**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**

**Oregon**

U.S. Department of Education seal

**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**

The Oregon Department of Education’s (ODE) Office of Enhancing Student Opportunities is responsible for the State’s 197 school districts and 35 Early Intervention/Early Childhood Special Education (EI/ECSE) programs that serve students eligible for IDEA services. The State works collaboratively with districts and programs to support improved academic and functional results for students and youth experiencing disability. During FFY 2020, the State implemented IDEA Part B through a system of coordinated General Supervision activities.  
  
Part B indicator data presented in this Annual Performance Report demonstrate the continued need for the State to improve outcomes for students and youth experiencing disability. As the targets for FFY 2020-2025 demonstrate, the State and stakeholders continue to set ambitious expectations, especially in areas reflecting values of equity and inclusion for students and families.   
  
The following sections present the State’s processes for ensuring IDEA Part B school age general supervision, technical assistance, professional development, stakeholder engagement, and reporting to the public.

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

The State continued to be impacted by COVID-19 in the 2020-2021 school year. For indicators that require calculating slippage, this was not possible when data was missing from the 2019-2020 school year. Affected indicators are noted in this report.

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

197

**General Supervision System:**

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

The State works collaboratively with 197 school districts, as well as nine contractors that implement 35 Early Intervention/Early Childhood Special Education (EI/ECSE) county programs on comprehensive data collection and analysis, performance reporting, improvement planning, implementation, and progress reporting.  
  
The State’s general supervision system is coordinated by the Office of Enhancing Student Opportunities. Within this Office are data, monitoring, and legal components designed to improve results while identifying noncompliance. The general supervision system components are organized as follows:  
System Performance Review & Improvement (SPR&I): All school districts and EI/ECSE programs in the State are required to participate in the ODE System Performance Review and Improvement (SPR&I) application of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Districts and programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by the State. Individual child procedural compliance data is collected by districts and programs and submitted to the State electronically through the SPR&I database. The SPR&I system provides the State with the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR § 300.600-609.  
  
Complaints and dispute resolution: While the State oversees complaints, due process hearings, mediations, and other alternative dispute resolution activities as part of its general supervision responsibilities, only complaints and due process hearings result in findings of noncompliance.  
  
The State uses independent contractors to conduct mediations and complaint investigations, with support, coordination, and additional assistance by the State’s special education legal specialist. The State provides training and oversight for these complaint contractors. When a complaint final order identifies noncompliance and orders corrective action, State staff work with district and program staff to ensure completion of corrective action within required timelines. The State uses the same complaint resolution system and complaint contractors for Part B and Part C.  
  
The State has a one-tier due process hearing system. All special education due process hearings are conducted by Office of Administrative Hearings (OAH) administrative law judges. OAH and the State have trained OAH administrative law judges to conduct special education hearings. When a due process hearing final order identifies noncompliance and orders corrective action, State staff work with district and program staff to ensure completion of corrective action within required timelines. The State uses the same due process hearing system and complaint contractors for Part B and Part C.

**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.**

The State provides technical assistance (TA) to the school districts in several ways. An assigned Education Specialist provides technical assistance on a range of topics as requested by the district. TA to districts and programs includes the following: advice by experts; assistance in identifying and implementing professional development, instructional strategies or methods of instruction that are based on scientifically based instruction and using experienced program coordinators and specialists to provide advice, technical assistance, and support; and collaboration with institutions of higher education, educational service agencies, national centers of technical assistance, and private TA providers.  
  
During FFY 2020, the State provided web-based training on data collection, compliance and performance issues as well as trainings for new district and program participants as part of the SPR&I mechanism.

**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.**

The State has several systems in place to provide professional development to its 197 school districts. The State continues to work to braid multiple federal programs to improve outcomes for students who systems have historically and currently marginalized, including students experiencing disability.  
  
For example, the State allocates IDEA discretionary funds and State Personnel Development Grant (SPDG) funds to offer targeted professional development focusing on the implementation of evidence based practices for students experiencing disability. The ORTIi (Oregon Response to Instruction and Intervention) project continues to provide coaching support to district teams working to implement a multi-tiered system of supports (MTSS) for academics in elementary and middle schools. Through the SPDG, the SWIFT Education Center supports a network of regional MTSS coaches working with districts to implement an MTSS. During FFY 2020, the SWIFT Center facilitated a leadership academy for administrators to grow capacity in areas of inclusive and equitable school practices.  
  
Additionally, the State maintains relationships with a number of partners working directly with districts, students, and families to deliver professional learning in local contexts. The State contracts with FACT Oregon to provide workshops each year for families in both English and Spanish. Topics include procedural safeguards, navigating the IEP or IFSP, and response to intervention practices. The Statewide Transition Technical Assistance Network (TTAN) supports districts with secondary and post-secondary students experiencing disabilities. The TTAN includes professional development, technical assistance, and provision or resources for teachers, administrators, and other educational service providers regarding transition-related curricula/instructional approaches, outcome-based transition planning approaches, and facilitating interagency teams.  
  
The State Advisory Council for Special Education (SACSE) brings together a variety of partners to provide a channel for information to be shared among programs and stakeholders. SACSE membership includes individuals experiencing disability, family members of students experiencing disability, representatives from higher education, state and local officials, administrators, and private school representatives.  
  
The State coordinates with the Coalition of Oregon School Administrators to develop and offer professional learning for district special education administrative teams on a wide variety of topics. Engagement mechanisms include conferences, virtual events, and individual supports with Agency staff. The Office of Enhancing Student Opportunities provided leadership for a multi-day event focusing on topics in special education leadership during October 2021.   
  
During this reporting period, the State also continued offering monthly support calls for new special education directors, providing a foundation for standards of practice statewide.

**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).**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

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

YES

**Number of Parent Members:**

88

**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.**

Parents and family members accessed a number of resources and participatory activities to provide input on the State’s targets and the SPP/APR. The State’s virtual engagement sessions allowed collaboration among stakeholders and State staff to analyze data, set targets, and develop improvement strategies. Parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents and families from the State community reviewed data and evaluated options for targets in small groups hosted by program staff who work directly with districts on special education issues. The State provided information in multiple formats and provided information prior to engagement sessions, allowing for individual learning styles and language translation. The State organized the content of engagement sessions by essential questions, helping demystify the data and allowing for holistic conversation about topics that matter to parents and families. By presenting indicator data and target setting options grouped by essential question, the State was able to provide an informational foundation from which to discuss improvement ideas for related indicators.

**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.**

The State conducted external facing activities and took steps toward refining internal processes that will promote better engagement with diverse groups of parents and families. The State SSIP/SPDG coordinators provided professional learning to the staff of parent organization on MTSS/RTI/SLD identification. This grows capacity because parent training center staff need to understand MTSS and the associated role in SLD identification and culturally relevant pre-referral processes both to help families with their individual students and to clarify conceptions based on faulty implementation.  
  
To specifically address the needs of the State’s Spanish-speaking families, the strong relationship staff have cultivated with the State parent organization allowed for using a rapid design process to provide all target setting materials in Spanish.   
  
The State refined plans for collaborating with SACSE throughout the next reporting period.   
  
Internally, the State recognizes the need for continued growth in engagement practices, and that current practices reflect white dominant culture. Specifically, the State is committed to increasing the capacity of diverse communities to partner in identifying and implementing promising practices. An internal team formed to develop standard operating procedures on engagement, identified a schema of engagement to use, and continues to strategize how to empower local and community organizations and families in the engagement process.

**Soliciting Public Input:**

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

The State used a set of indicator dashboards to share information and collect information from stakeholders. A dashboard for each indicator was created to serve as an ongoing communication mechanism, sharing data, activities, target options, and collecting stakeholder input on targets and ideas for improvement strategies. These dashboards were published in November 2021, and the State will use them as an ongoing communication mechanism. The State began collecting survey input from the community in November 2021 and closed the surveys in January 2021. The State also held three virtual engagement sessions during December 2021 open to the entire State community, and targeted sessions specific to individual stakeholder groups throughout November 2021-January 2022.

**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.**

The State established the SPP/APR website (https://www.oregon.gov/ode/reports-and-data/SpEdReports/Pages/spp2020-25.aspx) and indicator dashboards as a communication mechanism for making results available to the public.

**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 produces At-A-Glance Special Education Profiles for each of the 197 school districts and 35 Early Intervention/Early Childhood Special Education (EI/ECSE) county programs. An additional EI/ECSE profile is produced for the Confederated Tribes of Warm Springs and a combined report card for Sherman, Gilliam, and Wheeler counties. These report cards display the indicators on the Annual Performance Report that are required for public reporting.   
  
The State reports on Indicators B6, B7, B8, and B12 to the public on the EI/ECSE profiles. The State requires that districts distribute the profiles to all parents of students with IFSPs or IEPs. At-A-Glance Special Education Profiles are released to the public within 120 days of the APR submission to the Office of Special Education Programs (OSEP).   
  
The At-A-Glance Special Education Profiles are available alongside the accountability reports required through ESSA for each LEA: https://www.ode.state.or.us/data/reportcard/ReportList.aspx. Additional information about the At-A-Glance Special Education Profiles (e.g., technical assistance documents) is available at: https://www.oregon.gov/ode/schools-and-districts/reportcards/SpEdReportCards/Pages/default.aspx  
  
The State’s SPP is posted at: https://www.oregon.gov/ode/reports-and-data/SpEdReports/Pages/State-Performance-Plan-and-Annual-Performance-Report-for-Special-Education.aspx.

## Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

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

Technical Assistance Sources from which Oregon received assistance:  
National Center for Systemic Improvement (NCSI)  
West Ed  
IDEA Data Center (IDC)  
Center for IDEA Fiscal Reporting (CIFR)  
Early Childhood Technical Assistance Center (ECTA)  
Center for IDEA Early Childhood Data Systems (DaSy)   
CEEDAR (Collaboration for Effective Educator Development, Accountability, and Reform)  
  
As a result of the partnerships with the above organizations, the State took a number of steps toward improving results for children and youth experiencing disability. To grow staff capacity at the SEA and provide the conditions for better services to districts, West Ed supported the State in bringing increased coherence to internal processes. The Agency created a handbook for school age general supervision, providing process transparency and consistency of service delivery among SEA staff to LEAs and ESDs. The State also refined the differentiated monitoring and support system and calculation of LEA annual determinations to better reflect goals of results driven accountability. The SEA process for verifying LEA correction of non-compliance within the file review process is more robust as a result of collaboration with various technical assistance sources. The State continues to partner with these organizations as work continues on providing differentiated supports to districts within an integrated landscape of state and federal programs.

## Intro - OSEP Response

The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2021 determination letter informed the State that it must report with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

## 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 | 75.37% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 75.00% | 78.00% | 81.00% | 84.00% | 86.00% |
| Data | 52.74% | 55.50% | 58.81% | 60.57% | 63.4%[[2]](#footnote-3) |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target >= | 75.37% | 80.00% | 81.00% | 82.00% | 83.00% | 84.00% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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) | 3,917 |
| 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) | 452 |
| 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) | 159 |
| 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) | 669 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,917 | 5,197 | 63.4%[[3]](#footnote-4) | 75.37% | 75.37% | 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.**

The State offers two different regular diplomas available to K-12 students: the regular Oregon Diploma and a modified version of the Oregon Diploma. The requirements for a student to earn either the regular or modified Oregon Diploma are the same for all students, regardless of whether they receive special education support through an IEP.  
  
Graduation requirements for the regular Oregon Diploma are comprised of three distinct components: (1) High Academic Expectations, (2) Essential Skills, and (3) Personalized Learning. A student can demonstrate that they have met the requirement for high academic expectations through completion of at least 24 credits, with specific requirements for different subject areas. Students are also required to demonstrate proficiency in the Essential Skills of reading, writing, and math. Proficiency is demonstrated in a number of ways, including through statewide-standardized assessments or through locally determined measures. Students are expected to personalize their learning pathway through the development and implementation of an education plan and education profile. Personalized Learning requirements also include career-related learning experiences and the ability and opportunity for students to apply and extend their knowledge in skills in ways that help them pursue their post-school goals.  
  
The Modified Oregon Diploma is earned by students who have demonstrated an inability to meet the full set of academic content standards required for the regular Oregon Diploma, even with reasonable accommodations. To earn a Modified Oregon Diploma, students are required to earn 24 credits in courses modified per student need, complete the Personalized Learning Requirements, and demonstrate proficiency in the required Essential Skills. To be eligible for the Modified Diploma, a student must have a documented history of an inability to maintain grade level achievement due to significant learning and instructional barriers or a documented history of a medical condition that creates a barrier to achievement. These graduation requirements apply to all students, including those students with IEPs.

**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)**

This is a new baseline year for the State to set targets for Indicator B1 as a new calculation method was utilized. The State now uses the same data as used for reporting to the Department of Education under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009. Previously, the State used the four-year adjusted cohort graduation rate required under the ESEA.  
   
Both the COVID-19 pandemic and devastating wildfires within the State of Oregon likely had impact on the outcome data for this indicator for the FFY 2020 SPP/APR report. Most districts closed for a short period of time and then reopened and/or transitioned to virtual instruction and communication. Virtual instruction was new for most students including students experiencing disabilities. Managing the virtual world was difficult for many students experiencing disabilities because they had to learn a variety of software and meeting platforms, manipulative equipment, and learn how to communicate with others virtually rather than through person-to-person direct contact methods. These could have affected students’ ability to meet credit requirements for graduation, thus lowering the overall graduation rate.

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

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2020 | 12.87% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 3.40% | 3.30% | 3.20% | 3.10% | 3.10% |
| Data | 5.79% | 5.65% | 5.00% | 4.86% | 4.70% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 12.87% | 12.52% | 12.17% | 11.82% | 11.47% | 11.12% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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) | 3,917 |
| 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) | 452 |
| 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) | 159 |
| 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) | 669 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 669 | 5,197 | 4.70% | 12.87% | 12.87% | N/A | N/A |

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

According to EDFacts (file spec FS009; Data Group 85), the definition of dropouts, which the State is using, includes students that were enrolled at the start of the reporting period but were not enrolled at the end of the reporting period and did not exit special education through any of the other means. This includes dropouts, runaways, GED recipients (in cases where students are required to drop out of the secondary educational program in order to pursue the GED certificate), expulsions, status unknown, students who moved but are not known to be continuing in another educational program, and others that exit from special education.

**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)**

This is a new baseline year for the State to set targets for Indicator B2 as a new calculation method was utilized. The State now uses the same data as used for reporting to the Department of Education under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009. Previously, the State used the four-year adjusted cohort graduation rate required under the ESEA.  
  
Both the COVID-19 pandemic and devastating wildfires within the State of Oregon likely had impact on the data for this indicator for the FFY 2020 SPP/APR report. Most districts closed for a short period of time and reopened and/or transitioned to virtual instruction and communication. Virtual instruction was new for most students, including students experiencing disability. Managing the virtual world was difficult for many students experiencing disabilities because they had to learn a variety of software and meeting platforms, manipulative equipment, and learn how to communicate with others virtually rather than through person-to-person direct contact methods. In addition, the virtual platform most likely effected some students’ “connection” with the school. These combined difficulties may have caused some students, particularly students experiencing disability, to become frustrated or overwhelmed and thus drop out of school.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.  
  
The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 2 - Required Actions

# Indicator 3A: Participation for Children with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Participation rate for children with IEPs.

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

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

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

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

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

## 3A - Indicator Data

**Historical Data:**

| **Subject** | **Group** | **Group Name** | **Baseline Year** | **Baseline Data** |
| --- | --- | --- | --- | --- |
| Reading | A | Grade 4 | 2020 | 3.34% |
| Reading | B | Grade 8 | 2020 | 3.54% |
| Reading | C | Grade HS | 2020 | 11.11% |
| Math | A | Grade 4 | 2020 | 32.88% |
| Math | B | Grade 8 | 2020 | 23.96% |
| Math | C | Grade HS | 2020 | 10.92% |

**Targets**

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

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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\* | 6,933 | 6,867 | 5,793 |
| b. Children with IEPs in regular assessment with no accommodations | 142 | 130 | 476 |
| c. Children with IEPs in regular assessment with accommodations | 63 | 80 | 92 |
| d. Children with IEPs in alternate assessment against alternate standards | 27 | 33 | 76 |

**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\* | 6,935 | 6,865 | 5,795 |
| b. Children with IEPs in regular assessment with no accommodations | 1,543 | 980 | 474 |
| c. Children with IEPs in regular assessment with accommodations | 574 | 553 | 84 |
| d. Children with IEPs in alternate assessment against alternate standards | 163 | 112 | 75 |

\*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 | 232 | 6,933 |  | 95.00% | 3.35% | N/A | N/A |
| **B** | Grade 8 | 243 | 6,867 |  | 95.00% | 3.54% | N/A | N/A |
| **C** | Grade HS | 644 | 5,793 |  | 95.00% | 11.12% | 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 | 2,280 | 6,935 |  | 95.00% | 32.88% | N/A | N/A |
| **B** | Grade 8 | 1,645 | 6,865 |  | 95.00% | 23.96% | N/A | N/A |
| **C** | Grade HS | 633 | 5,795 |  | 95.00% | 10.92% | 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.**

Statewide assessment results are available here https://www.oregon.gov/ode/educator-resources/assessment/Pages/Assessment-Results.aspx

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

COVID-19 impact and how the State addressed it:  
USED approval of Oregon’s waiver request to scale back standardized tests for 2020-21: https://oese.ed.gov/files/2021/04/OR-assessment-response-letter2.pdf.  
This Department public webpage at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Pages/Adapted-At-A-Glance-1920.aspx includes documentation that the 2019-2020 Statewide Assessment was suspended.  
The Statewide Assessment Technical manual also specifies that it was suspended. See manual at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Documents/Adapted\_At-A-Glance\_Technical\_Manual\_1920.pdf .   
  
Changes in baseline for B3a, b, c, and d were derived per a review and analysis of the applicable participation, performance, and gap data over the last five years.  
  
The State recognizes a significant disparity between FFY 2020 data and FFY 2020 targets, and attributes that discrepancy to the impact of the COVID-19 pandemic and the approved waiver of statewide assessment requirements. In consultation with stakeholders, the State has set ambitious targets that reflect desired participation rates that should be achievable given Oregon's pre-COVID-19 historical data.

## 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.  
  
The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.  
  
The State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities participating in regular assessments, and the number of those children who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

## 3A - Required Actions

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

# 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 | \*[[5]](#footnote-6)1 |
| Reading | B | Grade 8 | 2020 | \*[[6]](#footnote-7)1 |
| Reading | C | Grade HS | 2020 | \*[[7]](#footnote-8)1 |
| Math | A | Grade 4 | 2020 | \*[[8]](#footnote-9)1 |
| Math | B | Grade 8 | 2020 | \*[[9]](#footnote-10)1 |
| Math | C | Grade HS | 2020 | \*[[10]](#footnote-11)1 |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | \*[[11]](#footnote-12)1 | 26.86% | 26.90% | 26.93% | 26.97% | 27.00% |
| Reading | B >= | Grade 8 | \*[[12]](#footnote-13)1 | 15.52% | 15.63% | 15.73% | 15.84% | 15.94% |
| Reading | C >= | Grade HS | \*[[13]](#footnote-14)1 | 26.12% | 26.83% | 27.53% | 28.24% | 28.94% |
| Math | A >= | Grade 4 | \*[[14]](#footnote-15)1 | 19.71% | 19.91% | 20.10% | 20.29% | 20.48% |
| Math | B >= | Grade 8 | \*[[15]](#footnote-16)1 | 9.18% | 9.47% | 9.75% | 10.04% | 10.32% |
| Math | C >= | Grade HS | \*[[16]](#footnote-17)1 | 5.58% | 5.85% | 6.12% | 6.39% | 6.65% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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 | 205 | 210 | 568 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 49 | 25 | 117 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 6 | 7 | 19 |

**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 | 2,117 | 1,533 | 558 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 269 | 64 | 18 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 23 | 20 | \*[[17]](#footnote-18)1 |

**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 | 55 | 205 |  | \*[[18]](#footnote-19)1 | 26.83% | N/A | N/A |
| **B** | Grade 8 | 32 | 210 |  | \*[[19]](#footnote-20)1 | 15.24% | N/A | N/A |
| **C** | Grade HS | 136 | 568 |  | \*[[20]](#footnote-21)1 | 23.94% | 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 | 292 | 2,117 |  | \*[[21]](#footnote-22)1 | 13.79% | N/A | N/A |
| **B** | Grade 8 | 84 | 1,533 |  | \*[[22]](#footnote-23)1 | 5.48% | N/A | N/A |
| **C** | Grade HS | \*[[23]](#footnote-24)1 | 558 |  | \*[[24]](#footnote-25)1 | \*[[25]](#footnote-26)1 | 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.**

Statewide assessment results ae available here https://www.oregon.gov/ode/educator-resources/assessment/Pages/Assessment-Results.aspx

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

COVID-19 impact and how the State addressed it:  
USED approval of Oregon’s waiver request to scale back standardized tests for 2020-21: https://oese.ed.gov/files/2021/04/OR-assessment-response-letter2.pdf.  
This Department public webpage at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Pages/Adapted-At-A-Glance-1920.aspx includes documentation that the 2019-2020 Statewide Assessment was suspended.  
The Statewide Assessment Technical manual also specifies that it was suspended. See manual at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Documents/Adapted\_At-A-Glance\_Technical\_Manual\_1920.pdf .   
  
Changes in baseline for B3a, b, c, and d were derived per a review and analysis of the applicable participation, performance, and gap data over the last five years.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

The State has revised the baseline for this indicator, using data from FFY2020, and OSEP accepts that revision.  
  
The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.  
  
The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.  
  
The State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities, the performance results of children with disabilities on regular assessments, and alternate assessments based on alternate academic achievement standards, at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

## 3B - Required Actions

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

# 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 | 22.22% |
| Reading | B | Grade 8 | 2020 | 48.48% |
| Reading | C | Grade HS | 2020 | 53.95% |
| Math | A | Grade 4 | 2020 | 22.09% |
| Math | B | Grade 8 | 2020 | 31.25% |
| Math | C | Grade HS | 2020 | 34.67% |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A >= | Grade 4 | 22.22% | 56.04% | 63.17% | 70.30% | 77.43% | 84.55% |
| Reading | B >= | Grade 8 | 48.48% | 48.15% | 54.79% | 61.42% | 68.06% | 74.70% |
| Reading | C >= | Grade HS | 53.95% | 57.10% | 60.38% | 63.65% | 66.92% | 70.19% |
| Math | A >= | Grade 4 | 22.09% | 37.35% | 44.12% | 50.89% | 57.66% | 64.43% |
| Math | B >= | Grade 8 | 31.25% | 40.89% | 44.13% | 47.37% | 50.60% | 53.84% |
| Math | C >= | Grade HS | 34.67% | 44.72% | 46.26% | 47.79% | 49.32% | 50.86% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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 | 27 | 33 | 76 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 6 | 16 | 41 |

**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 | 163 | 112 | 75 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 36 | 35 | 26 |

**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 | 6 | 27 |  | 22.22% | 22.22% | N/A | N/A |
| **B** | Grade 8 | 16 | 33 |  | 48.48% | 48.48% | N/A | N/A |
| **C** | Grade HS | 41 | 76 |  | 53.95% | 53.95% | 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 | 36 | 163 |  | 22.09% | 22.09% | N/A | N/A |
| **B** | Grade 8 | 35 | 112 |  | 31.25% | 31.25% | N/A | N/A |
| **C** | Grade HS | 26 | 75 |  | 34.67% | 34.67% | 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.**

Statewide assessment results are available here https://www.oregon.gov/ode/educator-resources/assessment/Pages/Assessment-Results.aspx

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

COVID-19 impact and how the State addressed it:  
USED approval of Oregon’s waiver request to scale back standardized tests for 2020-21: https://oese.ed.gov/files/2021/04/OR-assessment-response-letter2.pdf.  
This Department public webpage at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Pages/Adapted-At-A-Glance-1920.aspx includes documentation that the 2019-2020 Statewide Assessment was suspended.  
The Statewide Assessment Technical manual also specifies that it was suspended. See manual at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Documents/Adapted\_At-A-Glance\_Technical\_Manual\_1920.pdf .   
  
Changes in baseline for B3a, b, c, and d were derived per a review and analysis of the applicable participation, performance, and gap data over the last five years.

## 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 provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.  
  
The State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities, the performance results of children with disabilities on alternate assessments based on alternate academic achievement standards, at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

## 3C - Required Actions

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

# 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 | 25.91 |
| Reading | B | Grade 8 | 2020 | 34.36 |
| Reading | C | Grade HS | 2020 | 35.87 |
| Math | A | Grade 4 | 2020 | 19.18 |
| Math | B | Grade 8 | 2020 | 20.03 |
| Math | C | Grade HS | 2020 | 20.76 |

**Targets**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Reading | A <= | Grade 4 | 25.91 | 23.72 | 23.44 | 23.11 | 22.81 | 22.50 |
| Reading | B <= | Grade 8 | 34.36 | 27.88 | 26.94 | 26.00 | 25.06 | 24.13 |
| Reading | C <= | Grade HS | 35.87 | 28.54 | 28.04 | 27.55 | 27.06 | 25.56 |
| Math | A <= | Grade 4 | 19.18 | 18.18 | 17.18 | 16.18 | 15.18 | 14.18 |
| Math | B <= | Grade 8 | 20.03 | 19.00 | 18.00 | 17.00 | 16.00 | 15.00 |
| Math | C <= | Grade HS | 20.76 | 19.76 | 18.76 | 17.76 | 16.76 | 15.76 |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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 | 1,845 | 1,377 | 4,795 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 205 | 210 | 568 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 964 | 676 | 2,846 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 9 | 7 | 24 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 49 | 25 | 117 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 6 | 7 | 19 |

**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 | 15,551 | 12,165 | 4,808 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 2,117 | 1,533 | 558 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 5,095 | 3,081 | 1,159 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 32 | 22 | \*[[26]](#footnote-27)1 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 269 | 64 | 18 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 23 | 20 | \*[[27]](#footnote-28)1 |

**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 | 26.83% | 52.74% |  | 25.91 | 25.91 | N/A | N/A |
| **B** | Grade 8 | 15.24% | 49.60% |  | 34.36 | 34.36 | N/A | N/A |
| **C** | Grade HS | 23.94% | 59.85% |  | 35.87 | 35.91 | 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 | 13.79% | 32.97% |  | 19.18 | 19.18 | N/A | N/A |
| **B** | Grade 8 | 5.48% | 25.51% |  | 20.03 | 20.03 | N/A | N/A |
| **C** | Grade HS | \*[[28]](#footnote-29)1 | \*[[29]](#footnote-30)1 |  | 20.76 | 20.76 | N/A | N/A |

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

COVID-19 impact and how the State addressed it:  
USED approval of Oregon’s waiver request to scale back standardized tests for 2020-21: https://oese.ed.gov/files/2021/04/OR-assessment-response-letter2.pdf.  
This Department public webpage at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Pages/Adapted-At-A-Glance-1920.aspx includes documentation that the 2019-2020 Statewide Assessment was suspended.  
The Statewide Assessment Technical manual also specifies that it was suspended. See manual at this link: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Documents/Adapted\_At-A-Glance\_Technical\_Manual\_1920.pdf .   
  
Changes in baseline for B3a, b, c, and d were derived per a review and analysis of the applicable participation, performance, and gap data over the last five years.

## 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 provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.  
  
The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 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 | 62.96% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target <= | 6.70% | 68.65% | 68.15% | 67.65% | 62.00% |
| Data | 8.63% | 62.96% | 66.67% | 53.13% | 67.74% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target <= | 62.00% | 62.00% | 61.50% | 61.25% | 61.00% | 60.50% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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.**

182

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 12 | 15 | 67.74% | 62.00% | 80.00% | Did not meet target | Slippage |

**Provide reasons for slippage, if applicable**

Multiple reasons contributed to slippage in this category. The number of LEAs with a significant discrepancy, as defined by the State, decreased overall in FFY 2020 from 21 LEAs down to 12 LEAs. There was an increase in the number of LEAs excluded from the State’s calculation because they did not meet the minimum n and cell size. 182 LEAs were excluded for FFY 2020, as compared to 166 LEAs for FFY 2019. Although slippage occurred for this indicator, nine less LEAs were flagged for B4A, as defined by the State, in comparison to last year. The State has a low suspension/expulsion incidence rate among students receiving special education services and therefore, slight changes will cause wide differences in the resulting data and year-to-year variation in the number and frequency of LEAs that are flagged, as these are small numbers to start.   
  
During statewide training and when providing guidance to LEAs regarding discipline, the State emphasized the importance of accurately reporting all out-of-school suspensions (e.g., assuring documentation of a removal event in the event that parents/guardians are asked to pick up early for behavioral infractions). Specifically, LEAs have been better trained to formally document all removals from classrooms and/or schools, regardless of the mode of instructional delivery. This additional training and guidance resulted in more accurate reporting of disciplinary exclusions.   
  
Finally, LEAs described increased challenges in supporting the social, emotional, behavioral and mental health needs of students experiencing disabilities, as well as those students experiencing disabilities who have been impacted by trauma, grief, and the unknown during the ongoing pandemic. LEAs vary in effectively identifying the need for and support of the appropriate interventions for students, beginning at the universal school-wide Tier I level of support. As Tier I serves as the universal foundation upon which all other tiers are built, Tier II and III supports are consequently impacted. The State continues to work with LEAs to support: (a) team structures, data analysis, application of consistent interventions/supports and program evaluation; and (b) the delivery of meaningful professional development to ensure instructional alternatives to exclusionary discipline that include positive behavior interventions and supports, healing centered/trauma-informed, racial equity-centered, strengths-based, social emotional learning practices that are deployed systemically with effectiveness.

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

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

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

The State defines significant discrepancy as a rate of suspension/expulsion for greater than 10 days based on a rate ratio greater than 2.0 and more than 3 IDEA-eligible students with greater than 10 days suspension/expulsion. Only LEAs that meet both of these criteria are flagged for significant discrepancy. Of Oregon’s 197 LEAs, 15 met the minimum n-size to be included in this calculation, as defined by the State. As a result of the minimum n-size requirement, 182 Oregon LEAs were excluded from the calculation.  
  
The State compares the rates of suspensions and expulsions for children with IEPs to children without IEPs within the LEA. The State collects data from all LEAs through the discipline incidents collection.  
  
The standard operating procedures for this indicator include:  
• Preparing and disseminating to all districts a discipline report for students with and without disabilities.  
• Identifying districts that exceed the threshold with a significant discrepancy, as defined by the State.

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

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

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

The following procedure was utilized by the State to review LEA policies, procedures, or practices:  
  
Using an interview format, a team from the State connected with each flagged LEA to review special education programs and IDEA compliance data. The State engaged in a conversational protocol to honor LEA strengths, identify and verify correction of non-compliance for data reported in the FFY 2020 State Performance Plan/Annual Performance Report (SPP/APR), and support LEA efforts to improve equity, inclusion, and results for all students, especially those experiencing disability.   
• Prior to the scheduled interview with the State, LEAs reviewed and analyzed data, policies, procedures, and practices related to flagged areas.   
• During the interviews, the State and the LEA worked together through a protocol related to these flagged areas and documented resolution or a plan to resolve any identified issue(s).  
• After those processes, the State used the interview information to identify/verify correction of non-compliance.  
  
The State engaged in interviews with the 12 LEAs identified with significant discrepancy as defined by the State based on 2019-2020 data. Of the State’s 197 LEAs, 15 met the minimum n-size to be included in this calculation, as defined by the State. As a result of the minimum n-size requirement, 182 Oregon LEAs were excluded from the calculation. The interviews included a review of each LEA’s policies, procedures, and practices related to 3 main areas:  
1. The development and implementation of IEPs;  
2. The use of positive behavioral interventions and supports;  
3. The established procedural safeguards, including the manifestation determination review process, within each LEA.  
  
Based on these interviews with the 12 LEAs, the State has determined that they are compliant with the Act.   
  
The State completed the review required by 34 CFR §300.170(b) for each district identified with a significant discrepancy. As a result of these reviews, the State determined that there was no noncompliance with Part B requirements in any of the districts identified with a significant discrepancy.

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** |
| --- | --- | --- | --- |
| 21 | 21 | 0 | 0 |

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

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

The State conducted follow-up interviews with the 21 LEAs identified with significant discrepancy as defined by the State using 2018-2019 data. Part of the State’s process is to conduct the follow-up interviews to determine compliance status. The State conducted follow-up interviews with the 21 LEAs identified with significant discrepancy, as defined by the State in Indicator 4A to determine compliance status and, if necessary, verify correction of noncompliance.   
  
The interviews included a review of each LEA’s policies, procedures, and practices related to 3 main areas:  
1. The development and implementation of IEPs;  
2. The use of positive behavioral interventions and supports;  
3. Procedural safeguards, including the manifestation determination review process established within each LEA.  
  
Based on these interviews with the 21 LEAs, the State was able to finalize identification and verification of correction of noncompliance. In discussing the data with the LEAs, the State has determined that they are compliant with the Act and correcting implementing the regulatory requirements. The State has determined that the flagging for this indicator was not indicative of noncompliance for the 21 identified LEAs.  
  
Additionally, All LEAs flagged for Indicator B4 are assigned student files by the State within the Procedural Compliance Review (PCR) system that must be reviewed specific to students with discipline incidents to assure individual cases of non-compliance were corrected. LEAs with noncompliance found during the review process also completed additional reviews of further student discipline files to assure any issues of non-compliance were not systemic in nature. At this stage, if any of the additional files reviewed were to be found noncompliant, the LEAs must complete a systemic correction plan. LEAs flagged for noncompliance were required to articulate a plan for correcting individual cases of noncompliance, as well as a review subsequent data to show that the LEA is correcting implementing the regulatory requirements pursuant to 09-02.  
  
The State completed the review required by 34 CFR §300.170(b) for each district identified with a significant discrepancy. As a result of these reviews, the State determined that there was no noncompliance with Part B requirements in any of the districts identified with a significant discrepancy.

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

All LEAs flagged for Indicator B4 are assigned additional student files by the State within the Procedural Compliance Review (PCR) system that must be reviewed specific to students with discipline incidents to assure individual cases of non-compliance were corrected. LEAs with noncompliance found during the review process also completed additional reviews of further student discipline files to assure any issues of non-compliance were not systemic in nature. At this stage, if any of the additional files reviewed were to be found noncompliant, the LEAs must complete a systemic correction plan. LEAs flagged for noncompliance were required to articulate a plan for correcting individual cases of noncompliance, as well as the process by which they will review subsequent data to ensure there are no other individual nor systemic issues of noncompliance.  
  
The State verified that individual cases of noncompliance had been corrected through the file review system.

**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

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

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

The State conducted follow-up interviews with the 21 LEAs identified with significant discrepancy as defined by the State using 2018-2019 data. Part of the State’s process is to conduct the follow-up interviews to determine compliance status. The State conducted follow-up interviews with the 21 LEAs identified with significant discrepancy, as defined by the State in Indicator 4A to determine compliance status and, if necessary, verify correction of noncompliance.   
  
The interviews included a review of each LEA’s policies, procedures, and practices related to 3 main areas:  
1. The development and implementation of IEPs;  
2. The use of positive behavioral interventions and supports;  
3. Procedural safeguards, including the manifestation determination review process established within each LEA.  
  
Based on these interviews with the 21 LEAs, the State was able to finalize identification and verification of correction of noncompliance. In discussing the data with the LEAs, the State has determined that they are compliant with the Act and correcting implementing the regulatory requirements. The State has determined that the flagging for this indicator was not indicative of noncompliance for the 21 identified LEAs.  
  
Additionally, All LEAs flagged for Indicator B4 are assigned student files by the State within the Procedural Compliance Review (PCR) system that must be reviewed specific to students with discipline incidents to assure individual cases of non-compliance were corrected. LEAs with noncompliance found during the review process also completed additional reviews of further student discipline files to assure any issues of non-compliance were not systemic in nature. At this stage, if any of the additional files reviewed were to be found noncompliant, the LEAs must complete a systemic correction plan. LEAs flagged for noncompliance were required to articulate a plan for correcting individual cases of noncompliance, as well as a review subsequent data to show that the LEA is correcting implementing the regulatory requirements pursuant to 09-02.  
  
The State completed the review required by 34 CFR §300.170(b) for each district identified with a significant discrepancy. As a result of these reviews, the State determined that there was no noncompliance with Part B requirements in any of the districts identified with a significant discrepancy.  
  
All LEAs flagged for Indicator B4 are assigned additional student files by the State within the Procedural Compliance Review (PCR) system that must be reviewed specific to students with discipline incidents to assure individual cases of non-compliance were corrected. LEAs with noncompliance found during the review process also completed additional reviews of further student discipline files to assure any issues of non-compliance were not systemic in nature. At this stage, if any of the additional files reviewed were to be found noncompliant, the LEAs must complete a systemic correction plan. LEAs flagged for noncompliance were required to articulate a plan for correcting individual cases of noncompliance, as well as the process by which they will review subsequent data to ensure there are no other individual nor systemic issues of noncompliance.  
  
The State verified that individual cases of noncompliance had been corrected through the file review system.

## 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 | 5.58% | 0.00% | NVR | NVR | 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.**

189

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 8 | 0 | 8 | 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 State defines significant discrepancy as the rates of expulsions and suspensions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for all children without IEPs in the same LEA and flags LEAs where:  
• The rate ratio analysis shows a value greater than 2.0 in the same race/ethnic category.  
• At least five IDEA eligible students received long-term suspension/expulsions in a specific race/ethnic category.  
  
Only LEAs that meet both of these criteria are flagged by the State for significant discrepancy.

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

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

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

The following procedure was utilized by the State to review LEA policies, procedures, or practices:  
Using an interview format, a team from the State connected with each flagged LEA to review Special Education Programs and IDEA Compliance Data. The State engaged in a conversational protocol to honor LEA strengths, identify and verify correction of non-compliance for data reported in the FFY 2020 State Performance Plan/Annual Performance Report (SPP/APR), and support LEA efforts to improve equity, inclusion, and results for all students, especially those experiencing disability.   
• Prior to the scheduled interview with the State, LEAs reviewed and analyzed data, policies, procedures, and practices related to flagged areas.   
• During the interviews, the State and the LEA worked together through a protocol related to these flagged areas and documented resolution or a plan to resolve any identified issue(s).  
• After those processes, the State used the interview information to identify/verify correction of non-compliance.  
  
The State engaged in interviews with the eight LEAs identified with significant discrepancy as defined by the State based on 2019-2020 data. Of the State's 197 LEAs, 189 were excluded from the calculation because they did not meet the State's minimum n-size. The interviews included a review of each LEA’s policies, procedures, and practices related to three main areas:  
1. The development and implementation of IEPs;  
2. The use of positive behavioral interventions and supports;  
3. The established procedural safeguards, including the manifestation determination review process, within each LEA.  
  
Based on these interviews with the eight LEAs, the State has determined that they are compliant with the Act. The State has determined that the flagging for this indicator was not indicative of noncompliance for the eight identified LEAs.  
  
The State completed the review required by 34 CFR §300.170(b) for each district identified with a significant discrepancy. As a result of these reviews, the State determined that there was no noncompliance with Part B requirements in any of the districts identified with a significant discrepancy.

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** |
| --- | --- | --- | --- |
| 10 | 10 | 0 | 0 |

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

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

The State conducted follow-up interviews with the ten LEAs identified with significant discrepancy as defined by the State using 2018-2019 data. Part of the State’s process is to conduct the follow-up interviews to determine compliance status. The State conducted follow-up interviews with the ten LEAs identified with significant discrepancy as defined by the State in Indicator 4B to determine compliance status and, if necessary, verify correction of noncompliance. Follow-up interviews were completed by April 2, 2021.  
  
The interviews included a review of each LEA’s policies, procedures, and practices related to three main areas:  
1. The development and implementation of IEPs;  
2. The use of positive behavioral interventions and supports;  
3. Procedural safeguards, including the manifestation determination review process established within each LEA.  
  
Based on these interviews with the ten LEAs, the State was able to finalize identification and verification of correction of noncompliance. In discussing the data with the LEAs, the State has determined that they are compliant with the Act and correcting implementing the regulatory requirements. The State has determined that the flagging for this indicator was not indicative of noncompliance for the ten identified LEAs.  
  
Additionally, All LEAs flagged for Indicator B4 are assigned additional student files by the State within the Procedural Compliance Review (PCR) system that must be reviewed specific to students with discipline incidents to assure individual cases of non-compliance were corrected. LEAs with noncompliance found during the review process also completed additional reviews of further student discipline files to assure any issues of non-compliance were not systemic in nature. At this stage, if any of the additional files reviewed were to be found noncompliant, the LEAs must complete a systemic correction plan. LEAs flagged for noncompliance were required to articulate a plan for correcting individual cases of noncompliance, as well as a review subsequent data to show the LEA is correcting implementing the regulatory requirements pursuant to 09-02.  
  
The State completed the review required by 34 CFR §300.170(b) for each district identified with a significant discrepancy. As a result of these reviews, the State determined that there was no noncompliance with Part B requirements in any of the districts identified with a significant discrepancy.

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

All LEAs flagged for Indicator B4 are assigned additional student files by the State within the Procedural Compliance Review (PCR) system that must be reviewed specific to students with discipline incidents to assure individual cases of non-compliance were corrected. LEAs with noncompliance found during the review process also completed additional reviews of further student discipline files to assure any issues of non-compliance were not systemic in nature. At this stage, if any of the additional files reviewed were to be found noncompliant, the LEAs were to complete a systemic correction plan. LEAs flagged for noncompliance were required to articulate a plan for correcting individual cases of noncompliance, as well as the process by which they will review subsequent data to ensure there are no other individual nor systemic issues of noncompliance.  
  
The State verified that individual cases of noncompliance had been corrected through the file review system.

**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 | 2019 | Target >= | 72.00% | 72.00% | 73.00% | 73.00% | 75.00% |
| A | 70.60% | Data | 73.37% | 73.49% | 73.66% | 73.93% | 74.59% |
| B | 2019 | Target <= | 10.70% | 10.70% | 10.60% | 10.60% | 10.60% |
| B | 11.30% | Data | 10.15% | 9.90% | 9.84% | 9.64% | 9.56% |
| C | 2019 | Target <= | 1.80% | 1.80% | 1.80% | 1.80% | 1.80% |
| C | 2.20% | Data | 1.19% | 1.20% | 1.44% | 1.73% | 1.79% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 75.00% | 76.00% | 77.00% | 77.00% | 78.00% | 79.00% |
| Target B <= | 9.25% | 9.00% | 8.70% | 8.40% | 8.00% | 7.80% |
| Target C <= | 1.80% | 1.70% | 1.60% | 1.60% | 1.50% | 1.40% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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 | 79,782 |
| 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 | 60,084 |
| 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 | 7,395 |
| 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 | 1,031 |
| 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 | 43 |
| 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 | 164 |

**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 | 60,084 | 79,782 | 74.59% | 75.00% | 75.31% | Met target | No Slippage |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 7,395 | 79,782 | 9.56% | 9.25% | 9.27% | Did not meet target | No Slippage |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 1,238 | 79,782 | 1.79% | 1.80% | 1.55% | Met target | No Slippage |

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

## 5 - Prior FFY Required Actions

The State did not revise the baseline for this indicator, as required due to the change in the data source. The State must revise its baseline using data from FFY 2019.

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

The State has set FFY 2019 as the baseline year for this indicator.

## 5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.  
  
The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 5 - Required Actions

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Part** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| **A** | Target >= | 35.50% | 35.50% | 36.00% | 36.00% | 36.00% |
| **A** | Data | 39.91% | 45.25% | 45.05% | 44.57% | 48.16% |
| **B** | Target <= | 24.00% | 24.00% | 23.50% | 23.50% | 23.50% |
| **B** | Data | 23.30% | 19.80% | 19.03% | 19.17% | 24.52% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**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** | 2019 | 48.16% |
| **B** | 2019 | 24.52% |
| **C** | 2020 | 19.95% |

**Inclusive Targets – 6A, 6B**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 48.16% | 48.16% | 48.30% | 48.30% | 49.00% | 50.00% |
| Target B <= | 24.52% | 23.50% | 23.00% | 23.00% | 22.00% | 21.00% |

**Inclusive Targets – 6C**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target C <= | 19.95% | 19.95% | 19.70% | 19.70% | 19.20% | 18.70% |

**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 | 2,472 | 3,800 | 986 | 7,258 |
| 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 | 611 | 1,658 | 492 | 2,761 |
| b1. Number of children attending separate special education class | 779 | 996 | 226 | 2,001 |
| b2. Number of children attending separate school | 16 | 10 | 3 | 29 |
| b3. Number of children attending residential facility | 0 | 1 | 0 | 1 |
| c1**.** Numberof children receiving special education and related services in the home | 772 | 565 | 111 | 1,448 |

**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 | 2,761 | 7,258 | 48.16% | 48.16% | 38.04% | Did not meet target | Slippage |
| B. Separate special education class, separate school or residential facility | 2,031 | 7,258 | 24.52% | 24.52% | 27.98% | Did not meet target | Slippage |
| C. Home | 1,448 | 7,258 |  | 19.95% | 19.95% | N/A | N/A |

**Provide reasons for slippage for Group A aged 3 through 5, if applicable**

Slippage in placement and services as per target A was due to the switch from in-person services to virtual/distance learning due to statewide restrictions limiting in-person contact. Additionally, many community preschool sites closed or suspended services during the pandemic. These factors increased the number of children receiving services via distance learning. With the commencement of in person services this year and the State work on inclusive services, the State anticipates an upward trend in placements in regular settings.

**Provide reasons for slippage for Group B aged 3 through 5, if applicable**

The increase in placement and services delivered in separate settings was due to the impacts of Covid-19. There was a significant decrease of children referred to ECSE programs. This decrease caused each placement in a separate setting to contribute a larger percentage to this target. The closure of community preschool sites throughout the state also contributed to the increase of children in these settings or receiving distance learning as community sites disappeared or were closed due to state restrictions to address the pandemic.

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

As per OSEP instructions, the baseline year for targets A and B is FFY 2019. The baseline year for target C is FFY 2020.   
  
COVID-19 had no impact on data completeness, validity, or reliability. Performance was impacted due to the switch from in person services to virtual/distance learning due to statewide restrictions limiting in-person contact. Additionally, many community preschool sites closed or suspended services during the pandemic. With the commencement of in person services this year and the State work on inclusive services, the State anticipates an upward trend in placements in regular settings.

## 6 - Prior FFY Required Actions

The State did not revise the baseline for this indicator, as required due to the change in the data source. The State must revise its baseline using data from FFY 2019.

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

As per OSEP required actions, the State has indicated the baseline year for targets A, and B is FFY 2019 and the baseline year for C is FFY 2020 as this is the first year for the B6C measurement.

## 6 - OSEP Response

The State has revised the baselines for 6A and 6B, using data from FFY 2019 and OSEP accepts those revisions.  
  
The State established baseline for 6C, using data from FFY 2020 and OSEP accepts that baseline.  
  
The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

## 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 | 2015 | Target >= | 75.00% | 76.10% | 76.10% | 76.10% | 76.10% |
| A1 | 75.62% | Data | 75.62% | 76.17% | 79.61% | 77.90% | 77.10% |
| A2 | 2015 | Target >= | 33.00% | 60.50% | 60.50% | 60.50% | 60.50% |
| A2 | 60.20% | Data | 60.20% | 58.53% | 56.21% | 54.69% | 52.12% |
| B1 | 2015 | Target >= | 61.50% | 74.20% | 74.20% | 74.20% | 74.20% |
| B1 | 73.66% | Data | 73.66% | 71.45% | 74.18% | 74.06% | 71.99% |
| B2 | 2015 | Target >= | 24.00% | 58.10% | 58.10% | 58.10% | 58.10% |
| B2 | 57.84% | Data | 57.84% | 55.71% | 54.46% | 52.61% | 49.67% |
| C1 | 2015 | Target >= | 45.50% | 74.10% | 74.10% | 74.10% | 74.10% |
| C1 | 73.63% | Data | 73.63% | 73.40% | 76.35% | 75.15% | 75.70% |
| C2 | 2015 | Target >= | 32.20% | 61.50% | 61.50% | 61.50% | 61.50% |
| C2 | 61.21% | Data | 61.21% | 59.74% | 57.30% | 54.54% | 52.15% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A1 >= | 76.10% | 76.30% | 76.50% | 76.70% | 76.90% | 77.10% |
| Target A2 >= | 60.50% | 60.70% | 60.90% | 61.10% | 61.30% | 62.50% |
| Target B1 >= | 74.20% | 74.40% | 74.60% | 74.80% | 75.00% | 75.20% |
| Target B2 >= | 58.10% | 58.30% | 58.30% | 58.50% | 58.70% | 58.90% |
| Target C1 >= | 74.10% | 74.30% | 74.50% | 74.70% | 74.90% | 75.10% |
| Target C2 >= | 61.50% | 61.70% | 61.90% | 62.10% | 62.30% | 62.50% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**FFY 2020 SPP/APR Data**

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

3,395

**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 | 38 | 1.12% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 493 | 14.52% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,151 | 33.90% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 569 | 16.76% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,144 | 33.70% |

| **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)* | 1,720 | 2,251 | 77.10% | 76.10% | 76.41% | 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)* | 1,713 | 3,395 | 52.12% | 60.50% | 50.46% | Did not meet target | 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 | 52 | 1.53% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 565 | 16.64% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,082 | 31.87% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 407 | 11.99% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,289 | 37.97% |

| **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)* | 1,489 | 2,106 | 71.99% | 74.20% | 70.70% | Did not meet target | Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,696 | 3,395 | 49.67% | 58.10% | 49.96% | Did not meet target | No Slippage |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 30 | 0.88% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 530 | 15.61% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,121 | 33.02% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 519 | 15.29% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,195 | 35.20% |

| **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)* | 1,640 | 2,200 | 75.70% | 74.10% | 74.55% | 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)* | 1,714 | 3,395 | 52.15% | 61.50% | 50.49% | Did not meet target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A2** | The State uses the AEPS I and II as its one statewide tool for determining the B7 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the COVID-19 pandemic, administering an exit AEPS remained very difficult. Short and long-term periods of hybrid and remote learning had a negative impact in the preschool children’s learning and development as well. The annual IFSP AEPS score was used as the exit score for these children who were not available for assessment or some of the exiting children’s data were not available because they were in service for less than a year. All of these factors resulted in depressing the child outcome data for B7: A2. |
| **B1** | The State uses the AEPS I and II as its one statewide tool for determining the B7 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the COVID-19 pandemic, administering an exit AEPS remained very difficult. Short and long-term periods of hybrid and remote learning had a negative impact in the preschool children’s learning and development as well. The annual IFSP AEPS score was used as the exit score for these children who were not available for assessment or some of the exiting children’s data were not available because they were in service for less than a year. All of these factors resulted in depressing the child outcome data for B7: B1 |
| **C2** | The State uses the AEPS I and II as its one statewide tool for determining the B7 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the COVID-19 pandemic, administering an exit AEPS remained very difficult. Short and long-term periods of hybrid and remote learning had a negative impact in the preschool children’s learning and development as well. The annual IFSP AEPS score was used as the exit score for these children who were not available for assessment or some of the exiting children’s data were not available because they were in service for less than a year. All of these factors resulted in depressing the child outcome data for B7: C2 |

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

YES

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

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

NO

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

Beginning in 2008 for all children qualifying for early childhood special education services, all State EI/ECSE programs are required to enter child the Assessment, Evaluation, and Programming System (AEPS) data into the Early Childhood Web (ecWeb) system, starting with all children qualifying for early childhood special education services in May of 2008.   
  
Criteria for defining “comparable to same-aged peers":   
In 2015, using a national AEPS data set from typically developing children, a review team considered 90%, 85%, and 80% percentile cut offs against the national data results to decide the cut off level that best reflected the State’s children in ECSE programs. The review team, State staff, the EI/ECSE Contractors and the EI/ECSE stakeholder group were all asked to analyze the percentile cut offs and determine the cut off level that the State should use for reporting to the ECSE child outcomes. The consensus was to use the 80% cut off level. This most closely represents the children who are eligible for Early Childhood Special Education programs and receive services in Oregon.   
  
Child progress is measured using the following rubric:   
If a child enters with a score below the normal range and stays the same or regresses at the next test administration, the child is categorized as (a) does not improve functioning. If the child makes progress and the ratio of how far below the normal level of development increases between test administrations, the child is categorized as (b) improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers. If the child makes progress but the ratio of how far below the normal level of development decreases between test administrations, the child is categorized as (c) improved functioning to a level nearer to the functioning of same-aged peers, but did not reach it. If a child enters with a score below the normal range and increases to reach or exceed the normal range at the next test administration, the child is categorized as (d) improved functioning sufficient to reach a level comparable to same-aged peers. If a child enters with a score at or above the normal range and maintains their score at or above the normal range at the next test administration, the child is categorized as (e) maintains functioning at or above same age peers.

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

As of 2008, all EI/ECSE programs in the State are required to enter individual child assessment results from the Assessment, Evaluation, and Programming System (AEPS) into the Early Childhood Web (ecWeb). The aggregate results are utilized for reporting on this indicator.

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

COVID-19 had impacts on the collection of the B7 data on several fronts. Since Oregon uses the AEPS I and II as their one tool statewide for the B7 Child outcome Data, conducting much of the services virtually had a minimal impact on the gathering of these data. Performance and validity were not impacted. Completeness was impacted somewhat in that many more families dropped out of services without warning making it impossible to secure an exit AEPS I for the child outcome data.  
  
Regarding the use of the term "IFSP" for early childhood special education, ORS 343.521 and OAR 581-015-2700 (13) delineate the use of an IFSP for children birth to school age with disabilities in Oregon. Additionally, in ODE’s Part B application for federal funds in 2002-2003 ODE explained how it amended OAR 581-015-0970(3) (IFSP content) to include specific Part B requirements. ODE explained that ODE IFSP forms combine the content requirements for IEPs under Part B of IDEA, IFSP’s under Part C of IDEA and IFSP’s under ORS 343.521. This document was approved by OSEP and signed by Gregg Corr. Oregon produced this document during the monitoring visit and it was reviewed by the OSEP monitoring team during their 2010 monitoring visit. Marion Crayton of OSEP is aware of this document and can confirm that OSEP did approve. Due to Covid-19, our office has gone to remote work, and the physical components of the office were rearranged and we were not able to locate the original document at the present time.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.  
  
The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

**Data Source**

State selected data source.

**Measurement**

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

**Instructions**

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

## 8 - Indicator Data

| **Question** | **Yes / No** |
| --- | --- |
| Do you use a separate data collection methodology for preschool children? | YES |
| If yes, will you be providing the data for preschool children separately? | YES |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

Reasons for Part B/School Age slippage: The State suspects slippage may be due to the configuration of districts that were selected this year as part of the sampling plan. The State does not survey each district every year. The State determined that difference in the rates this year compared to last year could be due to different districts surveyed in the sampling plan. While each year’s sample is representative of the State in terms of demographics, one group of districts may be less involved than another group due to the sampling plan. The last time that this group of districts were surveyed (FFY2017), their Indicator 8B rate was 79.43%, comparable to the 78.49% rate obtained this year.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Preschool | 2014 | Target >= | 82.48% | 82.68% | 83.68% | 85.68% | 85.68% |
| Preschool | 82.18% | Data | 81.16% | 86.23% | 79.37% | 84.59% | 88.79% |
| School age | 2014 | Target >= | 76.73% | 77.73% | 78.73% | 81.23% | 81.23% |
| School age | 76.23% | Data | 78.12% | 78.74% | 79.43% | 78.98% | 83.54% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 88.99% | 89.31% | 89.79% | 90.20% | 90.60% | 91.00% |
| Target B >= | 83.56% | 84.45% | 85.34% | 86.22% | 87.11% | 88.00% |

**FFY 2020 SPP/APR Data: Preschool Children Reported Separately**

| **Group** | **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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Preschool | 176 | 197 | 88.79% | 88.99% | 89.34% | Met target | No Slippage |
| School age | 1,244 | 1,585 | 83.54% | 83.56% | 78.49% | Did not meet target | Slippage |

**Provide reasons for School Age slippage, if applicable**

Reasons for Part B/School Age slippage: The State suspects slippage may be due to the configuration of districts that were selected this year as part of the sampling plan. The State does not survey each district every year. The State determined that difference in the rates this year compared to last year could be due to different districts surveyed in the sampling plan. While each year’s sample is representative of the State in terms of demographics, one group of districts may be less involved than another group due to the sampling plan. The last time that this group of districts were surveyed (FFY2017), their Indicator 8B rate was 79.43%, comparable to the 78.49% rate obtained this year.

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

21,186

**Percentage of respondent parents**

8.41%

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate | 10.44% | 8.41% |

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

Informed by Oregon’s participation in the Early Childhood TA Center (ECTA) & the Center for IDEA Early Childhood Data Systems (DaSy) Family Outcomes CoP, the State is planning to contract with FACT (Oregon’s PTI Center) for 2021-22. This contract will assist the State in supporting programs with collecting the following data to inform their parent involvement survey efforts:  
1. Identify current communication and dissemination strategies programs are utilizing.  
2. Collect program input as to why the response rate of parents of non-white students is low.  
3. Identify additional communication and/or dissemination strategies for increasing the response rate of parents, especially for parents of students of color.  
4. Ask programs if there are actions that the State and/or its survey vendor could do in terms of survey design/format/administration that would increase the likelihood parents of students of color responding to the survey.

**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.**

Nonresponse bias measures the differences in opinions between respondents and non-respondents in meaningful ways, such as the positivity of responses. A few factors can be examined to determine nonresponse bias. One is the overall response rate. The higher the response rate, the less likely nonresponse bias will occur. The response rate is lower than expected. Possibly, those parents who did not respond are different in some measurable way in their level of positivity from those who did respond.  
  
Second, the representativeness of the responses can be examined. The State describes this in the next section: The State used statistical significance testing to determine if one group was over- or under-represented based on their response rate. Although significant differences were found in response rates by race/ethnicity and disability for Part B, the actual responses of these different groups of parents showed no significant differences in the overall parent involvement percentage. For Part B619, no significant differences were found in response rates by disability, race/ethnicity, or age of the child.  
  
Third, the State can compare the responses of parents who responded early in the process to those who responded later in the process. Possibly, those who do not immediately respond are different in some measurable way than those who respond immediately. These results showed no difference between parents who responded earlier and parents who responded later. Therefore, the State concludes that nonresponse bias is not present.

**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.**

Part B 619  
   
The State used statistical significance testing of response rated to determine if one group was over-or under-represented. Note that our survey sample was such that if all disaggregated groups have the same response rate, then by definition, the disaggregated groups are representative of the population. For example, if all racial/ethnic groups had a 30% response rate, then the population of the respondents would mirror the actual population in terms of its racial/ethnic make-up. On the other hand, if one racial/ethnic group has a 30% response rate for example and another a 20% response rate, then the population of the respondents would not mirror the actual population in terms of its racial/ethnic make-up. No significant differences were found in response rates by disability, race/ethnicity, or age of the child.  
   
Since there are no significant differences in response rates by disability, race/ethnicity, or age of the child we are confident that the overall results are representative of the State. In addition, parents from a wide range of counties from across the state responded to the survey; thus, the results are representative of all racial/ethnic groups, all disability categories, and all age categories. Furthermore, results are weighted by county to ensure that the parent survey results reflect the population of parents in terms of geographic distribution.

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

YES

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

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

Statistical significance testing of response rate was used to determine representativeness with a threshold of p<0.05.

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

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

The sampling methodology is designed to choose a representative set of districts/counties each year that is reflective of the State’s population as a whole. Within counties, the population is stratified by school, grade, race/ethnicity, primary disability, and gender in order to ensure the representativeness of the sample.  
  
The sampling plan has been included as an attachment to B8 and the data provided within the indicator is consistent with the approved sampling plan.

| **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 COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.  
  
Reasons for Part B/School Age slippage: The State suspects slippage may be due to the configuration of districts that were selected this year as part of the sampling plan. The State does not survey each district every year. The State determined that difference in the rates this year compared to last year could be due to different districts surveyed in the sampling plan. While each year’s sample is representative of the State in terms of demographics, one group of districts may be less involved than another group due to the sampling plan. The last time that this group of districts were surveyed (FFY2017), their Indicator 8B rate was 79.43%, comparable to the 78.49% rate obtained this year.

## 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**

The State reports its FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services. The State used statistical significance testing to determine if one group was over- or under-represented based on the response rate. Significant differences were found in response rates by disability and race/ethnicity. In terms of disability, parents of students with Autism were more likely to respond (11%) than parents of students with an Emotional Disturbance (6%) and students with a Specific Learning Disability (6%). In terms of race/ethnicity, parents of Asian students were more likely to respond (11%) than parents of Hispanic students (6%) and Black students (4%). White parents (8%) were more likely to respond than Hispanic parents (6%) and Black parents (4%). The State noted no significant differences based on the age of the child.   
  
The State analyzed the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services. The State noted no significant differences in the parent involvement percentage between parents of students with different races/ethnicities who had a statistically different response rate or between parents of students with different disabilities who had a statistically different response rate, so we are confident that the overall results are representative of the State despite the differences in response rate. While the analysis examined the response rate of the parents in the survey sample, results are weighted by district to ensure that the parent survey results reflect the population of parents.  
  
Given the non-significant differences in the parent involvement rates and the weighting by district, even though the response rates indicate that a slightly higher proportion of parents of Asian students and of White students responded and a lower proportion of parents of Hispanic students and of Black students responded, the State determined that the results are representative of all racial/ethnic groups. Similarly, the results are representative of all disability categories.

## 8 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.  
  
The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

## 8 - Required Actions

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**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.**

26

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 7 | 0 | 171 | NVR | 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 State defines Disproportionate Representation of racial and ethnic groups in special education and related services as:   
• The percentage of IDEA eligible students disaggregated by race/ethnicity differs by +/- 20% from the percentage of all students within the district disaggregated by race/ethnicity in at least one race/ethnicity category;   
• A weighted risk ratio analysis shows a value of >2.0 in the same race/ethnicity category; and  
• The district has at least ten IDEA eligible students in the same race/ethnicity category in special education.

**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.**

The State used district-provided data collected from the State’s December 1, 2019 Special Education Child Count (SECC) (Data Year 2019-20) to identify if there was Disproportionate Representation in Special Education. Disproportionate Representation in Special Education was identified in seven (7) districts (0.041%).The State conducted follow-up interviews with each of the seven districts where disproportionate representation was identified. These interviews were conducted to review the district’s data and root causes of the disproportionate representation; review policies, procedures, and practices which could have contributed to the significant discrepancy; and determine whether the disproportionate representation was the result of inappropriate identification.   
  
Based on these interviews with the identified districts, the State determined that there were no districts for which inappropriate identification of students was the cause for disproportionate representation of racial and ethnic groups in special education. Thus, the State determined that the identification of disproportionate representation was not indicative of noncompliance for any of the identified districts. In doing so, the State was able to finalize identification and verification of correction of noncompliance.

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

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

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

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

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 9 - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2019. The State must provide valid and reliable data for FFY 2020 in the FFY 2020 SPP/APR. In addition, the State must clarify if it determined, for FFY 2019, that disproportionate representation was the result of inappropriate identification in the other three districts.

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

The State conducted follow up interviews with three of the identified districts after the reporting period for the FFY 2019 SPP/APR had closed. From these interviews, the state determined for FFY 2019 that inappropriate identification was not the result of noncompliance in these other three districts. The State has provided valid and reliable data for this FFY 2020 submission.

## 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% | NVR |

**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.**

38

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 38 | 0 | 159 | NVR | 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 State defines Disproportionate Representation of racial and ethnic groups in special education and related services as existing when:   
• The percentage of IDEA eligible students disaggregated by race/ethnicity differs by +/- 20% from the percentage of all students within the district disaggregated by race/ethnicity in at least one race/ethnicity category, and   
• A weighted risk ratio analysis shows a value of >2.0 in the same race/ethnicity category within the same disability category, and   
• At least ten IDEA eligible students in the same race/ethnicity category within the same disability category in special education.

**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.**

The State used district-provided data collected from the State’s December 1, 2019 Special Education Child Count (SECC) (Data Year 2019-20) to identify if there was disproportionate representation of racial/ethnic groups in specific disability categories. The State prepared and disseminated a Disproportionate Representation in Special Education Report to all districts with the following information:   
1. The percentage of IDEA eligible students disaggregated by race/ethnicity compared to all students within district disaggregated.   
2. A weighted risk ratio analysis for each race/ethnicity category.   
3. The number of IDEA eligible students in each race/ethnicity category.  
  
The State conducted follow-up interviews with each of the 38 districts where disproportionate representation was identified. These interviews were conducted to review the district’s data and root causes of the disproportionate representation; review policies, procedures, and practices which could have contributed to the disproportionate representation; and determine whether the disproportionate representation was the result of inappropriate identification. The State provided the identified districts with resources about conducting root-cause analyses and policy to practice reviews in advance of the interviews.   
  
Based on these interviews with the identified districts, the State determined that there were no districts for which inappropriate identification of students was the cause for disproportionate representation of racial and ethnic groups in specific disability categories. Thus, the State determined that the identification of disproportionate representation was not indicative of noncompliance for any of the identified districts. In doing so, the State was able to finalize identification and verification of correction of noncompliance.

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

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

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

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

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
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## 10 - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2019. The State must provide valid and reliable data for FFY 2020 in the FFY 2020 SPP/APR.

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

The State provided valid and reliable data for FFY 2020.

## 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 | 94.30% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.32% | 97.94% | 98.09% | 98.61% | 98.53% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 11,224 | 11,079 | 98.53% | 100% | 98.71% | Did not meet target | No Slippage |

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

145

**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.**

Total Number of School Days on Non-Compliant Records (Codes 3,4,5,6)  
• 61 to 70 days (1 to 10 days over) 31.03% (45/145)  
• 71 to 80 days (11 to 20 days over) 14.48% (21/145)  
• 81 to 90 days (21 to 30 days over) 11.03% (16/145)  
• Over 90 days (over 30 days over) 43.45% (63/145)  
  
Reasons for delay reported by school district:  
• Delay by district staff accounted for 62.76% (91/145)   
• Delay due to parent non-attendance at the eligibility meeting accounted for 13.01% (19/145)  
• Delay by a doctor accounted for 9.66% (14/145)   
• Need for additional testing accounted for 14.48% (21/145)

**Indicate the evaluation timeline used:**

The State used the 60 day timeframe within which the evaluation must be conducted

**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.**

Districts/programs submit data about all initial evaluations they complete as part of the Consolidated Collection Child Find Report required by the State.

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

Due to COVID-19, the State experienced a reduction in the number of Child Find evaluations completed. In June 2021, 11,224 evaluations were reported. This is a decline of 3,378 evaluations or 23% from the June 2020 when 14,602 evaluations were reported.  
  
During FFY 2020, due to mandates implemented by Oregon’s Governor and based on the local health matrix related to COVID-19 occurrence within each county, school districts experienced a change of delivery model between in person instruction and virtual instruction.  
  
An explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator:   
Data completeness was not impacted, and data collected is considered valid and reliable. The State collected all the data to be collected for 2020-2021.   
  
An explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator:   
Data completeness was not impacted, and data collected is considered valid and reliable. The State collected all the data to be collected for 2020-2021.   
  
Any steps the State took to mitigate the impact of COVID-19 on the data collection:   
Districts were directed to report the data as required. In 2020-2021, under CFR 34 CFR §300.301(d), 1728 records were reported with the timeframe exemption for “the parent of a child repeatedly fails or refuses to produce the child for the evaluation.” Of the 1728 records reported, 1720 or 98.84% records reported the parent failed to produce the child for required in-person evaluation due to the Governor’s executive order precluding in-person contact. 20 records or 1.16% of records indicated, “the parent of a child repeatedly fails or refuses to produce the child for the evaluation for non COVID reasons.” As specified in federal guidance (Part B Measurement Table for Part B SPP/APR), these records are not included in the numerator or denominator.

**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** |
| --- | --- | --- | --- |
| 214 | 214 | 0 | 0 |

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

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

In FFY 2019, 100% of identified noncompliance were corrected within one year.  
The State verified that each district with noncompliance reflected in the Child Find collection data:  
• Is correctly implementing 34 CFR §300.301(c) (1) (i.e., achieved 100% compliance) based on a State review of subsequent evaluation data.  
• Has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
  
B11 Prong 2 correction is verified by State staff reviewing data from the Special Education Child Find Consolidated Collection for a period of time relative to the level of noncompliance.  
  
Analysis begins by comparing districts who were flagged for non-compliance for the 2019-2020 data to districts flagged for non-compliance in 2020-2021 data. A review of the data reflects that 62 districts were out of compliance for both years.   
  
A total of 37 or 60% of the 62 school districts flagged in 2019-2020, but not in 2020-2021, have shown correct subsequent implementation of the child find regulations for an entire year. The State determined that 25, or 40% of the 62 school districts that were flagged for B11 in 2019-2020, were also flagged for B11 in 2020-2021.   
  
To verify Prong 2 Correction for these districts, the State reviewed data from the Special Education Child Find Consolidated Collection. Initially, the State reviewed data over a one month period (9/1/2020 to 9/30/2020) to determine if districts completed all evaluations from that time period within the 60 Day Timeline.  
  
For the time period from 9/1/2020 to 9/30/2020, 16 (64%) of the 25 school districts completed each of their child find evaluation and eligibility within the 60 day timeline, showing that they were correctly implementing regulations.  
   
Following this analysis, the State continued to need to verify Prong 2 Correction for 9 districts. The State examined child find evaluation/eligibilities for the time period of 10/1/2020 to 10/30/2020. A total of 2 of 9 (22%) school districts completed all evaluations within the 60 Day Timeline, showing that they were correctly implementing regulations. Following this analysis, the State continued to need to verify Prong 2 Correction for 7 districts. The State reviewed each of these districts individually to confirm they were implementing regulations correctly.   
  
The State conducted additional analysis for the 7 school districts found to be in noncompliance of Child Find requirements for the months of September 2020 and October 2020. A review of data from November 1 to March 1 for districts with identified non-compliance demonstrated the capacity to subsequently implement these regulations appropriately.  
  
The State reviewed the data collected from the subsequent year’s Special Education Child Find Consolidated Collection for a period of time relative to the level of noncompliance to determine whether districts have subsequently implemented regulations with 100% compliance. For the 2019-2020 school year, the State determined that 100% of districts with identified non-compliance demonstrated the capacity to subsequently implement these regulations appropriately.

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

In FFY 2019, 100% of identified noncompliance were corrected within one year.  
  
The State verified that each district with noncompliance reflected in the Child Find collection data:  
• Is correctly implementing 34 CFR §300.301(c) (1) (i.e., achieved 100% compliance) based on a State review of subsequent evaluation data  
• Has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
  
B11 Prong 1 correction is done by confirming that each case of identified non-compliance reported has a timeline for completion of the evaluation beyond 60 days.  
  
In 2020-2021 (2019-2020 School Year Data), 62 school districts were flagged for B11 due to 214 instances of evaluations not being completed within the established 60 day timeline. Using the B11 Child Find Report available within the SPR&I Dashboard, the State confirmed that each identified instance of noncompliance was corrected within each district.  
  
The State required that each district submit information on all initial evaluations conducted within their jurisdiction through the Special Education Child Find Consolidated Collection. The State reviewed the data collected related to this indicator to confirm that each student for whom a district did not complete their initial evaluation in the required number of days had a subsequent eligibility determination made. For the 2019-2020 school year, the State confirmed that 100% of the evaluations were completed, although late, via data collection.

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

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
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## 11 - Prior FFY Required Actions

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

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

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements:  
In FFY 2019, 100% of identified noncompliance was corrected within one year.  
The State verified each district with noncompliance:  
• Is correctly implementing 34 CFR §300.301(c) (1) (i.e., achieved 100% compliance) based on a State review of subsequent evaluation data.  
• Has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
  
In 2020-2021 (2019-2020 School Year Data), 62 school districts were flagged for B11 due to 214 instances of evaluations not being completed within the established 60 day timeline. Using the B11 Child Find Report available within the SPR&I Dashboard, the State confirmed that each identified instance of noncompliance was corrected within each district.  
  
The State required each district submit information on all initial evaluations conducted through the Special Education Child Find Consolidated Collection. The State reviewed the data collected to confirm that each student for whom a district did not complete their initial evaluation in the required number of days had a subsequent eligibility determination made. For the 2019-2020 school year, the State confirmed that 100% of the evaluations were completed, although late, via data collection.  
  
Analysis begins by comparing districts who were flagged for non-compliance for the 2019-2020 data to districts flagged for non-compliance in 2020-2021 data. A review of the data reflects that 62 districts were out of compliance for both years.   
  
A total of 37 or 60% of the 62 school districts flagged in 2019-2020, but not in 2020-2021, have shown correct subsequent implementation of the child find regulations for an entire year. The State determined that 25 or 40% of 62 school districts that were flagged for B11 in 2019-2020 were also flagged for B11 in 2020-2021.   
  
To verify Prong 2 Correction for these districts, the State reviewed data from the Special Education Child Find Consolidated Collection. Initially, the State reviewed data over a one month period (9/1/2020 to 9/30/2020) to determine if districts completed all evaluations from that time period within the 60 Day Timeline.  
  
For the time period from 9/1/2020 to 9/30/2020, 16 (64%) of the 25 school districts completed each of their child find evaluation and eligibility within the 60 day timeline, showing that they were correctly implementing regulations.  
  
Following this analysis, the State continued to need to verify Prong 2 Correction for 9 districts. The State examined child find evaluation/eligibilities for the time period of 10/1/2020 to 10/30/2020. A total of 2 of 9 (22%) school districts completed all evaluations within the 60 Day Timeline, showing that they were correctly implementing regulations. Following this analysis, the State continued to need to verify Prong 2 Correction for 7 districts. The State reviewed each of these districts individually to confirm they were implementing regulations correctly.   
  
The State conducted additional analysis for the 7 school districts found to be in noncompliance of Child Find mandates for the months of September 2020 and October 2020. A review of data from November 1 to March 1 for districts with identified non-compliance demonstrated the capacity to subsequently implement these regulations appropriately.  
  
The State reviewed the data collected from the subsequent year’s Special Education Child Find Consolidated Collection for a period of time relative to the level of noncompliance to determine whether districts have subsequently implemented regulations with 100% compliance. For the 2019-2020 school year, the State determined that 100% of districts with identified non-compliance demonstrated the capacity to subsequently implement these regulations appropriately.  
  
Describe how the State verified that each individual case of noncompliance was corrected:  
In FFY 2019, 100% of identified noncompliance were corrected within one year.  
The State verified that each district with noncompliance:  
• Is correctly implementing 34 CFR §300.301(c) (1) (i.e., achieved 100% compliance) based on a State review of subsequent evaluation data  
• Has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
  
In 2020-2021 (2019-2020 School Year Data), 62 school districts were flagged for B11 due to 214 instances of evaluations not being completed within the established 60 day timeline. Using the B11 Child Find Report available within the SPR&I Dashboard, the State confirmed that each identified instance of noncompliance was corrected within each district.  
  
The State required each district submit information on all initial evaluations conducted through the Special Education Child Find Consolidated Collection. The State reviewed the data collected related to this indicator to confirm that each student for whom a district did not complete their initial evaluation in the required number of days had a subsequent eligibility determination made. For the 2019-2020 school year, the State confirmed that 100% of the evaluations were completed, although late, via data collection.  
  
Analysis begins by comparing districts who were flagged for non-compliance for the 2019-2020 data to districts flagged for non-compliance in 2020-2021 data. A review of the data reflects that 62 districts were out of compliance for both years.   
  
A total of 37 or 60% of the 62 school districts flagged in 2019-2020, but not in 2020-2021, have shown correct subsequent implementation of the child find regulations for an entire year. The State determined that 25 or 40% of 62 school districts were flagged for B11 in 2019-2020 were also flagged for B11 in 2020-2021.   
  
To verify Prong 2 Correction for these districts, the State reviewed data from the Special Education Child Find Consolidated Collection. Initially, the State reviewed data over a one month period (9/1/2020 to 9/30/2020) to determine if districts completed all evaluations from that time period within the 60 Day Timeline.  
  
For the time period from 9/1/2020 to 9/30/2020, 16 (64%) of the 25 school districts completed each of their child find evaluation and eligibility within the 60 day timeline, showing that they were correctly implementing regulations.  
  
Following this analysis, the State continued to need to verify Prong 2 Correction for 9 districts. The State examined child find evaluation/eligibilities for the time period of 10/1/2020 to 10/30/2020. A total of 2 of 9 (22%) school districts completed all evaluations within the 60 Day Timeline, showing that they were correctly implementing regulations. Following this analysis, the State continued to need to verify Prong 2 Correction for 7 districts. The State reviewed each of these districts individually to confirm they were implementing regulations correctly.   
   
The State conducted additional analysis for the 7 school districts found to be in noncompliance of Child Find requirements for the months of September 2020 and October 2020. A review of data from November 1 to March 1 for districts with identified non-compliance demonstrated the capacity to subsequently implement these regulations appropriately.  
  
The State reviewed the data collected from the subsequent year’s Special Education Child Find Consolidated Collection for a period of time relative to the level of noncompliance to determine whether districts have subsequently implemented regulations with 100% compliance. For the 2019-2020 school year, the State determined that 100% of districts with identified non-compliance demonstrated the capacity to subsequently implement these regulations appropriately.

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

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

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

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

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 97.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 99.31% | 99.33% | 100.00% |

**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. | 157 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 0 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 150 |
| 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. | 5 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 1 |
| 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. | 150 | 151 | 100.00% | 100% | 99.34% | 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**

1

**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.**

Reason for delay: For FFY 2020 there was one issue of noncompliance resulting in one findings across one program:   
The reason for the one finding is listed below:  
1. One eligibility was completed 35 days after the child’s 3rd birthday and the IEP was completed 53 days after the child’s 3rd birthday. The delay in IEP development and implantation was due to staff scheduling.  
  
Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements:  
In FFY 2020, 99.33% (150/151) of child files reviewed for transition from Part C to Part B demonstrated eligibility determination and IFSP implementation by the third birthdays.  
  
The State verified that 100% (1/1) finding of noncompliance in FFY 2020 was corrected within one year and that the program with noncompliance demonstrated correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §300.124 based on a review corrective action and new files submitted in SPR&I.  
  
Describe how the State verified that each individual case of noncompliance was corrected:  
  
The State verified through data submission to SPR&I that 100% (1/1) of incidents of noncompliance in FFY 2020 were corrected within one year and that the program with noncompliance developed an IFSP for each child, unless the child was no longer within the jurisdiction of the EI program. The program with noncompliance provided through SPR&I the cause of the noncompliance and demonstrated correction of practices that contributed to the noncompliance through subsequent data submission (additional file reviews) to SPR&I. The State reviewed, verified, and approved the corrective actions.

**Attach PDF table (optional)**

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

State monitoring

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

All Early Intervention (EI) programs in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) System Performance Review & Improvement (SPR&I) system of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by the State and are evenly split between EI, EI Transition, and Early Childhood Special Education (ECSE). Files are selected to match the individual race/ethnicity, disability, and gender distribution for each EI/ECSE program based on the December child count. Individual child procedural compliance data is collected by programs and submitted to the State electronically through the SPR&I system. the State works collaboratively with programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress. The SPR&I system provides the State with the mechanism for review of district/program policies, procedures, and systems to ensure the requirements set forth in 34 CFR §300.600-609 are met.

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

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

## 12 - Prior FFY Required Actions

None

## 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 | 77.20% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 83.24% | 79.73% | 83.94% | 80.83% | 82.35% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 976 | 1,198 | 82.35% | 100% | 81.47% | Did not meet target | No Slippage |

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

State monitoring

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

All districts in the State receiving IDEA funds are required to participate in the Oregon Department of Education’s (ODE) System Performance Review & Improvement (SPR&I) application for annual accountability and performance reporting.   
  
This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. The State works collaboratively with districts/programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress.   
  
In SPR&I, districts are provided a list of transition age student files to review each school year. Each file must be reviewed to determine compliance with eight individual transition standards. This compliance is tracked for all submitted transition-age files. Compliance with all eight secondary transition standards is required by the first IEP in effect when the student turns 16. The SPR&I system is the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR 300.600-609 are met.   
  
Districts must report on whether the student file meets the following standards:   
1. The IEP Team Meeting Notices must: (a) invite the student, (b) inform the parent and student that consideration of the post-secondary goals and transition services would be addressed, and (c) identify any other agency that would be invited to send a representative, if appropriate.   
2. If the student attended the IEP meeting or if the student did not attend there is documentation that other steps were taken to ensure that the student’s preferences, interests, and needs were considered as part of the IEP development;   
3. The district has documentation that the most recent IEP meeting included, to the extent appropriate and with the consent of the parent or adult student, a representative of any participating agency that was likely to be responsible for providing or paying for transition services.   
4. The IEP contains Present Levels of Academic Achievement and Functional Performance including: (a) the student’s preferences, needs, and interests, and (b) the results of age-appropriate transition assessments.   
5. The IEP contains a statement of measurable annual goals including academic and functional goals.   
6. The IEP includes appropriate, measurable postsecondary goals based upon age-appropriate transition assessments related to training/education, employment, and, where appropriate, independent living skills.   
7. The IEP includes transition services needed to assist the student to reach the post-secondary goals.   
8. The IEP includes courses of study needed to assist the student to reach the post-secondary goals.  
  
The standard operating procedures that the State uses for this indicator include:   
• Requiring districts to engage in self-assessment through data collection, review, and analysis to inform meaningful improvement.   
• Requiring districts to report on secondary transition services for a predetermined number of student files selected for review.   
• Requiring districts to address noncompliance with transition services through corrective action documented in SPR&I that includes verifying that services were provided to students, an explanation for the cause of the noncompliance, correction of practices that contributed to the noncompliance, and demonstration of current compliance through subsequent data collection.   
• Providing training to districts on the relationship among Indicators 1, 2, 13, and 14.

| **Question** | **Yes / No** |
| --- | --- |
| Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16? | NO |

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

In Oregon, transition services begin no later than the first IEP to be in effect the year the student turns 16, or younger if determined by the IEP team.   
  
The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

**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** |
| --- | --- | --- | --- |
| 210 | 210 | 0 | 0 |

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

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

Through data submission to SPR&I in FFY 2020, the State reviewed and verified district/program data and file submissions to confirm that 100% (210/210) of incidents of noncompliance in FFY 2019 were corrected within one year. Additionally, the SPR&I system calls for the District to address noncompliance with transition services through corrective action that is documented in SPR&I and includes verifying the services were provided to students, an explanation of the cause of noncompliance, and correction of practices contributing to the noncompliance and demonstration of current compliance through subsequent data collection.

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

In FFY 2020, the State reviewed and verified district/program data and file submissions to confirm that 100% (210/210) incidents of noncompliance in FFY 2019 were corrected within one year. Consistent with the requirement of OSEP Memo 09-02, each district has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district. The State verified that all districts showed 100% compliance within one year after the initial noncompliance was identified based on a review of updated data, including data subsequently collected through the SPR&I system.   
  
Districts/programs were required to provide through SPR&I the cause of the noncompliance for each transition standard and demonstrate correction of practices that contributed to the noncompliance through subsequent data submission to SPR&I.

**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. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining 84 uncorrected findings of noncompliance identified in FFY 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 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**

The State verified that each LEA with findings of noncompliance identified in FFY 2017 was corrected by reviewing and verifying district/program data and file submissions to confirm that 100% (84/84) of incidents of noncompliance in FFY 2017 were corrected within one year. Consistent with the requirement of OSEP Memo 09-02, each district corrected each individual case of noncompliance unless the child was no longer within the jurisdiction of the district. The State verified that all districts showed 100% compliance after the initial noncompliance was identified based on a review of updated data, including data subsequently collected through the SPR&I system.

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

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

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

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| A | 2009 | Target >= | 29.00% | 30.00% | 31.00% | 32.00% | 32.00% |
| A | 24.18% | Data | 24.41% | 24.56% | 22.82% | 25.13% | 24.84% |
| B | 2009 | Target >= | 55.00% | 55.50% | 55.50% | 56.00% | 56.00% |
| B | 50.60% | Data | 59.52% | 60.46% | 61.99% | 46.46% | 60.61% |
| C | 2009 | Target >= | 72.00% | 72.00% | 72.00% | 74.00% | 74.00% |
| C | 66.04% | Data | 73.24% | 74.59% | 74.20% | 81.56% | 77.16% |

**FFY 2020 Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target A >= | 32.00% | 32.00% | 34.00% | 34.00% | 36.00% | 36.00% |
| Target B >= | 56.00% | 56.00% | 58.00% | 58.00% | 60.00% | 60.00% |
| Target C >= | 74.00% | 74.00% | 76.00% | 76.00% | 78.00% | 78.00% |

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**FFY 2020 SPP/APR Data**

|  |  |
| --- | --- |
| Total number of targeted youth in the sample or census | 4,847 |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 2,775 |
| Response Rate | 57.25% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 476 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 1,087 |
| 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) | 135 |
| 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). | 303 |

| **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) | 476 | 2,775 | 24.84% | 32.00% | 17.15% | Did not meet target | Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 1,563 | 2,775 | 60.61% | 56.00% | 56.32% | Met target | No Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 2,001 | 2,775 | 77.16% | 74.00% | 72.11% | Did not meet target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A** | COVID-19 affected post-secondary enrollment in the State. Enrollment at the majority of the State’s public colleges and universities is still down after more than a year in the pandemic. According to the Oregon Higher Education Coordinating Commission (HECC), most of the State’s higher education institutions are still seeing fewer students, particularly the State’s community colleges. Compared to 2019, community college student enrollment in the State is down by nearly 24%. |
| **C** | COVID-19 affected job training opportunities through community colleges as well as students entering the work force. Self- employment and family businesses were also affected due to the restrictions of COVID, and businesses were closed and not reopened. In addition, managing the virtual world was difficult for students experiencing disabilities because they had to learn a variety of software and meeting platforms, manipulative equipment, and learn how to communicate with others virtually rather than through person-to-person direct contact methods. Because a number of adult agencies moved to virtual services, students struggled with staying connected to these agencies which are just now recovering and returning to some in-person services. |

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

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

**Response Rate**

|  |  |  |
| --- | --- | --- |
| **FFY** | **2019** | **2020** |
| Response Rate |  | 57.25% |

**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 will continue online training with LEA’s to encourage them to conduct exit interviews with students before they leave high school to ensure the LEA has future contact information for all exiting students experiencing disability. The State will encourage districts to continue to provide incentives for students who complete PSO interviews. The State will continue to pay school districts for each survey that is submitted online and on time. The State will train LEA personnel on strategies for maintaining contact with dropout students as recommended from the NTACT:C resource manual on how to locate “hard to find” youth.

**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.**

For school year 2019-20, 4,847 former students were eligible for the PSO interview. Of these, 2,775 students completed PSO interviews, resulting in a response rate of 57% in FFY20 and reflecting a 7% increase over the FFY19 response rate of 50%. Only the dropout category showed a nonresponse bias. As stated above, the State will train LEA personnel on strategies for maintaining contact with dropout students as recommended from the NTACT:C resource manual on how to locate “hard to find” youth.

**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.**

Response rates were analyzed to determine representativeness using a +/-3% discrepancy between the proportion of responders compared to target leaver group, based on the OSEP approved Response Calculator created by the National Post-School Outcomes Center. Examining the demographic categories of disability, gender, ethnicity, and exit reason, only the dropout category exceeded the +/-3% difference between respondents (6.23%) and target leavers (9.80%), a difference of -3.57%.

**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)**

YES

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

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

+/- 3% discrepancy in the proportion of responders compared to target group

| **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)**

Post-school outcomes (PSO) data were collected between June 1 and September 30, 2021. Local Education Agency personnel conducted in-person or phone interviews with former students, or their designee, based on a census of all former students who had an IEP in effect when they exited school. The census included those who had been out of school for at least 1 year and exited school by (a) graduating with a regular, modified, extended diploma, or certificate; (b) reaching maximum age; or (c) dropping out of school; and included those who were expected to return to school and did not. Data were entered into an online data collection system, PSO App 2.0, for analysis. This system is not publicly available. Respondents were primarily former students (53.3%) or their designee (41.5%), followed by others (5.2%) including school or agency staff and co-workers. The majority of interviews were conducted by transition specialists (30.5%) and teachers (28.9%), followed by secretary/clerical staff (18.6%), paraeducators (15.7%), administrators (3.2%), and others (2.7%).   
  
The COVID-19 pandemic did have impact on the outcome data for this indicator for the FFY 2020 SPP/APR report. This information is summarized in “Reasons for Slippage” above.

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

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

## 14 - Required Actions

# 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 | 0 |
| 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 | 0 |

**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**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 11.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 29.50% | 29.50% | 29.50% | 29.50% |  |
| Data | 14.29% | 100.00% | 0.00% |  | 0.00% |

**Targets**

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

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 0.00% |  |  | N/A | N/A |

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2020 SPP/APR report.

## 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 provide targets until any fiscal year in which ten or more resolution sessions were held.

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range 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 | 8 |
| 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 | 2 |
| 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 | 2 |

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

NO

**Targets: Description of Stakeholder Input**

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 86.36% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2015** | **2016** | **2017** | **2018** | **2019** |
| Target >= | 89.00% | 89.00% | 90.00% | 90.00% | 90.00% |
| Data | 83.78% | 86.67% | 72.97% | 64.71% | 44.00% |

**Targets**

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

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 2 | 2 | 8 | 44.00% |  | 50.00% | N/A | N/A |

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

The COVID-19 pandemic significantly impacted the percentage of mediations that resulted in an agreement. Mediations have been conducted virtually rather than in-person, which limits the ability of the mediator to “read the room.” Additionally, both parents and school districts are overwhelmed by COVID-related demands and are emotionally escalated, making successful mediation sessions less likely.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State reported fewer than ten mediations held in FFY 2020. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

## 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)?**

To increase the percentage of third grade students with disabilities reading at grade level, as measured by State assessment.

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

NO

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

NO

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

NO

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

Theory of action link available at https://www.oregon.gov/ode/reports-and-data/SpEdReports/Pages/FFY-2020-SPP-APR-Part-B.aspx

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

NO

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

The State is narrowing the strategy for developing intra-agency coherence around MTSS efforts to focus on initiatives targeting reading outcomes. The refined strategy is to develop a mechanism to collaborate around early reading initiatives at the State. This change is justified because the State sponsors multiple State and Federal projects related to early reading outcomes and lacks a structure to share information at the statewide level about program implementation and evaluation. The strategy change builds on the State’s theory of action that internal coherence will have a positive impact on student results. Stakeholders echoed the priority of streamlining statewide initiatives focusing on early reading, with 8 of the 10 survey respondents ranking integration at the SEA as very important or critical. By narrowing the State coherence efforts to aim for integration of early reading efforts, teams will build the habits and capacities necessary to effectively integrate larger initiatives across the organization.  
   
The State is also adding a strategy to provide universally available support for districts to intensify instruction in reading. The rationale is that the SSIP’s previous strategy of supporting general MTSS coaching did not target reading outcomes specifically enough to be able to impact and measure results at the student level. Previous implementation data from schools in the State installing features of an MTSS using the SWIFT framework showed that coaching and professional learning targeting overarching infrastructure features of an MTSS is necessary, but insufficient, for a school to improve outcomes in reading. By adding a strategy to the SSIP targeting teacher knowledge of the science of reading and administrative capacity for literacy leadership, the State expects to impact student outcomes more directly in reading.  
   
During the next reporting period, the State will develop plans to implement LETRS (Language Essentials for Teachers of Reading and Spelling) professional learning for all elementary teachers in one of the State’s largest districts. There are 6,867 students receiving special education services in this district, or 15.4% of the K-12 student population. The State expects training to occur during the 2022-2023 school year, with a formal evaluation published in 2023-2024. Examining the implementation of LETRS in one large district is a justified addition to the SSIP because this professional learning may be able to be scaled up statewide and combined with coaching initiatives.  
  
The State’s timeline and activities for scaling up MTSS coaching changed in response to updates to State improvement planning processes and continued development of State coaching programs targeting reading improvements. The Agency plans to publish guidance in 2022 for integrating improvement process requirements across six federal and state programs, all of which include priorities to improve outcomes for students from groups that systems have historically and currently marginalized and underserved. The implementation strategies adopted by districts working within these integrated six programs include equity-based tiered systems of supports and systems coaching, the same strategies promoted within the SSIP. The SSIP team is planning adaptively for future integration with these other improvement process coaching and MTSS efforts. By continuing to integrate programs targeting similar populations using similar strategies, the State is likely to see a positive impact on student performance and thus on the SIMR. Stakeholders confirmed the need to maintain coaching as a part of the SSIP, with 6 of the 10 survey participants reporting coaching was more important than other activities for the SEA to provide to improve student results in reading.  
   
The State re-set the baseline for the SSIP in December 2021. The original baseline was set during Phase 1, when the State used a different summative ELA measure. The State adopted the FFY 2018 grade 3 performance data as the current baseline, or 24.45% of students scoring at proficient or higher on the grade 3 ELA Smarter Balanced. FFY 2018 was selected as the new baseline year because this is the most recent year for which there was typical participation data among grade three students.

**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** |
| --- | --- |
| 2018 | 24.40% |

**Targets**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FFY** | **2020** | **2021** | **2022** | **2023** | **2024** | **2025** |
| Target>= | 27.00% | 29.00% | 31.00% | 33.00% | 35.00% | 37.00% |

**FFY 2020 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Numerator: Number of grade 3 students experiencing disability performing at or above proficient on Smarter Balanced ELA assessment** | **Denominator: Total number of grade 3 students experiencing disability participating in the Smarter Balanced ELA assessment.** | **FFY 2019 Data** | **FFY 2020 Target** | **FFY 2020 Data** | **Status** | **Slippage** |
| 461 | 2,124 |  | 27.00% | 21.70% | Did not meet target | N/A |

**Provide the data source for the FFY 2020 data.**

Grade three Smarter Balanced ELA assessment.

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

The State Education Agency (SEA) annually collects Smarter Balanced student assessment data from school districts. Data is collected at the close of the testing window in June and analyzed by the Assessment and Accountability teams over the subsequent months. The School Age Special Education Team analyzes data for the specific SIMR population of students. The SiMR population is 100% of the grade three students with IEPs in the State, for the given assessment year. For the SSIP, students who participated in the regular assessment and the alternate assessment are included in data collection. The alternate assessment is taken by only a few students, representing the population of students with the most complex needs in the State. The performance rate of the SiMR population is compared to the targets set. Student participation rates in State assessments vary across the State, contributing to the concerns about conclusions drawn from relying on summative assessment data alone to evaluate student progress. The State was not able to identify any significant trends related to groups of students or districts for which no scores were reported.

**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)**

YES

**If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.**

The State is unable to report complete SiMR data for the FFY 2020 reporting period due to COVID-19. Data completeness was impacted for all state assessments during the 2020-2021 school year due to COVID-19, with only 32.01% of grade three students experiencing disability participating in the ELA Smarter Balanced assessment in Spring 2021. This represents an increase in the typical non-participation rates in State assessments, with 37.5% of all eligible students participating in the ELA Smarter Balanced Assessment in the 2020-2021 school year, compared to a participation rate of 94.6% of students in the 2018-2019 school year. The Smarter Balanced Assessment is the State’s summative measure used to report on the SiMR throughout all phases of SSIP reporting. Due to the lack of complete and representative summative assessment data from the 2020-2021 school year, the State is unable to draw useful conclusions about the SiMR or the relationship between activities and student outcomes.   
  
COVID-19 impacted the State’s ability to collect data for this indicator because a high rate of families chose to keep students out of in-person settings during Spring 2021, due to risk of COVID-19 infection. The State did not permit schools to administer the assessment virtually, because of concerns about equitable support in student homes and test item security. The State has a State regulation permitting families to opt-out of State assessments, including the ELA Smarter Balanced Assessment. When compared to previous years, during the 2020-2021 school year, the State saw the assessment opt-out rate increase for both students experiencing disabilities and students who do not experience disabilities.   
  
Because of the interruptions to learning during the 2020-2021 and 2019-2020 school year and the low participation rate, the State cannot draw valid conclusions about the impact of SSIP activities on SIMR data. Likewise, districts and schools are not able to form valid conclusions about the impact of district innovations and classroom practices on student outcomes using the 2020-2021 Smarter Balanced Assessment data. The insufficiency of data collected makes the performance rate unrepresentative of the grade 3 student population, and thus conclusions about adult behaviors and environmental conditions of interest to SSIP analysis cannot be formed. The State took steps to mitigate the impact of COVID-19 on the data collection and on the supports to LEAs to be able to provide meaningful assessment during disrupted learning. The State proactively planned to mitigate impacts to data collection due to COVID-19. The State received approval from the US Department of Education to reduce the number of assessments required in ELA, math, and science during the 2020-2021 school year. This reduction was intended to increase participation in those assessments offered, removing the barrier for schools of balancing instructional and assessment time in the schedule during potential future learning interruptions. The State provided LEAs with guidance for school operations during COVID-19, including guidelines on assessment practices and COVID-19 health and safety measures to prevent the spread of infection. The State required each LEA to submit an operational blueprint, describing how the schools will meet State expectations for continuing learning while prioritizing health and safety. Equity and access were considered at the forefront of State guidance in all areas of school operations, including planning for meaningful assessment of student learning within the possible school models of in-person, hybrid, and comprehensive distance learning. While each LEA individually offered instruction based on changing local health metrics instruction, the State required LEAs to offer the Smarter Balanced Assessment in person.  
  
By only offering the assessment in person, schools helped maintain the reliability of scores for those individual students who tested. As the number of in-person learning days was reduced due to COVID-19, schools balanced the limited instructional time with the time needed to conduct assessment. Because of the interruptions to school, students did not have the opportunity to experience the entirety of grades two and three curriculum and instruction. To draw valid conclusions about what students know and can do with respect to the grade three standards, it is assumed that students would have had instruction around these standards. Because of extended learning interruption, the Smarter Balanced ELA assessment may not be valid for drawing conclusions about longitudinal performance for students statewide.

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

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

The current evaluation plan is available at this website: https://www.oregon.gov/ode/reports-and-data/SpEdReports/Documents/2020%20APR-SPP/SSIP%20partb%20indicator%2017%20evaluation%20plan.pdf

**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 State updated the evaluation plan to reflect additional activities planned over the next five years of SSIP reporting. Specifically, the State plans to recruit additional districts for participation in MTSS reading coaching through Oregon Response to Instruction and Intervention (ORTIi). With this activity, the State anticipates monitoring growth and fidelity of implementation in areas of MTSS and in student progress monitoring data.   
  
The State is also adding an evaluation measure related to increasing the knowledge base of staff on evidence-based reading instruction using the LETERS professional learning options. The State plans to contract with an external evaluator during the next reporting period to design evaluation measures and publish findings related to implementation in one large district. The results of this pilot program using LETRS to advance educator knowledge will inform scale up efforts.

**If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.**

The State needed to revise the SSIP evaluation plan as the State set targets for the next five years of SSIP implementation and narrowed the activities within each strategy. The specific focus on collaboration around early reading initiatives provides the opportunity to grow teaming and communication practices with a new array of Agency programs and staff. Measuring the growth of teams along a continuum of collaboration is an adaptive change made in response to previous years’ SSIP work. The focus on creating unified products across teams neglected to address the root cause of why teams and programs operated separately. The SSIP evaluation plan is evolving alongside planned changes with other statewide and federal programs. The original phases of the SSIP intentionally aligned with the State’s SPDG and systems coaching in MTSS through the regional and LEA coach network. As funding nears a close for the SPDG, the State cannot maintain the financial commitment to these specific hubs. The State simultaneously prioritized coaching networks as an improvement strategy through ESSER III and the State funded Student Success Act. The State intends to maintain existing partnerships with organizations including ORTIi and the SWIFT Center through 2023. Subsequently, the State intends to re-evaluate financial commitments. The uncertainty about the direction of specific IDEA funded programs necessitates a change in the arrangement of supports to districts. ORTIi will be opening applications statewide for LEAs to participate in a multi-year sequence of coaching supports in the 2022-2023 school year. Because of this change in participating districts, the State will shift evaluation focus to a different group of school receiving supports. Similar measures of fidelity of implementation to an MTSS in reading and student progress monitoring data in reading will be used.

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

The State continued to implement the infrastructure improvement strategy of increasing intra-agency coherence to scale-up a State MTSS through coaching.

**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.**

A primary short-term outcome of the infrastructure improvement strategy of increasing intra-agency coherence to scale-up a State MTSS through coaching is in the use of a unified district continuous improvement process and plan (CIP) as a part of the accountability/monitoring process for multiple programs at the SEA.  
  
The strategy of providing regions and districts with a unified continuous improvement process for district improvement efforts supports system change at multiple points along the educational cascade. Within districts, implementing a unified continuous improvement process is likely to result in improving how the district uses data and makes decisions, leading to improvements in student results and the SIMR. This change in accountability/monitoring processes is necessary for the State to be able evaluate the impact of statewide programmatic investments on student achievement and other enabling conditions for success. A unified CIP process provides a common metric for evaluation of district performance and progress at the SEA, enabling multiple programs to use a single data source in evaluation of risk or in identification of districts not meeting described outcomes. In the State’s SSIP, coaching links infrastructure improvements at the SEA with the implementation of evidence-based practices in regions and districts.   
  
Due to the COVID-19 pandemic, the State paused identification of targeted and comprehensive support schools under ESSA, and continued providing support to those already identified. The CIP process was a tool that helped inform learning recovery plans for these schools. The State MTSS technical assistance and professional development provided for CSI and TSI schools mirrors the supports provided for SSIP/SPDG schools and are likely to result in improvements in student outcomes leading to the SIMR because of the strategies used to target focal populations.

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

NO

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

The next step for the SSIP infrastructure improvement strategy of increasing Agency coherence is to narrow the focus to coherence around initiatives aimed at improving early reading outcomes. Specifically, this strategy will entail cross office involvement in a statewide ELA instructional materials adoption process and revision of the State ELA standards. From these projects, staff will identify areas of strength and needed growth in intra-agency collaboration. The State also intends to increase opportunities for quality professional learning among State staff about evidence-based literacy instruction. The anticipated outcome of increasing internal SEA professional learning on evidence-based practices and systematic instruction is a common knowledge base and set of beliefs about the science of reading. With this necessary condition of the SEA closer aligned around best practices in reading instruction, there is increased likelihood that the technical assistance delivered to regions and districts will have an impact.  
  
Agency staff will conduct a revised resource mapping and initiative inventory of programs supporting early reading, and closely track developments in plans for the State Student Investment Account work and ESSER III coaching. During the next reporting period, the SEA anticipates that a statewide process for micro credentialing coaches will be developed, and an approved list of literacy coaching providers to districts will be published. These steps are in support of developing predictable processes for districts to access coaching, and to provide consistency of delivery in high quality services. This represents a development in the original SSIP strategy of statewide MTSS coaching networks. It is a scalable solution for the SEA to provide criteria and a certification mechanism for coaches, ensuring adherence to common values and instructional strategies. This professional development system will allow additional districts and schools to receive technical assistance and coaching on evidence based MTSS practices that are a part of the SSIP.

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

During the 2020-2021 school year the Agency continued supporting LEAs to implement and scale-up MTSS using coaching.

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

Regional coaches continued providing coaching to LEAs through the State Personnel Development Grant (SPDG). This schema of cascading coaching adapted in response to COVID-19. Regional coaches began supporting LEAs virtually, and LEAs shifted priorities to providing continuous services for students amidst learning interruptions. Similarly, ORTIi provided supports for schools statewide through a virtual conference in April 2021 and offered additional virtual supports to those schools participating in Cadre 11 elementary reading and middle school literacy supports. Common to both the SPDG and ORTIi coaching mechanisms during the 2020-2021 school year was an inability to collect data on fidelity of implementation of MTSS practices and lack of student screening or progress monitoring data in reading.

**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.**

Coaching is intended to impact the SiMR by changing the adult behaviors that impact student outcomes. Specifically, regional coaches interface with LEA coaches around strategic planning aimed at shifting district procedures (teaming, communication, resource allocation, scheduling) and teacher instructional practices. By providing a linked coaching structure along the educational cascade, teachers are supported by LEA coaches, who are supported by regional MTSS coaches. The SEA and technical assistance partners provide ongoing professional learning to the regional coaches.

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

The SEA was unable to collect valid and reliable data to monitor the fidelity of implementation and to assess practice change due to interrupted learning in the 2020-2021 school year caused by the COVID-19 pandemic.

**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.**

Qualitative data reported by stakeholders including participating schools points to a collective desire for the State to both (a) continue using partners such as the SWIFT Center and ORTIi to provide supports to coaches at the regional and district levels along the educational cascade, and (b) for the State to increase available resources and technical assistance to all schools and general education staff in improvement efforts related to early reading instruction. The State received feedback from participating districts to continue offering virtual coaching when in-person learning and coaching are not possible. Participating districts appreciated the flexibility that MTSS regional coaches and ORTIi coaches provided, adapting to the needs and current instructional context.

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

During the 2020-2021 school year the State continued supporting LEAs to implement and scale-up MTSS using coaching. During the next reporting period, the SEA is expanding the provision of resources in support of evidence-based literacy instruction in schools. Specifically, this will involve providing professional learning and on-demand resources for schools to support the ELA materials adoption process and revised ELA standards. The State will also provide access to high-quality resources on intensifying instruction in conjunction with professional development on the revised ELA standards. The State first anticipates measure increases in teacher and administrator knowledge, then changes to school and classroom practices because of coaching. Lastly, the State expects to see improvements in SIMR data due to these changes in adult systems.  
  
Additionally, the State is sponsoring a pilot program for teacher professional learning using the LETRS program within a large school district. By the next reporting period, the State anticipates drafting a more detailed implementation and evaluation plan for staff involved in the LETRS training, and an increase in staff understanding of necessary components of quality reading instruction.  
  
ORTIi and the SWIFT Center will continue providing technical assistance to the SEA and to districts during the 2021-2022 school year. The SEA expects publication of revised tools to measure implementation of an Oregon MTSS, and the onboarding of additional districts to begin a sequence of literacy professional learning and coaching with ORTIi.

**Section C: Stakeholder Engagement**

Description of Stakeholder Input

The State used three primary methods to solicit stakeholder input on the targets in the SPP/APR and on the State Systemic Improvement Plan (SSIP). The first method was the development of a two-way dashboard communication system between the SEA and stakeholders. The SEA published detailed information related to target setting and improvement activities, and communicated with the community about why and how to give input on the SPP/APR including target setting. This information was made available in both English and Spanish on individual indicator dashboards, displaying for each indicator data, target options, and the survey response form. This detailed information also included fact sheets with historic performance, target options, and an overview of the indicator. Additionally, the State created presentation slides explaining how performance is measured for each indicator, and providing the State’s rationale for suggesting different target options.   
  
The second method for soliciting broad input was through virtual engagement events. The State hosted three, day-long virtual events open to the public. Each event focused on a different set of Part B and C indicators, organized around central questions pertaining to life after high school, inclusion of families and students in process and environments, and student performance in key areas. During these engagement events, SEA staff shared information and hosted small group conversations with stakeholders, soliciting input on targets and improvement activities for each performance indicator.   
  
The third mechanism for soliciting broad input was through targeted engagement sessions hosted by Agency staff who have ongoing relationships with specific organizations.   
  
Through the large scale and targeted engagement sessions, stakeholders both provided input directly and came away with resources to share with their communities about how to provide input to the State.   
  
Since soliciting input from stakeholders, the State set mostly ambitious targets for indicators as required in this reporting period, revised baselines to indicators as required, and learned more about what we need to do facilitate authentic and ongoing engagement with constituents.  
  
Regarding the SSIP, stakeholder input gathered through the above three mechanisms resulted in the State maintaining the State Identified Measurable Result (SIMR) focus area of early reading. This input confirmed the direction for planned changes to the SSIP to provide increased support for general and special education staff and administrators statewide in areas of effective reading instruction, and to continue working internally at the SEA to better align and integrate initiatives targeting early reading. Input also resulted in the state establishing targets for the next SPP/APR reporting cycle.

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

In advance of input sessions with all stakeholders, the State provided SSIP relevant information specifically to families. SEA staff and staff from the Parent Training and Information Center (FACT) led virtual sessions to preview topics that would be discussed in larger engagement sessions. State staff are intentionally building closer relationships with FACT and families regarding SSIP work and reading outcomes through regular virtual sessions and are making plans to regularly engage over the next reporting period.  
   
The State also reached out to key advocacy organizations in the state, to start building closer partnerships to be able to more effectively engage in the future. These organizations included groups focused on dyslexia and inclusion, priorities across many initiatives. The State communicated through social media channels and reached out directly to community members previously not included in SPP/APR and SSIP engagement. The State noticed an increase in the number of participants in engagement activities representative of voices of the Latinx community. By asking for input and accepting feedback from partner organizations focused on specific interest areas in communities, the State is shifting to a proactive model of engagement.   
  
The State asked contracted partners to provide input and share data about which strategies in schools they believe lead to greatest improvements in student outcomes, and for suggestions for ways to improve student outcomes more equitably. The State will continue to develop a predictable structure for collaborating with contracted partners and other stakeholders into the next reporting period. These relationships and structures will inform future updates to the SSIP by allowing for the SEA to review implementation and progress data as contractors are delivering services.  
  
The State used a feedback loop in SPP/APR and SSIP target setting and input gathering. After hosting virtual engagement sessions in December and finalizing targets, the State shared back out final targets and strategy updates with stakeholders. The State also provided stakeholders with information related to what the State will be asking in the future from stakeholders, further solidifying a two-way communication structure.

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

YES

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

Stakeholders shared concern about the proposed targets for the SSIP. During engagement, the state proposed more conservative and more robust targets. There was low consensus among stakeholders about SSIP targets, with 60% of survey participants thinking the conservative targets were not ambitious enough, and 60% of participants reporting the robust targets were too ambitious. The State set targets in between the conservative and robust options. Stakeholders expressed concern that the State has already made multiple attempts at improving reading outcomes for students experiencing disability and were seeking more information about how these efforts will yield different results. Stakeholders expressed doubt at the State’s ability to change student outcomes without involvement from general education staff and without increased attention in general education settings to the fundamentals of reading instruction. The State addressed these concerns, leading stakeholder engagement with the recognition that students experiencing disability are general education students first, and any engagement is incomplete without input and discussion among general and special educators together. The State is addressing this concern in tandem with teams focusing on early reading in general education. The development of a new K-12 literacy framework and associated professional development resources during the next years of SSIP implementation will further address the matter. The State shared plans with stakeholders to offer increased resources and support to teachers to address the concerns about the inconsistent use of evidence-based reading instructional methods, and knowledge levels of general education staff on how to best support students with a specific learning disability in reading. The State agrees with stakeholder concerns about SEA capacity to make statewide changes, and plans to continue refining processes for partnering with contractors and coaching providers in delivery of services aligned with these goals.  
  
Families also expressed a desire to be more involved in supporting student progress and in wanting to be versed on topics such as understanding data and pre-referral and IEP processes. Some stakeholders shared that they want to help other families understand school processes, and the State could be doing more to support parent and family involvement. The State is addressing this concern by making plans to work closer with the State parent training and information center, FACT Oregon, and developing ongoing opportunities for collaboration and learning with families.

**Additional Implementation Activities**

**List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.**

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

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

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

The baseline was reset during this reporting cycle and no data was available in FFY 2019. The State decided to reset the baseline as new targets were being set because the prior baseline was set when the State used a different summative ELA assessment. Progress from baseline to targets could not be sufficiently evaluated because of using different measures. FFY 2018 was selected as the new baseline year because this is the most recent year for which there was typical participation data among grade three students.  
  
The State is unable to report complete SiMR data for the FFY 2020 reporting period due to COVID-19. Data completeness was impacted for all state assessments during the 2020-2021 school year due to COVID-19, with only 32.01% of grade three students experiencing disability participating in the ELA Smarter Balanced assessment in Spring 2021. The Smarter Balanced Assessment is the State’s summative measure used to report on the SiMR throughout all phases of SSIP reporting. Due to the lack of complete and representative summative assessment data from the 2020-2021 school year, the State is unable to draw useful conclusions about the SiMR or the relationship between activities and student outcomes.  
   
COVID-19 impacted the State’s ability to collect data for this indicator because a high rate of families chose to keep students out of in-person settings during Spring 2021, due to risk of COVID-19 infection. The State did not permit schools to administer the assessment virtually, because of concerns about equitable support in student homes and test item security. The State has a State regulation permitting families to opt-out of State assessments, including the ELA Smarter Balanced Assessment. When compared to previous years, the State saw the assessment opt-out rate increase for both students with and without disabilities during the 2020-2021 school year.  
   
The State took steps to mitigate the impact of COVID-19 on the data collection and on the supports to LEAs to be able to provide meaningful assessment during disrupted learning. The State provided LEAs with guidance for school operations during COVID-19, including guidelines on assessment practices and COVID-19 health and safety measures to prevent the spread of infection. The State required each LEA to submit an operational blueprint, describing how the schools will meet State expectations for continuing learning while prioritizing health and safety. Equity and access were considered at the forefront of State guidance in all areas of school operations, including planning for meaningful assessment of student learning within the possible school models of in-person, hybrid, and comprehensive distance learning. While each LEA individually offered instruction based on changing local health metrics instruction, the State required LEAs to offer the Smarter Balanced Assessment in person.  
  
By only offering the assessment in person, schools helped maintain the reliability of scores for those individual students who tested. As the number of in-person learning days was reduced due to COVID-19, schools balanced the limited instructional time with the time needed to conduct assessment. Because of the interruptions to school, students did not have the opportunity to experience the entirety of grades two and three curriculum and instruction. To draw valid conclusions about what students can know and do with respect to the grade three standards, it is assumed that students would have had instruction around these standards. Because of extended learning interruption, the Smarter Balanced ELA assessment may not be valid for drawing conclusions about longitudinal performance for students statewide.  
  
The State also proactively planned to mitigate future impacts to data collection due to COVID-19. The State received approval from the US Department of Education to reduce the number of assessments required in ELA, math, and science during the 2021-2022 school year. This is intended to increase participation in those assessments offered, removing the barrier for schools of balancing instructional and assessment time in the schedule during potential future learning interruptions.

## 17 - Prior FFY Required Actions

None

## 17 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.  
  
The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.  
  
The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

## 17 - Required Actions

# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

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

**Name:**

Tenneal Wetherell

**Title:**

Assistant Superintendent

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**Submitted on:**

04/28/22 4:26:37 PM

# ED Attachments

  

1. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection [↑](#footnote-ref-3)
3. Percentage blurred due to privacy protection [↑](#footnote-ref-4)
4. Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator. [↑](#footnote-ref-5)
5. 1 Data suppressed due to privacy protection [↑](#footnote-ref-6)
6. [↑](#footnote-ref-7)
7. [↑](#footnote-ref-8)
8. [↑](#footnote-ref-9)
9. [↑](#footnote-ref-10)
10. [↑](#footnote-ref-11)
11. [↑](#footnote-ref-12)
12. [↑](#footnote-ref-13)
13. [↑](#footnote-ref-14)
14. [↑](#footnote-ref-15)
15. [↑](#footnote-ref-16)
16. [↑](#footnote-ref-17)
17. 1 Data suppressed due to privacy protection [↑](#footnote-ref-18)
18. [↑](#footnote-ref-19)
19. [↑](#footnote-ref-20)
20. [↑](#footnote-ref-21)
21. [↑](#footnote-ref-22)
22. [↑](#footnote-ref-23)
23. 1 Data suppressed due to privacy protection [↑](#footnote-ref-24)
24. [↑](#footnote-ref-25)
25. [↑](#footnote-ref-26)
26. 1 Data suppressed due to privacy protection [↑](#footnote-ref-27)
27. [↑](#footnote-ref-28)
28. [↑](#footnote-ref-29)
29. [↑](#footnote-ref-30)