSS framework, as well as the interventions that could be provided at each tier. The interventions would focus on system improvements at school sites by providing technical assistance and professional development, while increasing access to evidence-based practices and related resources.

**Please list the data source(s) used to support the change of the SiMR**.

In the two rounds of redefining the SSIP, a vast array of data was reviewed. Initially, all APR data were discussed to provide stakeholders a full analysis of special education data in Oklahoma. When the proposed focus was behavior and discipline, the analysis focused on what discipline looks like in the state. When the focus changed to assessment outcomes, additional data were reviewed to consider whether those outcomes vary by demographic groups and sites, and whether patterns in outcomes could be identified. The data sources used to support the change of SiMR included:
State assessment results and Reading Sufficiency Act data
Post-secondary survey outcomes
Early childhood outcomes
Student demographic data
Discipline and behavior data
Site demographic data

**Provide a description of how the State analyzed data to reach the decision to change the SiMR.**

Throughout the discussions regarding the new SiMR outcomes and system analysis, stakeholder input and data analysis were at the forefront of planning. First, the SSIP leadership team conducted a stakeholder survey over the course of two months from November-December 2020 to gather information on stakeholders’ preferred SSIP focus areas. As of January 4, 2021, there were 571 responses to the survey. The survey was distributed on the OSDE-Special Education Services listserv and the OSDE Special Education Services Facebook page and was shared through the Oklahoma Parents Center network.

Of the 571 respondents, the large majority were parents, special education directors and special education teachers. Other respondents included LEA Administrators, general education teachers, service providers, community members, and OSDE members. Most were from Central Oklahoma, making up over half of the respondents. In decreasing participation, respondents represented Northeast Oklahoma, Southeast Oklahoma, Southwest Oklahoma, and Northwest Oklahoma. The survey did not ask for additional personal demographic data.

When asked about the SiMR focus, literacy was preferred by 350 voters and early childhood transition by 150 voters. No other category (math skills, graduation rates, etc.) received more than 50 votes. Other concerns that were identified by respondents as potential SiMR focus areas included trauma, social-emotional needs, behavior, mental health, life skills, and discipline. Since discipline and behavior outcomes cannot be the focus of the SSIP, the state leadership team and stakeholders felt that the most straightforward path was to continue work to improve literacy outcomes but with an entirely new approach.

The survey also asked respondents to rate whether they believed that their district had the necessary resources and tools to meet the needs of struggling learners and students with disabilities. About 40 percent said that they “somewhat agree” that their districts have what they need, but another 37 percent said they did not. Evidence-based programs that improve local capacity to serve struggling students are urgently needed and wanted.

After the survey was concluded, the state leadership team began holding stakeholder meetings online. Several were held over the course of 2021. At the first one in January, educational outcomes as reported in the Annual Performance Report were shared with participants. These included early childhood outcomes (indicator 7), secondary outcomes (indicators 1 and 2), and student assessments (Indicator 3). When student proficiency was disaggregated by IEP status and race, students in all racial demographics with IEPs performed lower than their non-IEP peers in both Math and Reading. In Oklahoma, students do not show substantially lower than expected performance on ECOs or secondary outcomes, and stakeholders stressed that the state is most challenged in academic achievement, whether measured on state assessments or elsewhere.

As the state began to consider how to measure the SiMR, a variety of data sources were considered, including the annual state assessments, reading screener results, and other local data elements. State assessments were deemed impractical by stakeholders and state personnel because it is a one-time snapshot of student achievement and does not measure growth well. Additionally, the earliest the test is taken is 3rd grade, which makes improvements at earlier grades impossible to monitor. Instead, consensus was obtained to use the annual reading skills screener results mandated by state law for grades kindergarten through third grade. Since all sites already collect and submit these data, it is possible to use the dataset for the SiMR without a new data collection. It also presents several options for measurement, since the data show growth over time as well as site status at the beginning and end of the school year. As a result of the benefits identified, the state and stakeholders agreed to use this data source for the SiMR measurement.

Finally, site differences were examined based on the 2019 state report card results. Sites were designated as a) no support needed (~1260 school sites), b) “Additional Targeted Support & Improvement” (ATSI: ~315 sites), or c) “Comprehensive Support & Improvement” (CSI: ~75 sites). CSI and ATSI sites perform worse on the state assessments on average than sites not needing support, while IEP students are underperforming their non-IEP peers in both reading and math regardless of school improvement designation. Among the 148 sites currently designated for ATSI, 76 are elementary sites. Of those, 61 are designated for special education factors. The evident need for ATSI site support (as described in the systems analysis section) has led the Oklahoma team to target ATSI sites and use ATSI site results for the SiMR. Although sites with special education deficiencies are of particular interest for the SSIP, the reality that most sites are not seeing this population succeed has led the SSIP leadership team to include all ATSI sites in the SSIP.

Because of the overwhelming preference to address literacy outcomes, the proposed plan will focus on improving early literacy in ATSI schools as measured by the preapproved universal screeners for reading skills.

**Please describe the role of stakeholders in the decision to change the SiMR.**

Internal and external stakeholders collaborated extensively to identify a new SiMR. After discussions held the prior year when a change to the SiMR was first proposed, the stakeholder survey was developed to efficiently gather stakeholder input about changing it again. As discussed in the previous section, stakeholders proposed several options, but the most preferred was literacy outcomes. After the survey, this finding was supported through online discussions in stakeholder meetings with parents, district personnel, state agency representatives and community advocates. Stakeholders’ views were essential to the decision to change the SiMR as well as the selection and calculation of the SiMR.

Once the SiMR focus was selected as early literacy, the reading screener results were shared with stakeholders (as described earlier). During those discussions, stakeholders provided input into the calculation of the SiMR. Two main options were presented: whether to report the percent of students who moved from a beginning-of-year status of “has reading difficulties” to an end-of-year status of “on level,” or to report the percent of students at the site who ended the year on level (demonstrating “sufficiency”). The latter would include the students who began the year at reading sufficiency, also. This measure takes into account the reality that some sites start the year better than others. A site that starts with low sufficiency may show tremendous growth, because it has a lot of improvement to make. A site that starts well may not show much improvement at all, because those few who struggle have substantial need. Stakeholders chose to use the latter measurement for the SiMR. This calculation is described in a previous section.

Stakeholders were also consulted on target setting for the next SPP/APR cycle (FFY 2020-2025). Stakeholders preferred one of two approaches to setting future targets: some preferred marginal improvement while others preferred moderate improvement over time. The first group argued that the state does not yet know how ATSI sites will access and use the evidence-based practices, and since the SiMR reflects improvements across all ATSI sites, improvement may be marginal. Others argued instead that targets should be higher to set high expectations for improvement.

The state chose to set targets with 1.5 percent improvement year over year (after FFY 2021) to reflect the unknowns of implementation. The state is identifying other ways to monitor and measure the impact of the SSIP on student outcomes and will assess the differential (‘value-added’) impact of higher levels of participation in tier two activities as well as tier three participation. Oklahoma expects to see that sites that are more engaged will show statistically significant student improvement.

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

YES

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

The state is including students in grades KG through third in ATSI-designated school sites.

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

YES

**Please provide a description of the changes and updates to the theory of action.**

The theory of action has been rewritten to reflect the revisions to the SiMR and the implementation of a multi-tiered system of support structure for ATSI sites:
If OSDE engages and maintains a state leadership structure to support the adoption of a multi-tiered system of support framework and implements mechanisms to provide access to evidence-based practices at each tier to address progressively severe literacy deficiencies at school sites, then school sites will consistently implement evidence-based practices that support early literacy strategies with fidelity in grades KG through third, leading to improved literacy outcomes for students in those grades.

Oklahoma has devised this theory of action for the SSIP because it clearly articulates the modifications to its infrastructure and practice that OSDE will make to improve student literacy outcomes. It clearly identifies the key components and actors in the change process, with a focus on the role of local sites. If any one of the change elements is not achieved, the SiMR will not improve.

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

https://sde.ok.gov/state-systemic-improvement-plan

**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.**

As described elsewhere, the entire SSIP has been changed along with an update to the SiMR measurement. Details on the new infrastructure improvements and evidence-based practices that will be adopted are described in later sections.
The justification for the change in plan has been provided in the two prior SSIP reports (FFY2018 and FFY2019).

**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 | 50.44% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 50.44% | 50.44% | 52.00% | 53.50% | 55.00% | 56.50% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of students Demonstrating Literacy Sufficiency by End of Year** | **Number of Students Assessed on Literacy Benchmarks** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 9,425 | 18,684 |  | 50.44% | 50.44% | N/A | N/A |

**Provide the data source for the FFY 2020 data.**

The data source for the SiMR is the aggregated dataset of benchmark results on pre-approved screeners that assess reading skills in grades kindergarten through third. All elementary sites submit this data annually to the SEA.

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

Oklahoma Statute 70 O.S. § 1210.508C requires that each student in kindergarten through third grade is assessed at three points during the school year for a variety of critical reading skills. Screeners used by LEAs must be pre-approved by the SEA (currently there are seven screeners). LEAs collect reading screening results to submit to the SEA semi-annually. The datasets are processed at the end of each school year to produce an aggregated table of site-level results to monitor site improvement over time.

The SiMR is calculated from the aggregated table of screener results. As described previously, the SiMR is calculated only using the benchmark data from elementary school sites identified as ATSI at the most recent designation. ATSI designations are made every three years using the prior three years of state ‘school report card’ results. The annual school report card measures several school indicators of quality, including assessment proficiency rates and rates of growth, chronic absenteeism, graduation, English language learner progress, and post-secondary opportunities. New designations will be made in late 2022 using the data from school years 2018 through 2020-2021. The current set of sites were identified using the prior three years of data.

The SiMR calculation is made by identifying the number of students in grades KG through 3 at all elementary ATSI sites who a) demonstrated reading sufficiency on an approved screener at the beginning of the year or b) improved to demonstrate sufficiency (scoring “on level”) at the end of the year. That number is divided by the total number of KG to third grade students who were screened during the school year, minus those who exited the sites over the course of the year.

Note that SiMR data for FFY 2021 will reflect school year 2021-22 screener results, during which time evidence-based practices have not yet been implemented. Thus, the target for FFY 2021 remains the same as FFY 2020.

**Optional: Has the State collected additional data *(i.e., benchmark, CQI, survey)* that demonstrates progress toward the SiMR? (yes/no)**

NO

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

NO

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

NO

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

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

https://sde.ok.gov/state-systemic-improvement-plan

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

YES

**If yes, provide a description of the changes and updates to the evaluation plan.**

The evaluation plan is completely new because of the new SSIP adopted in Oklahoma. It is also unfinished as we develop the full MTSS framework to support sites struggling to make literacy gains. The first project goal identified by the SSIP leadership team and stakeholders is “The Oklahoma State Department of Education will institute and maintain a state leadership structure to support the adoption of a multi-tiered system of support (MTSS) framework to address literacy challenges.” To achieve this goal, the state has identified two infrastructure improvement strategies. These infrastructure strategies have a logic model and evaluation plan in place.

Strategy One: Establish agency leadership structure to support the SSIP
The short-term outcomes are:
~SSIP Leadership Team (SLT) meets on a monthly basis to consider program progress.
~Processes and procedures are written to share with stakeholders, partners, and participating districts.
~Initial funding is allocated to support startup activities for the SSIP, including staff support.
~Stakeholders are regularly consulted on program definition and implementation.
~SSIP staff are engaged with the agency’s collaborative efforts to promote MTSS statewide.

Strategy Two: Establish a multi-tiered system of support
The short-term outcomes are:
~Three levels of support have been articulated with specific interventions and support activities.
~Processes and procedures define and reinforce implementation of the framework.
~Procedures have been created to define which sites are be served at each tier.
~An application process has been developed to select sites to be provided tier three interventions.
~Mechanisms have been developed to monitor who is using universal (tier one) resources and supports, which are available to all districts in Oklahoma.
~Mechanisms have been developed to monitor which sites are using targeted (tier two) resources and interventions, which will be made available to ATSI sites in Oklahoma.

The long-term outcomes in the evaluation plan focus on the quality and sustainability of the infrastructure improvements. The posted evaluation plan provides details about the medium and long-term outcomes for both strategies.

Although the evidence-based strategies have been broadly identified already, the team and stakeholders have not yet defined how their implementation will be evaluated. Specific short, medium and long-term outcomes will be written as the details about design and implementation are articulated this year. Fidelity of implementation will be measured and monitored as part of the evaluation plan.

**If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.**

The evaluation plan has changed due to the redesign of the SiMR and overall SSIP.

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

The focus during the majority of this past reporting period has been on completing Phase I and Phase II of the new SSIP. This year, substantial time will still be spent in Phase II as the full framework is developed.

Despite the delays in achieving full implementation of the SSIP, work has been done to improve the state’s infrastructure to support the SSIP goals and SiMR improvement. As described in the previous section, the first infrastructure strategy is to establish the agency leadership structure to support the SSIP. The state has already met some of its short-term outcomes for this strategy, as described in the next section. The Office of Special Education Services has allocated funding and personnel resources to support SSIP implementation, and substantial work was done to engage stakeholders inside and outside the SEA, including parents, LEA representatives, and agency partners. Building relationships with stakeholders and agency partners has been an important endeavor this reporting period, and we anticipate that these efforts will strengthen the final design and implementation of the plan.

The second infrastructure strategy is to establish a multi-tiered system of support for school sites struggling to meet literacy targets. This work has just begun in the past few months and has required more extensive work than first anticipated. The basic outline of the framework has been defined, as has the target school population. The specific elements to be implemented at each level of support will be selected this coming year. This work relies heavily on stakeholder input, especially from agency partners. The collaborative work required to build a sustainable, high quality MTSS framework is substantial. Meaningful work has been accomplished to construct the first tier of the framework (providing universal supports to districts), and the SLT has identified the supports that will be provided at this 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.**

The evaluation plan has incorporated short, medium and long-term outcomes for the two infrastructure improvement strategies. Because this is the first year of implementation of the new SSIP, only short-term outcomes have been achieved and can be reported at this time. See the posted evaluation plan for mid-term and long-term outcomes. Note that the evaluation reporting period is the full prior calendar year (January to December 2021) in this report.

Adoption of an MTSS framework is a fundamental change to the support structure provided to ATSI sites. It is a systems change to the agency’s approach to addressing academic delays among students. Both infrastructure strategies described in previous sections are essential for the achievement of the SiMR: if the support structure and the MTSS framework are not implemented well, the SiMR will not improve.

Similarly, both are essential for the sustainability of system improvement efforts and scale-up, although the program will not realize these goals for several years. To achieve those, foundational governance work in leadership development, documentation of procedures and processes, and resource allocation must continue.

Summary of outcomes achieved:

Infrastructure strategy one: Establish the agency leadership structure to support the SSIP
Outcome 1.1: SSIP Leadership Team (SLT) meets on a monthly basis to consider program progress (governance)
This outcome has been achieved. The SLT began meeting informally in early 2021 but was formally established in fall 2021 with representatives from the Office of Special Education Services, the Office of School Support and the SPDG team. It is now meeting each month to consider the MTSS design and infrastructure improvements.

Outcome 1.2: Processes and procedures are written to share with stakeholders, partners, and participating districts (governance)
This outcome has not been achieved at this time. No processes or procedures have been formally developed and distributed.

Outcome 1.3: Initial funding is allocated to support startup activities for the SSIP, including staff support (governance and finance)
This outcome has been achieved. The Office of Special Education Services has allocated funding to the SSIP by creating a new Instructional Coach position that will be dedicated exclusively to the implementation of evidence-based practices. Additionally, a special education program specialist position has been assigned to the SSIP for management and oversight. Additional funding may be available for other SSIP activities as well.

Outcome 1.4: Stakeholders are regularly consulted on program definition and implementation (governance and quality standards)
This outcome has been achieved. Since the beginning of the re-development of the SSIP, external stakeholders have contributed in many ways to the design of the new plan. Quarterly meetings are held with two different stakeholder groups to discuss implementation (a community and parent group and a group of personnel at ATSI sites), and consultation with agency stakeholders and partners has increased in recent months. Discussions with stakeholders will continue on a regular basis.

Outcome 1.5: SSIP staff are engaged with the agency’s collaborative efforts to promote MTSS statewide (governance)
This outcome has been achieved. Despite turnover in SSIP personnel at the agency, collaborative efforts to promote and use MTSS at LEAs and the SEA have continued. Agency partners are working with the SSIP leadership team to design and implement the SSIP MTSS framework to provide improved literacy supports to struggling school sites.

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Infrastructure strategy two: Establish a multi-tiered system of support
None of the six short-term outcomes outlined previously for strategy two has been achieved to date. Considerable work is being done to define the MTSS framework and all of its components, including which sites will participate at each level and the evidence-based practices to be implemented. Monitoring and accountability mechanisms will be developed once the framework is approved. Stakeholders and agency partners are closely involved in this process.

**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*.***

All infrastructure improvements are new, please see the information shared previously.

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

As described previously, Oklahoma’s SSIP has identified two infrastructure improvement strategies.

Strategy one: Establish the agency leadership structure to support the SSIP
Several short-term outcomes were achieved for this strategy in the first reporting period, and the SLT anticipates more outcomes will be achieved this year. Specifically, the SLT will continue to meet, consult with stakeholders, and build agency partnerships. One of the critical efforts this year will be to continue and expand collaboration with other offices in the agency and the SPDG team to design and implement the MTSS framework (that is, completing work toward strategy two). The SLT and partners will develop written policies and procedures, secure funding for the longevity of the project and allocate resources as necessary. As the MTSS framework is defined, policies and procedures will be written and shared that support the framework’s implementation and sustainability while also enhancing the leadership structure.

Strategy two: Establish multi-tiered system of support
The implementation of strategy two is just beginning and the SLT anticipates substantial movement toward outcome achievement this year. Indeed, the program’s next steps are to meet all short-term outcomes:
Outcome 2.1: Three levels of support have been articulated with specific interventions and support activities.
Outcome 2.2: Processes and procedures define and reinforce implementation of the framework.
Outcome 2.3: Procedures have been created to define which sites are be served at each tier.
Outcome 2.4: An application process has been developed to select sites to be provided tier three interventions.
Outcome 2.5: Mechanisms have been developed to monitor who is using universal (tier one) resources and supports, which are available to all districts in Oklahoma.
Outcome 2.6: Mechanisms have been developed to monitor which sites are using targeted (tier two) resources and interventions, which will be made available to ATSI sites in Oklahoma.

This work will be done in full collaboration with stakeholders and agency partners in the coming months. The SLT is working to have the full MTSS framework articulated by May 2022 so that the implementation of evidence-based practices can begin in August as school sites return for the 2022-23 school year. To support program monitoring, the SLT is also working to develop data collection tools and storage systems. Improvements here will ensure that the state is able to track which sites are using evidence-based practices as promoted through the SSIP and to what degree. Other infrastructure components to be implemented this year include:
a) creating a newly organized SSIP website for public use,
b) identifying and collecting evidence-based resources and tools,
c) creating digital professional development content, and
d) developing the model for instructional coaching and coaching materials.

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

No evidence-based practices were implemented in FFY 2020. The primary focus of the SSIP in the year 2021 was to begin the infrastructure improvement strategies, which include developing the MTSS framework to support evidence-based practices. The evidence-based practice of a tiered system of support framework underpins the instructional changes school sites must adopt for the necessary achievement of the SiMR. The support, professional development, coaching and resources provided through the MTSS framework are also based in evidence-based practices and each component will focus on proven instructional strategies to improve literacy outcomes.

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

The evidence-based practices incorporated into this SSIP include a MTSS approach to providing support to local sites struggling with literacy achievement. As mentioned previously, the MTSS framework is an evidence-based model of intervention, and Oklahoma is incorporating other evidence-based instructional strategies provided at each support tier. At this time, the three tiers will likely consist of the following technical assistance and professional development, at minimum.

Universal Instruction Tier One: the state is developing an online resource library/hub that will allow school sites to access evidence-based practices to strengthen their instructional craft. These resources would be available to all sites across the state, regardless of their ESSA designation. All resources will be vetted for their value and effectiveness as EBPs.

Targeted Intervention Tier Two: the state is developing a sequence of professional development modules that can be used to train teachers, instructors, and interventionists in high quality, evidence-based instructional strategies that can be used to improve literacy outcomes with students of all kinds. Specific modules will likely be developed to support specialized needs for students with disabilities and English-language learners. One of the modules that will be offered is a series of data seminars (a “data retreat”) to provide school site personnel training in data analysis and root cause analysis. Being able to analyze data is a foundational skill to improving instructional practices in aggregate. School sites designated as ATSI are the target population for these interventions.

Intensive Intervention Tier Three: the state intends to implement a model to provide instructional coaching at select ATSI sites as its evidence-based practice at tier three. The instructional coaching will build on the training and supports provided at tier two. The coaching model will be designed in FFY 2021 and 2022 (through the fall of 2022) and fully implemented at school sites in 2023.

Other interventions may be provided as the SSIP develops over time and in consultation with stakeholders.

**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.**

Tiered instructional supports provided through the SSIP will impact school sites across the state by providing a clear framework to align interventions to the site’s level of need. Fullen and Quinn emphasize the importance of initiating state change without a “top-down image; districts want a resource, and a partner, not a parent” (2016). The multiple tiers of support will promote site choice while increasing sites’ capacity to support children. The SSIP will deliver foundational evidence-based instructional resources to all sites regardless of need, while committing intensive support to those with demonstrated severe literacy deficiencies (Knight, 2013). Through the usage of these resources and supports, highly qualified educators and administrators can implement rigorous and intentional evidence-based instructional practices that can close academic gaps in students’ early literacy skills. The MTSS framework of tiered delivery impacts the SiMR by changing teacher practices at multiple levels and using various evidence-based practices.

At the universal level, the online resource library will allow all school site personnel to efficiently access information about high quality evidence-based practices to improve instruction. As teachers improve their practice in the classroom, even if they are not in a low performing school, student outcomes will improve (Datnow, Park, 2014). The online resource hub will ensure long-term accessibility and promote its sustainability. One of the biggest challenges sites face is basic access to vetted information about evidence-based practices; teachers often do not simply have time to review all options. The quality and variety of information on the site will allow personnel to select materials based on their most critical needs among all students they serve (with and without disabilities).

The targeted intervention level will provide more intensive support through professional development on critical topics. Each module will focus on changing instructional practice by providing deeper and more focused training and guidance in the use of evidence-based instructional interventions (Fullen, Quinn, 2016). The professional instructors will guide participants in the use of practices that will have a direct impact on instruction that ultimately will improve students’ learning outcomes. Additionally, a focused data retreat provides the structure to support improved analysis of school data that will enable sites to think critically about systemic and procedural changes (Datnow, Park, 2014). The deliberate effort to promote new norms, frames, and belief systems is referred to as reculturing; this action is critical in the development of sustainable data analysis (McLaughlin, M.W, 1987).

The last and most intensive tier will provide access to an instructional coach for select sites that apply to partner with the SSIP leadership team at this level. The coaching intervention will tailor technical assistance and interventions to the specific needs of a school site. As Knight cites in High-Impact Instruction, “instructional coaches need to have a deep understanding of teaching practices” (Knight, 2013). As instructional coaching is molded to each educator, the personal experience will benefit school sites with severe proficiencies by targeting instructional improvements where most needed (Liu, 2004). Instructional coaching will directly impact the educator’s instructional effectiveness in the classroom. The instructional coach will also meet with administrators and local instructional coaches to increase their knowledge and change their procedures and practices. It is through these mechanisms that the SiMR outcomes will be achieved, because increased investment in instructional improvement will impact student outcomes positively (Liethwood, 2008).

Datnow, A. Park, V. (2014). Data-Driven Leadership. 30.
Fullen, M., Quinn, J. (2016). Coherence: The right drivers in action for schools, districts, and systems. 10.
Knight, J. (2013). High-Impact Instruction: A framework for great teaching. 3.
Liethwood, K. (2008). Characteristics of High Performing School Districts: A review of Empirical Evidence. 37.
Liu, E. (2004). Guiding Lights: How to mentor—and find life’s purpose. New York: Ballantine Books. 47.
McLaughlin, M.W. (1987). “Learning from Experience: Lessons from policy implementation”, Educational Evaluation and Policy Analysis 9. 171-178.

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

Since the SSIP framework, activities, and SiMR are new for this cycle, Oklahoma does not have data about evidence-based practices to report at this time. However, we expect to develop the evaluation measures and methods in the coming months and will begin collecting data related to the implementation of EBPs. Additionally, the team will utilize this data to assess change to the projected programming if needed.

**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.**

N/A

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

In the year 2022, the state will continue developing the leadership and MTSS infrastructure, including the specific components of tiers one, two and three interventions and supports. Specifically, the SLT will focus on a) identifying and improving access to evidence-based practices as universal supports and b) developing and implementing a professional development sequence of targeted interventions and instructional strategies. The coaching framework will be developed, but it will not be implemented for another year. We expect to require sites to complete a year of professional development prior to incorporating instructional coaches into their professional development locally. Specific anticipated outcomes have not been determined at this time. The specified components for future implementation have been described elsewhere and require further development before delivery.

The MTSS Implementation Team at OSDE has begun to collate and review evidence-based resources to provide in the SSIP resource library and has started the process of developing a dedicated website where they will be housed.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

[additional text box for SSIP only Stakeholder Input]
As described previously, Oklahoma began stakeholder discussions and its Phase I infrastructure and data analyses in 2020. These initial discussions led to the selection of a different SiMR that was subsequently denied (disciplinary outcomes). A second round of stakeholder engagement was then initiated in late 2020 with a community survey and followed by a series of stakeholder meetings. Participants included parents, teachers, LEA administrators, state agency representatives, and community advocates. Partnerships developed with the Office of School Support, the MTSS Development Network in OSDE, and the SPDG team to craft an MTSS framework to support struggling schools.

Stakeholder input helped frame decisions about the SiMR, the overarching support infrastructure, and the evidence-based practices to be implemented at each MTSS tier. A broadly collaborative effort has shaped the SSIP structure, goals and planned interventions. Initially, the intent was to focus on sites identified as ATSI for special education factors, but the team now recognizes that all ATSI sites will benefit from access to the supports being developed.

The SLT collected demographic data from participants at each stakeholder meeting. In January 2021, the SSIP leadership team hosted two OK SSIP Stakeholder Meetings exclusively for parents in partnership with the Oklahoma Parent Center. The intent was to provide an exclusive forum for parents to consider the SSIP and provide input privately, away from LEA personnel. Nineteen parents attended, although 42 registered for the events. The 19 parents that attended represented ten different counties and five different ethnicities. Sixteen were “parent/grandparent relative of a person with a disability” and had students ranging in age from three to 11. During these first meetings attendees were informed of the purpose of the SSIP, the timeline and plan for implementing a new focus. The parent meetings were followed by another in January during which the same information was shared with a broader array of stakeholders.

On April 20, 2021 another stakeholder meeting was held. The SSIP leadership team and Oklahoma Parent Center felt that it was appropriate at this meeting to combine parent and community/LEA stakeholders into one discussion. Twenty-nine individuals were present: four LEA administrators, nine OSDE representatives, eight special education directors, two related service providers, five parents, and one general community member. Stakeholders indicated they have a strong desire for the resources that are developed to be available statewide to all school sites, not just those designated for intensive support. This led to the idea for a resource library to be provided at the universal level.

At subsequent meetings with stakeholders—which now included scheduled discussions specifically with personnel at ATSI-designated sites—the SSIP leadership team sought feedback about the MTSS framework and evidence-based practices to incorporate into the plan. Stakeholders stated that professional development would be appropriate at the targeted tier, while coaching was appropriate at the intensive tier of the framework. Stakeholders approved of an application process to receive instructional coaching.

Finally, the SiMR measure was discussed in a meeting in fall 2021, once the prior year’s reading benchmark data were available.

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

Stakeholders have had many opportunities to participate in the development of the SSIP. Through the OSDE Special Education Services listserv and Facebook, updates were shared regarding opportunities for survey input and upcoming meetings. The Oklahoma Parent Center also shared information about these opportunities with its followers and clients. Stakeholder meetings were held virtually which allowed for stakeholders across the state to participate easily. During each of the virtual meetings, several engagement tools and techniques were used to elicit high quality feedback.

These engagement strategies included Jamboard, polls, chat, and discussion. Jamboard provided a platform through which stakeholders could raise post questions, share opinions, and voice concerns anonymously during feedback sessions. The platform allowed participants to immediately see each others’ written comments and provided them the opportunity to reply and engage with those comments. Polls provided quantitative data to the SSIP leadership team, allowing it to gauge preferences in relation to a list of options. They were primarily used when the state needed to get a majority vote on mutually-exclusive paths to take (such as the SiMR calculation). Chats and discussion were used to provide an open response forum in which stakeholders could fully engage with each other, sharing ideas and brainstorming. Using all of these engagement strategies allowed participants many different ways to provide feedback on state proposals.

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

YES

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

Coaching was proposed early in the process as an ideal evidence-based practice that could be implemented at struggling sites. However, stakeholders voiced concerns that the state did not have the capacity to support as many sites as could benefit from the intervention. Stakeholders worried that they would not receive any instructional support if the SSIP was only providing coaching at select sites.

In response, the state presented the idea of a multi-tiered system of support that would provide assistance to sites at a variety of levels. The stakeholders were strongly in favor of this adjustment to the plan. When discussing the style of instructional coaching (in person versus remote), stakeholders expressed concerns fully remote coaching would prevent the development of coach-learner relationships, but they also saw the value of remote coaching for its flexibility and potential for increased communication. In response, the state proposed a hybrid model, incorporating both in-person and remote coaching. Stakeholders supported this proposal.

Another concern of stakeholders was that student behavior could not be the focus of the SSIP since OSEP’s framework of the SSIP prohibited a behavior outcome. In response, the state will support student behavioral improvements by modeling an MTSS framework (which can be applied locally to address behavior challenges) and to identify evidence-based resources that support academic and behavioral challenges simultaneously. The SSIP leadership team will also consider development professional development modules that incorporate evidence-based instructional practices that address both early literacy development and classroom management.

**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.**

During fiscal year 2022, an instructional coach will join the SSIP leadership team to assist with the professional development modules and the instructional coaching model. The state is in the process of interviewing potential candidates.

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

An instructional coach will be hired to support evidence-based instruction by summer 2022.

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

Successful implementation of the SSIP is dependent on having consistent, highly trained personnel to manage the project. The state recently experienced an unanticipated barrier towards the end of last year when the SSIP manager left the agency unexpectedly. Fortunately, an instructional coach was being hired. This person has instead taken over as SSIP manager. The staffing changes have led to some delays in implementation, stakeholder outreach, reporting and agency communications. However, the new manager has moved quickly into assuming leadership for the SSIP and the project continues to move forward.

Because the intended instructional coach was instead promoted to the project lead, a new coach must now be hired. The team has discussed what knowledge is necessary for the project’s success and has placed a priority on evidence-based instruction regarding early literacy and a firm understanding of MTSS identification and intervention. Because of the nature of the role and the work experience desired, this person is likely to come from a district.

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

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

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

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

## 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:**

Ginger Elliott-Teague

**Title:**

Director of Data Analysis

**Email:**

ginger.elliott-teague@sde.ok.gov

**Phone:**

405-521-4871

**Submitted on:**

04/28/22 3:49:58 PM

# ED Attachments

  

1. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection [↑](#footnote-ref-3)
3. Percentage blurred due to privacy protection [↑](#footnote-ref-4)