

**STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B**

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

**For reporting on  
FFY 2021**

**New Mexico**



**PART B DUE February 1, 2023**

**U.S. DEPARTMENT OF EDUCATION  
WASHINGTON, DC 20202**

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

In Federal Fiscal Year (FFY) 2021, the State of New Mexico has made great gains, as the State continues to move forward from the COVID-19 pandemic. Of the 17 indicators that are in this State Performance Plan (SPP)/Annual Performance Report (APR), 5 have sub-indicators making it a total of 51 indicators when sub-indicators are included. In FFY 2021, the State rates for 33 indicators/sub-indicators improved from the rates in FFY2020. The state rates for 11 indicators/sub-indicators did decrease over the FFY2020 rates. While the rates for 3 compliance indicators, 4B Suspension and Expulsion, 9 Disproportionate Representation and 10 Disproportionate Representation by Disability Category remained the same and the state fully complied with requirements for these indicators.

A few of the highlights in this SPP/APR are below:

- Indicator 1 Graduation: The State's graduation rate for youth with IEPs increased from 86.46% in FFY2020 to 90.98% in FFY2021. The target of 73.83% was surpassed.
- Indicator 2 Drop Out: The State's dropout rate for youth with IEPs decreased from 10.57% in FFY2020 to 7.21% in FFY2021. The target of 22.75% was surpassed.
- Indicator 3D Gap in Proficiency Rates: In reading and math, the gap in proficiency rates between all students and those with IEPs as performed on the statewide assessment, decreased as follows:
  1. Reading, Grade 4 gap in proficiency rates decreased from 39.82 in FFY 2020 to 27.02.
  2. Reading, Grade 8 gap in proficiency rates decreased from 31.27 in FFY 2020 to 26.27.
  3. Reading, High School in New Mexico this is grade 11, gap in proficiency rates decreased from 39.45 in FFY 2020 to 26.79.
  4. Math, High School/grade 11, gap in proficiency rates decreased from 28.86 in FFY 2020 to 13.81.
- Indicator 4A Suspension/Expulsion Rates greater than 10 days: Rate improved from .71% in 2020 to 0%.
- Indicator 7 Preschool Outcomes, three areas which include the following, A-B below, all improved from FFY2020 rates and met the established targets.
  - A. Positive social-emotional skills
  - B. Acquisition and use of knowledge and skills
  - C. Use of appropriate behaviors to meet needs

That State will continue to strive for excellence and importantly, improve student outcomes.

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

Number of Local Education Agencies (LEAs):

LEA groups in the state are comprised of school districts, state charter schools and State Supported Schools (SSSs). The number of LEAs fluctuate each year due to the number of state charter schools which open, close, or convert to local charter schools in a particular year. In Federal Fiscal Year (FFY) 2021, the number of LEAs increased by one as an additional state charter school opened. The number of school districts and SSSs remained the same. In total, the State had 148 LEAs of which 89 were school districts, 53 were state charter schools and 6 were SSSs.

Date Reporting:

State statute identifies the dates LEAs must report data to the State via the Student Teacher Accountability and Reporting System (STARS), which is the State's database. LEAs are required to report data four times each school year, which are identified as the 40-day, 80-day, 120-day and End of Year (EOY) reporting periods. 40-day reporting occurs the second Wednesday in October, 80-day reporting occurs the first Wednesday in December, 120 day occurs the second Wednesday in February and EOY occurs the last day of each LEA's school year.

Once LEAs submit data into the STARS database, State staff complete a review of the data to ensure there are no errors and the data is valid. The timeliness of the data is also monitored to ensure State established submission timelines are met. These reviews are completed for each of the State's four reporting periods. A general supervision/monitoring review of the data is also completed to ensure that LEAs are complying with the requirements of the Individuals with Disabilities Education Act (IDEA), Part B as well as state requirements.

While most data reported to OSEP and the U.S. Department of Education originates from STARS, some of the data is compiled outside of the STARS database, the mandated reporting periods, and outside of the Special Education Division (SED). Various departments within the State Education Agency (SEA) compile and report data on students with disabilities. Graduation and assessment data is compiled and reported by the Accountability Division. Dropout data is compiled and reported by the Information Technology (IT) department. The EdFacts Coordinator for our State is a member of the IT team. Resolution Session and Mediation data is compiled by the Office of General Counsel. The SEA also utilizes contractors for Indicators, 4, 9, 8, 10 and 14. The contractors administer the indicator 8 and 14 surveys used for data collection, they compile the data, and then provide a report to the SED.

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

148

#### General Supervision System:

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

In the State of New Mexico, the New Mexico Public Education Department (NMPED) is the State Education Agency (SEA) and is responsible for implementing the requirements of the Individuals with Disabilities Education Act (IDEA), Part B. This responsibility is carried out mainly by the Special Education Division (SED), within the NMPED. The SED also collaborates with other divisions and departments in serving students with disabilities. These collaborations ensure that all requirements are implemented, including the oversight of Local Education Agencies (LEAs) and improved outcomes for students with disabilities are supported.

The State has systems established to ensure that the IDEA Part B requirements are met. The main monitoring system is data reviews of LEA data. Reviews are completed four times each school year for all the compliance indicators and many of the results indicators. The STARS system, the State's

database, has business rules built in to identify violations or potential violations of the requirements of IDEA Part B and the state's requirements by causing errors or warnings in reports to occur for each indicator. When an error is identified during the data monitoring reviews, LEAs must immediately address the issue(s), either by correcting the data in STARS or providing an explanation for the error. Some are data entry issues, and the LEA corrects the issue within the timeframe allotted, while others are issues of non-compliance. Once non-compliance is identified, the LEA must demonstrate correction of the individual case of non-compliance, as well as compliance with the regulatory requirements, as soon as possible and at the maximum, within one year.

Non-compliance is also identified through the dispute resolution processes, desk-top monitoring, reviews of Individualized Education Programs (IEPs) and reviews conducted by other divisions or bureaus within the NMPED. Once non-compliance is identified, regardless of the source, LEAs enter into a cycle of correcting the individual case of non-compliance and the regulatory requirements. The correction cycle consists of the following: LEAs are asked to complete a Root Cause Analysis (RCA) or Self-Assessment (SA) depending on the indicator the LEA is non-compliant with. Once the LEA submits the completed RCA or SA, SED staff review the information in the RCA to get a complete picture of the issues which may be causing the non-compliance. SED staff then develop a corrective action plan (CAP) which identifies the steps the LEA must take to correct the issues causing non-compliance with the regulatory requirements. In addition, a review of LEAs updated data is completed to verify that the individual case of non-compliance are corrected and subsequent data is reviewed to confirm that the regulatory requirements are being properly implemented.

The CAP also identifies technical assistance and professional development the LEA may need and sets timelines for the LEA to ensure the needed support is received. This is important to ensure that LEAs have a full understanding of the requirements and are appropriately implementing the requirements. These items must also be completed for the LEA to demonstrate they are meeting the regulatory requirements. Additional information specific to each indicator can be found in each section of this SPP/APR.

#### **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's Targeted Technical Assistance System (TTAS) is designed to ensure timely delivery of high quality, evidenced based technical assistance and support to LEAs. The goals of the State's TTAS are to improve LEA special education programs, systems and operations while sustaining compliance and cultivating performance. The TTAS is also designed to inform the need for other technical assistance and new initiatives to respond to LEA needs.

The data gathered through the various systems (monitoring, self-assessment, Student Teacher Accountability Reporting System (STARS), due process hearings, state complaints, etc.) are used to identify the need for specific statewide technical assistance. Data are examined by State SED staff to gain a full understanding of statewide trends and to determine the type of technical assistance needed. Statewide technical assistance is provided regionally with the support of Regional Education Cooperatives (RECs), which provide evidence-based targeted technical assistance to LEAs within each REC region.

Individual LEA data is also examined by State SED staff to determine LEA specific issues which require targeted technical assistance. The LEA's annual determination along with any issues with significant disproportionality, are key factors in determining an LEA's need for targeted technical assistance. Once an LEA's need is determined, State staff identify evidence-based technical assistance to provide to the LEA and include this information within a CAP if the LEA has one, or otherwise a technical assistance plan is developed. The State has many state and national organizations that provide technical assistance on evidence-based practices to draw support from. State SED staff work with the LEA to coordinate these efforts and monitor the support provided to ensure the technical assistance needed by LEAs is received.

As another resource of technical assistance for LEAs, the State develops numerous manuals and guidance documents to assist LEAs in implementing the requirements of IDEA Part B. These manuals are available on the SED website.

#### **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's professional development system provides opportunities for LEA staff, serving students with disabilities, to gain skills to effectively provide services that improve results for students with disabilities. Professional development is provided year-round for special education directors, special education teachers, general education teachers and related service providers. The topics of the professional development provided are targeted to areas of need identified to ensure needed skills are developed. In addition, various divisions within the State collaborate to provide professional development opportunities for LEA staff, which is especially important as students with disabilities are integrated into all areas. The trainings are usually held as webinars, are recorded and made available on the website for LEA staff to refer to as needed or view if they did not have the opportunity to participate during the live session.

Two Special Education Director Conferences are held each year. This is usually done in person; however, due to the COVID-19 pandemic these were held online via Zoom. A year-long webinar series is held on various special education topics. If staff are unable to attend a particular webinar or if any would like to refer to the information, the presentations are recorded and available to be accessed at a later date and time. Each year, a STARS training on special education data is provided at the annual STARS conference.

LEAs also have the opportunity to request training from the SED. This can be provided as an individual training specifically to the LEA or can be offered to all LEAs depending on the need and preference of the requesting LEA.

#### **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).**

Mechanism for Broad Stakeholder Input:

During FFY2021, the State held stakeholder meetings as the mechanism for soliciting broad stakeholder input on the State's targets in the SPP/APR and any subsequent revisions. The meetings were grouped by indicators which have an impact on one another. Stakeholder groups reviewed the FFY2020 data, and the baselines and targets established for FFY 2020-2025. The groups analyzed the data to determine if established baselines and targets established in the prior year, were still an accurate depiction of the state's performance trajectory, with the exception on Indicator 3B. The baselines and targets were re-established due to changes in assessments and the unavailability of data necessary to previously establish baselines and targets for this indicator. The meeting information for these targeted groups was available on the Special Education Division (SED) website. Flyers were created and LEAs were asked to disseminate the information to their staff, parents, and students. Other groups were sent individual invitations to each of the meetings, such as parent advocacy groups and tribes.

The stakeholder groups consisted of parents, parent advocacy groups, LEA staff and professionals with experience in the focus area. In total, there were

5 targeted stakeholder groups as follows:

- Group one worked on graduation, drop-out and post-school outcomes data (Indicators 1, 2 and 14).
- Group two worked on statewide assessments and learning environments data (Indicators 3 and 5).
- Group three worked on preschool learning environments and outcomes data (Indicators 6 and 7).
- Group four worked on suspension and expulsions (Indicators 4a) and parent involvement data (Indicator 8).
- Group five worked mediations and resolution sessions (Indicators 15 and 16).

In addition to the stakeholder meetings indicated above, separate meetings were held for the IDEA State Advisory Panel and tribes. These two groups separately reviewed data, targets and baselines and provided input for all indicators.

#### Feedback Summary:

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

#### Indicator 17:

ECLIPSE is a New Mexico Public Education Department, Special Education Division (SED) Program that addresses the State Performance Plan (SPP) Indicator 17, Results Driven Accountability (RDA) program administered by the SED. The purpose of Indicator 17 is to improve academic results for children with disabilities in grades Kindergarten through third grade. The Indicator 17 program is characterized in its name Excellence from Coaching in Literacy for Intensive Preparation in Special Education (ECLIPSE). The ECLIPSE program engaged stakeholders in key improvement efforts with the following strategies:

1. ECLIPSE program coordinators presented data and program updates to the state IDEA Panel (members include: parents, advocates, state staff, and educators) during the 2021-2022 school year. IDEA Panel members participated and were engaged in the ECLIPSE program presentations. An ECLIPSE IDEA Panel committee met as a small group to discuss the program at the conclusion of the day. The ECLIPSE IDEA Panel committee provided EOY qualitative program feedback via a Google survey. Survey results indicated that panel members felt the program is making good progress in improving literacy outcomes for students with disabilities. A consistent recommendation among responses included increasing parent involvement in the program.
2. One ECLIPSE stakeholder meeting was held during 2021-2022 via the Zoom online platform. Stakeholders included the ECLIPSE staff, Regional Education Cooperative Executive Directors (REC'S), Special Education Directors, ECLIPSE Principals, ECLIPSE Special Education Teachers, CORE NMSU Director, and Regional Education Cooperative Contractors. Stakeholders were provided with ECLIPSE program details for the school year and stakeholders provided verbal feedback about the ECLIPSE program at the conclusion of the meeting.
3. Parent engagement stakeholder meetings were held via online platforms and in person events to provide direct explicit literacy training to parents via hands-on activities. Once trained, parents could engage their students' in fun literacy activities at home. Regional Education Cooperative (REC) contractors dropped off tote bags with the hands-on literacy materials to each school prior to the online parent training. Parent survey data following the training indicated favorable results; parents were pleased with the literacy tools that could be utilized at home with their child. Since some of the training was online, many parents along with their child/ren attended the interactive family literacy event.
4. The ECLIPSE team interviewed 6 school participants – 4 administrators and two teachers. The interviews were coded and added for recurrent themes. Common themes for improving the program included communicating clearer participation expectations and sharing timelines earlier in the school year. Administrators felt teachers needed more support with data analysis. Special education teachers felt they did not have enough time to collaborate with general education teachers, which limited their ability to support students effectively.
5. An online end of year survey was sent to all ECLIPSE stakeholders as the 2021-2022 school year ended. The feedback from this survey supported the ongoing development of an ECLIPSE strategic plan focused on short-term goals, intermediate goals, and longer-term goals.

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

NO

#### **Number of Parent Members:**

43

#### **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 were invited to all five Stakeholder Engagement meetings described in the previous section. State staff reached out to staff from the Parent Training Center staff to assist the state in disseminating meeting information to parents. Staff from the two Parent Training Centers in the state, the Education for Parents of Indian Children with Special Needs (EPICS) and Parents Reaching Out (PRO) were also invited to participate in the Stakeholder meetings. The Native American Disability Law Center was also asked to assist in sharing the stakeholder meeting information with parents as well and their staff was also invited to be a part of the meetings. A separate meeting for the State Advisory Panel members, which include the parents that service on the panel was also held.

All parents that participated in the stakeholder meetings were engaged in setting targets, analyzing data, developing improvement strategies and evaluating progress. These activities were completed at each stakeholder meeting. At the beginning of each meeting, the indicator and data are explained. Next, stakeholders had the opportunity to analyze data, evaluate progress, develop improvement strategies and set targets. At every meeting, parents are always given the opportunity to speak first. If no parent has input, the floor is then opened up to the rest of the stakeholders.

#### **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 the following activities 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 held a parent summit. The summit included various training sessions for increasing parents' capacity and knowledge of special education and parental rights.
- State staff participated and presented at the two Parent Training Center conferences. The indicators were presented and parents provided input.
- During each stakeholder meeting, the data was presented and explained prior to the input sessions allowing parents to build capacity.
- Information is posted on the Special Education Division website for parents to review on the State Performance Plan/Annual Performance Report and

refer to.

- Parent engagement stakeholder meetings were held via online platforms and in-person events to provide direct explicit literacy training to parents via hands-on activities. Once trained, parents could engage their students in fun literacy activities at home. Parent survey data following the training indicated favorable results; parents were pleased with the literacy tools that could be utilized at home with their child. Since some of the training was online, many parents along with their children attended the interactive family literacy event.

#### **Soliciting Public Input:**

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

From March to May 2022, the State conducted five meetings via Zoom with stakeholders. The Zoom platform was used rather than in-person meetings due to hesitancy for in-person meeting due to the COVID-19 pandemic. As indicated in previous sections, the target indicators were divided into 5 groups and organized based on relationship. To see how the groups were organized for the stakeholder engagement process, please refer to the Broad Stakeholder input section of this SPP/APR. At each meeting, input was sought on the required components of setting targets, analyzing data, developing improvement strategies, and evaluating progress. Information for each of the meetings including topics, dates, times and links to each of the five meetings was made available on the stakeholder engagement webpage of the SED website. Identified stakeholders such as parent advocacy groups, associations and other stakeholder such as LEA staff were sent invitations to the meeting.

June to November 2022, the state aggregated and disaggregated the data, synthesized and analyzed the data, reviewed quantitative and qualitative data and worked with internal stakeholders in preparation for the upcoming FFY2021 SPP/APR. The final data was compiled, reviewed by the State's Special Education Division, management team, who accepted the final targets and baselines as established in the FFY2020 SPP/APR for FFY2021. The accepted baseline year data and targets are used in this APR.

#### **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.**

All the data collected over the course of the stakeholder engagement process, is available and will be made available on the Special Education Division's, Stakeholder Engagement webpage <https://webnew.ped.state.nm.us/bureaus/special-education/stakeholder-engagement/>. This site includes PowerPoint presentations and other information collected during the engagement process.

#### **Reporting to the Public**

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

The State has a District Profile Reporting System (DPRS) for publicly reporting the performance of each LEA on the targets in the SPP/APR. The DPRS contains data starting from FFY2019 data and will soon include FFY2021. The system contains two levels of data, one level is the general public view which contains suppressed (masked) data for indicators with less than 10 students reported. The general public can look at this level of data for each LEA. The second level of data views is the LEA view. This view requires a login and password as the data is not suppressed (unmasked). Having non-suppressed data available for LEAs is beneficial as they are able to track the LEA's performance over time and can analyze data for program improvement purposes.

Once on the DPRS site, general public users must click on General Public Data View. In the General Public Data View, users can select a Local Education Agency (LEA) to view data for that LEA. Once the LEA is selected, there are two buttons available, a Results Indicator Button and a Compliance Indicator Button. When the Results Indicator button is clicked, the data for the results (target) indicators are displayed. When the Compliance Indicator button is clicked, the data for the compliance indicators will be displayed. Each indicator contains the state target, district (LEA) rate and if the State target was met.

The DPRS can be found at: <http://webed.ped.state.nm.us/sites/DPR/SitePages/DPRHome.aspx>. To get to the site, go the New Mexico Public Education Department website, click on Offices/Programs in the banner at the top of the page, click on Special Education, click on the gold button labeled "Visit the District Profile Reporting System" in the middle of the Special Education page. FFY2021 data will be made available in the DPR site within 120 days following the submission of this SPP/APR.

A complete copy of the FFY2021 SPP/APR will also be posted on the SED webpage located at: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. To get to the site, go the New Mexico Public Education Department Website, click on Offices/Programs in the banner at the top of the page, click on Special Education, on the left banner, click on District Data, click on FFY2021 Annual Performance Report. FFY2021 DPR data will be made available in the DPR site on May 1, 2023.

#### **Intro - Prior FFY Required Actions**

The State's IDEA Part B determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 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 2021 SPP/APR submission, due February 1, 2023, 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 2020 SPP/APR**

The State received technical assistance from the following technical assistance resources and the actions taken are also listed below.

1. Office of Special Education Programs (OSEP): State staff have monthly calls with the OSEP lead assigned to the State. The meetings are targeted to areas need identified by the State or by OSEP. Staff from other departments within OSEP are brought in to support the State as well. The information provided by OSEP helped State staff to identify strategies and to make sound decisions for improving outcomes for students with disabilities.

2. OSEP, State Personnel Development Grant Support: Monthly meetings with program officer. At these meetings, State staff are informed of our grant balances on which the State we can draw down funds. Also, the staff are connected with staff from other States to learn about how the State has

implemented the SPDG; which in turn supported New Mexico in developing a reworked SPDG program. The program officer links the State to resources to support any challenges or barriers the State may encounter.

3. IDEA Data Center (IDC): State staff have monthly calls with IDC staff to guide the State Systemic Improvement Plan (SSIP) implementation process including support in developing an appropriate New Mexico SSIP Evaluation Plan for FFY 2021. State SSIP staff also belong to the IDC SSIP Data Quality Peer Group and the Data Supervisor belongs to the Data Manager Data Quality Peer Group. These groups help State staff to learn more on the requirements and how to correctly implement the requirements of IDEA as well as meeting the reporting requirements. The IDC State lead is always available for questions and this support further enhances the State's ability to implement improvement efforts. The actions the state took were utilizing the tools, resources available and implement into the work completed by the SED.

4. National Technical Assistance Center on Transition (NTACT): The Collaborative (NTACT:C): State staff have bimonthly meetings with NTACT:C staff to discuss transition services and tools that are available which the State can implement. In addition, support on ways to improve transition methods is offered. Training opportunities are also made available to State staff which they attend. The state will begin implementing a quality IEP review in FFY2022 in addition to the compliance reviews already completed.

### **Intro - OSEP Response**

While the State has publicly reported on the FFY 2020 (July 1, 2020-June 30, 2021) performance of each local educational agency (LEA) located in the State on the targets in the State's performance plan as required by section 616(b)(2)(C)(ii)(I) of the IDEA, those reports do not contain the required information. Specifically, the state has not publicly reported the participation and performance of children with IEPs on statewide assessments, the gaps in proficiency rates for children with IEPs and for all students against grade level academic achievement standards, the percent of children with IEPs aged 3,4, and aged 5 who are enrolled in a preschool program attending a Separate special education class, separate school, residential facility, and home.

The State's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2022 determination letter informed the State that it must report with its FFY 2021 SPP/APR submission, due February 1, 2023, 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**

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

The State's IDEA Part B determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 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 2022 SPP/APR submission, due February 1, 2024, 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.

## Indicator 1: Graduation

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

#### Data Source

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

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

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

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

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

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2017	72.83%

FFY	2016	2017	2018	2019	2020
Target >=	77.40%	77.40%	77.40%	77.40%	73.33%
Data	61.85%	61.54%	65.60%	64.66%	86.46%

### Targets

FFY	2021	2022	2023	2024	2025
Target >=	73.83%	74.83%	76.33%	78.33%	80.83%

### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 1, Graduation was discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,855
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	0

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	37
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	147

**FFY 2021 SPP/APR Data**

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,855	2,039	86.46%	73.83%	90.98%	Met target	No Slippage

**Graduation Conditions**

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

The New Mexico statute 22-13-1.1 establishes the requirements for graduating from high school with a regular high school diploma. A cohort system is used which is based on the year a student enters grade nine, for both coursework and competency in five content areas: reading, writing, mathematics, science, and social studies. Students must complete 24 credits of high school coursework in math (4), English (4), science (3), social studies (3.5), PE (1), career or foreign language(1), and electives (7.5). Beginning in school year 2019-2020, students may demonstrate competency by any of the methods from approved options which include: grade 11 required assessments (e.g., SBA, Transition, PARCC scores from previous years, the SAT in spring 2020 and beyond); nationally recognized tests like ACT, ACCUPLACER, ASVAB, AP, etc. For Cohorts 2020 and 2021, school districts may use locally determined demonstrations of competency. New Mexico Administrative Code 6.19.7 and 6.29.1.9 provides the specific requirements.

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

YES

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

Students with Disabilities have three graduation options. These graduation options enable IEP teams to develop a program of study that is the most appropriate for preparing a student to achieve post-secondary goals and maintain the integrity of the high school diploma. The first graduation option is the Standard Option as described in the previous section. The second is the Modified Option. Students on the Modified Option will take general assessments, with accommodations as indicated in the student's IEP. The students IEP team will also establish individualized passing scores for determining demonstration of competency. End of Course (EoC) exams can be used to demonstrate graduation competency. The third is the Ability Option. Students following the Ability Option will take the state's alternative assessment as the academic achievement assessment rather than the general assessment. IEP teams will set individualized cut scores for demonstrating competency.

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

The Special Education Division (SED) continues to strive to support students with disabilities to complete high school with a regular high school diploma. The SED successfully implemented the Stay in School Project at two Local Education Agencies (LEAs) with the lowest graduation rates among students with disabilities in the state. These particular LEAs also had large Native American and Hispanic student populations, respectively. The graduation rates for these LEAs have increased since the LEA's have participated in the project. The State is considering further investments of state funds to continue and expand the project to include additional LEAs throughout the state.

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

**1 - Required Actions**



## Indicator 2: Drop Out

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

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

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

**Measurement**

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

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

## 2 - Indicator Data

**Historical Data**

Baseline Year	Baseline Data
2013	24.75%

FFY	2016	2017	2018	2019	2020
Target <=	22.97%	22.97%	22.97%	22.97%	23.75%
Data	26.94%	22.84%	25.79%	23.78%	10.57%

**Targets**

FFY	2021	2022	2023	2024	2025
Target <=	22.75%	21.75%	20.75%	19.75%	18.75%

**Targets: Description of Stakeholder Input**

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting including where Indicator 2, Dropout was discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

**Prepopulated Data**

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,855
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	0

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	37
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	147

**FFY 2021 SPP/APR Data**

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
147	2,039	10.57%	22.75%	7.21%	Met target	No Slippage

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

The New Mexico Administrative Code (NMAC), 6.29.1.9(K)(13)(j) Procedural Requirements defines a dropout as a student who does not return to complete the program of study.

For data collection purposes, the state includes students in the following categories as a dropout: dropouts, runaways, GED recipients (in New Mexico students are required to drop out of the secondary educational program in order to pursue the GED certificate), expulsions, status unknown, students who moved and are not known to be continuing in another educational program, and other students who exited from special education without a valid exit reason.

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

NO

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

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

The Special Education Division (SED) continues to strive to support students with disabilities to complete high school with a regular high school diploma. The SED successfully implemented the Stay in School Project at two Local Education Agencies (LEAs) with the lowest graduation rates and highest drop-out rates among students with disabilities in the state. These particular LEAs also had large Native American and Hispanic student populations, respectively. The drop-out rate for these LEAs has decreased and graduation rates have increased since the LEA's have participated in the project. The State is considering further investments of state funds to continue and expand the project to include additional LEAs throughout the state.

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

**2 - Required Actions**

## Indicator 3A: Participation for Children with IEPs

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3A - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	6.50%
Reading	B	Grade 8	2020	6.17%
Reading	C	Grade HS	2020	4.06%
Math	A	Grade 4	2020	7.71%
Math	B	Grade 8	2020	6.23%
Math	C	Grade HS	2020	4.07%

#### Targets

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

**Targets: Description of Stakeholder Input**

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 3, Academic Achievement Standards were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	4,103	4,678	3,617
b. Children with IEPs in regular assessment with no accommodations	881	985	767
c. Children with IEPs in regular assessment with accommodations	2,696	2,940	1,719
d. Children with IEPs in alternate assessment against alternate standards	217	256	243

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	4,103	4,678	3,617
b. Children with IEPs in regular assessment with no accommodations	864	954	767
c. Children with IEPs in regular assessment with accommodations	2,718	2,961	1,720
d. Children with IEPs in alternate assessment against alternate standards	217	256	243

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

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

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	3,794	4,103	6.50%	95.00%	92.47%	Did not meet target	No Slippage
B	Grade 8	4,181	4,678	6.17%	95.00%	89.38%	Did not meet target	No Slippage
C	Grade HS	2,729	3,617	4.06%	95.00%	75.45%	Did not meet target	No Slippage

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

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	3,799	4,103	7.71%	95.00%	92.59%	Did not meet target	No Slippage
B	Grade 8	4,171	4,678	6.23%	95.00%	89.16%	Did not meet target	No Slippage
C	Grade HS	2,730	3,617	4.07%	95.00%	75.48%	Did not meet target	No Slippage

**Regulatory Information**

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

**Public Reporting Information**

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

Assessment data for students with disabilities can be found on the Special Education Division page under District Data: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment data for students without disabilities can be found on the Accountability Division webpage at <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>

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

This indicator has been greatly impacted by the COVID-19 pandemic over the past two years. In 2019-2020, the State received a waiver from the U.S. Department of Education (DOE), waiving the requirement to administer the statewide assessments to all students due to the pandemic. In 2020-2021, the State received another waiver from the U.S. DOE, from meeting the Every Student Succeeds Act (ESSA), 95% statewide assessment participation rate requirement for all students. The State then gave LEAs the opportunity to self-elect to administer or not administer the statewide assessments. The majority of the LEAs elected to not administer the statewide assessment in school year 2020-2021. In FFY2021, the participation rates have improved from the prior year.

**3A - Prior FFY Required Actions**

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

In its FFY 2021 SPP/APR, the State must clarify the baseline year and data being used to report on this indicator.

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

The FFY2020 data is posted on the New Mexico Public Education Department website, Special Education Division page. The link to the page is here: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The following wording, "Assessment Data for FFY2020 OSEP Required Actions", must be clicked on to access the data. Depending on computer set-up, the Excel spreadsheet containing the data may need to be opened.

District Profile Reports can be found on the District Profile Report site at this link: <https://webnew.ped.state.nm.us/sites/DPR/SitePages/DPRHome.aspx>.

The data reported in the FFY2021 SPP/APR is based on data from school year 2021-2022. It is important to note, the data for this indicator is automatically populated with data reported in school year 2021-2022, EdFacts data submissions.

**3A - OSEP Response**

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, if any, participating in 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.

### **3A - Required Actions**

Within 90 days of the receipt of the State's 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, 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 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

## 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	2021	8.41%
Reading	B	Grade 8	2021	7.06%
Reading	C	Grade HS	2021	6.32%
Math	A	Grade 4	2021	6.00%
Math	B	Grade 8	2021	2.84%
Math	C	Grade HS	2021	1.99%

### Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	8.41%	8.86%	9.31%	9.76%	10.21%
Reading	B >=	Grade 8	7.06%	7.51%	7.96%	8.41%	8.86%
Reading	C >=	Grade HS	3.32%	3.77%	4.42%	5.37%	6.37%
Math	A >=	Grade 4	6.00%	6.41%	6.82%	7.23%	7.64%
Math	B >=	Grade 8	2.84%	3.25%	3.66%	4.07%	4.48%
Math	C >=	Grade HS	1.99%	2.40%	2.81%	3.22%	3.63%

### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 3, Academic Achievement Standards were discussed. The data for this indicator was a concern for stakeholders due to the following:

1. The State changed assessments from the TAMELA to the Interim-New Mexico Measures of Student Success & Achievement (I-MSSA) for reading and Math for grades 4 and 8. For High School, the assessments for reading and math was changed to the SAT. The first year these assessments were administered to students was the 2020-2021 school year.
2. In school year 2020-2021, the State received a waiver from meeting the 95% participate rate requirement as required by ESSA. The state allowed LEAs to make local decisions to administer or not administer the assessment.
3. New baselines and targets for this indicator were established in FFY2020 using FFY2020 data, which only included data from LEAs that elected to administer the statewide assessment.
4. OSEP did not accept the proposed baselines and targets established in the FFY2020 APR using FFY2020 data.

With these concerns in mind, stakeholders proposed to revise baselines and targets for FFY2021, using FFY2021. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders recommend that the targets hold steady for two more years as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets. Stakeholders are reserving the right to re-establish baselines and targets in FFY2022, due to the concerns listed above.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	3,577	3,925	2,486
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	186	124	58
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	115	153	99

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	3,582	3,915	2,487
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	136	54	19
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	79	57	29

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

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	301	3,577	23.57%	8.41%	8.41%	N/A	N/A
B	Grade 8	277	3,925	11.44%	7.06%	7.06%	N/A	N/A
C	Grade HS	157	2,486	21.34%	3.32%	6.32%	N/A	N/A



FFY 2021 SPP/APR Data: Math Assessment

<b>Group</b>	<b>Group Name</b>	<b>Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards</b>	<b>Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment</b>	<b>FFY 2020 Data</b>	<b>FFY 2021 Target</b>	<b>FFY 2021 Data</b>	<b>Status</b>	<b>Slippage</b>
<b>A</b>	Grade 4	215	3,582	2.47%	6.00%	6.00%	N/A	N/A
<b>B</b>	Grade 8	111	3,915	2.09%	2.84%	2.84%	N/A	N/A
<b>C</b>	Grade HS	48	2,487	9.35%	1.99%	1.93%	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.**

Assessment data for students with disabilities can be found on the Special Education Division page under District Data: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment data for students without disabilities can be found on the Accountability Division webpage at <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>

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

This indicator has been greatly impacted by the COVID-19 pandemic over the past two years. In 2019-2020, the state received a waiver from the U.S. Department of Education (DOE), waiving the requirement to administer the statewide assessments to all students due to the pandemic. In 2020-2021, the state received another waiver from the U.S. DOE. from meeting the Every Student Succeeds Act (ESEA), 95% statewide assessment participation rate requirement for all students. The state then gave LEAs the opportunity to self-elect to administer or not administer the statewide assessments. The majority of the LEAs elected to not administer the statewide assessment. The data reported in this APR is the first to reflect pre-pandemic conditions with the exception of the learning loss which occurred and the change in the assessment administered.

## 3B - Prior FFY Required Actions

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

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

The FFY2020 data is posted on the New Mexico Public Education Department website, Special Education Division page. The link to the page is here: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The following wording, "Assessment Data for FFY2020 OSEP Required Actions", must be clicked on to access the data. Depending on computer set-up, the Excel spreadsheet containing the data may need to be opened.

District Profile Reports can be found on the District Profile Report site at this link: <https://webed.ped.state.nm.us/sites/DPR/SitePages/DPRHome.aspx>.

## 3B - OSEP Response

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

The State revised its targets for this indicator for FFY 2023, 2024, and 2025 for H.S. Reading, and OSEP accepts those targets.

## 3B - Required Actions

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3C - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	7.69%
Reading	B	Grade 8	2020	7.55%
Reading	C	Grade HS	2020	35.71%
Math	A	Grade 4	2020	13.21%
Math	B	Grade 8	2020	1.92%
Math	C	Grade HS	2020	29.63%

#### Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	8.14%	8.59%	9.04%	9.49%	9.94%
Reading	B >=	Grade 8	8.00%	8.45%	8.90%	9.35%	9.80%
Reading	C >=	Grade HS	36.16%	36.61%	37.06%	37.51%	37.96%
Math	A >=	Grade 4	13.62%	14.03%	14.44%	14.85%	15.26%
Math	B >=	Grade 8	2.33%	2.74%	3.15%	3.56%	3.97%
Math	C >=	Grade HS	30.04%	30.45%	30.86%	31.27%	31.68%

**Targets: Description of Stakeholder Input**

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 3, Academic Achievement Standards were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

**FFY 2021 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	217	256	243
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	33	65	80

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	217	256	243
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	88	19	64

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

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	33	217	7.69%	8.14%	15.21%	Met target	No Slippage
B	Grade 8	65	256	7.55%	8.00%	25.39%	Met target	No Slippage
C	Grade HS	80	243	35.71%	36.16%	32.92%	Did not meet target	Slippage

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

The data for Group C has been analyzed and the data suggests the slippage is due to the effects of the COVID-19 pandemic on student assessment data. New Mexico has elected 11th graders to be utilized for High School data; therefore, it is important to note, the last time these students participated in statewide assessments non impacted by the pandemic was in grade 8. This is also a contributor to the decline in student performance on assessments. The state will continue to work to close the learning loss gap created by the COVID-19 pandemic.

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

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	88	217	13.21%	13.62%	40.55%	Met target	No Slippage
B	Grade 8	19	256	1.92%	2.33%	7.42%	Met target	No Slippage
C	Grade HS	64	243	29.63%	30.04%	26.34%	Did not meet target	Slippage

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

The data for Group C has been analyzed and the data suggests the slippage is due to the effects of the COVID-19 pandemic on student assessment data. New Mexico has elected 11th graders to be utilized for High School data; therefore, it is important to note, the last time these students participated in statewide assessments non impacted by the pandemic was in grade 8. This is also a contributor to the decline in student performance on assessments. The state will continue to work to close the learning loss gap created by the COVID-19 pandemic.

**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.**

Assessment data for students with disabilities can be found on the Special Education Division page under District Data: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment data for students without disabilities can be found on the Accountability Division webpage at <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>

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

This indicator has been greatly impacted by the COVID-19 pandemic over the past two years. In 2019-2020, the state received a waiver from the U.S. Department of Education (DOE), waiving the requirement to administer the statewide assessments to all students due to the pandemic. In 2020-2021, the state received another waiver from the U.S. DOE. from meeting the Every Student Succeeds Act (ESEA), 95% statewide assessment participation rate requirement for all students. The state then gave LEAs the opportunity to self-elect to administer or not administer the statewide assessments. The majority of the LEAs elected to not administer the statewide assessment. The data reported in this APR is the first to reflect pre-pandemic conditions with the exception of the learning loss which occurred.

**3C - Prior FFY Required Actions**

None

**3C - OSEP Response**

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, 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 2023 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2021, 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 2022 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2022.

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

#### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3D - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	39.82
Reading	B	Grade 8	2020	31.27
Reading	C	Grade HS	2020	39.45
Math	A	Grade 4	2020	11.15
Math	B	Grade 8	2020	10.07
Math	C	Grade HS	2020	28.86

#### Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	39.42	38.97	38.52	38.07	37.62
Reading	B <=	Grade 8	31.27	30.82	30.37	29.92	29.47
Reading	C <=	Grade HS	39.45	39.00	38.55	38.10	37.65
Math	A <=	Grade 4	11.15	10.74	10.33	9.92	9.51
Math	B <=	Grade 8	10.07	9.66	9.25	8.84	8.43
Math	C <=	Grade HS	28.86	28.45	28.04	27.63	27.22

#### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 3, Academic Achievement Standards were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

**FFY 2021 Data Disaggregation from EDFacts****Data Source:**

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

**Date:**

04/05/2023

**Reading Assessment Proficiency Data by Grade**

<b>Group</b>	<b>Grade 4</b>	<b>Grade 8</b>	<b>Grade HS</b>
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	21,507	23,871	19,982
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	3,577	3,925	2,486
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	6,497	7,282	6,403
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,123	673	213
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	186	124	58
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	115	153	99

**Data Source:**

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

**Date:**

04/05/2023

**Math Assessment Proficiency Data by Grade**

<b>Group</b>	<b>Grade 4</b>	<b>Grade 8</b>	<b>Grade HS</b>
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	21,517	23,860	19,939
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	3,582	3,915	2,487
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	4,477	4,375	3,053
d. All students in regular assessment with accommodations scored at or above proficient against grade level	750	361	86
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	136	54	19
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	79	57	29

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

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	8.41%	35.43%	39.82	39.42	27.02	Met target	No Slippage
B	Grade 8	7.06%	33.32%	31.27	31.27	26.27	Met target	No Slippage
C	Grade HS	6.32%	33.11%	39.45	39.45	26.79	Met target	No Slippage

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

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	6.00%	24.29%	11.15	11.15	18.29	Did not meet target	Slippage
B	Grade 8	2.84%	19.85%	10.07	10.07	17.01	Did not meet target	Slippage
C	Grade HS	1.93%	15.74%	28.86	28.86	13.81	Met target	No Slippage

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

The data for Group A has been analyzed and the data suggests the slippage is due to the effects of the COVID-19 pandemic on student assessment data. School year 2021-2022, was the first school year in the state where students were assessed. In 2019-2020, the state received a waiver from administering the assessment. In 2020-2021, the state received a participation waiver and only some LEAs administered the statewide assessments. This lack of exposure to assessments also contributed to the decline in student performance on assessments. The state will continue to work to close the learning loss gap created by the COVID-19 pandemic.

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

The data for Group B has been analyzed and the data suggests the slippage is due to the effects of the COVID-19 pandemic on student assessment data. School year 2021-2022, was the first school year in the state where students were assessed. In 2019-2020, the state received a waiver from administering the assessment. In 2020-2021, the state received a participation waiver and only some LEAs administered the statewide assessments. This lack of exposure to assessments also contributed to the decline in student performance on assessments. The state will continue to work to close the learning loss gap created by the COVID-19 pandemic.

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

This indicator has been greatly impacted by the COVID-19 pandemic over the past two years. In 2019-2020, the state received a waiver from the U.S. Department of Education (DOE), waiving the requirement to administer the statewide assessments to all students due to the pandemic. In 2020-2021, the state received another waiver from the U.S. DOE. from meeting the Every Student Succeeds Act (ESEA), 95% statewide assessment participation rate requirement for all students. The state then gave LEAs the opportunity to self-elect to administer or not administer the statewide assessments. The majority of the LEAs elected to not administer the statewide assessment. The data reported in this APR is the first to reflect pre-pandemic conditions with the exception of the learning loss which occurred.

**3D - Prior FFY Required Actions**

None

**3D - OSEP Response**

**3D - Required Actions**



## Indicator 4A: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

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

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

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

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

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

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

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

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

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

## 4A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2016	0.81%

FFY	2016	2017	2018	2019	2020
Target <=	0.81%	0.81%	0.80%	0.80%	0.81%
Data	0.81%	0.76%	0.00%	0.71%	0.71%

**Targets**

FFY	2021	2022	2023	2024	2025
Target <=	0.68%	0.55%	0.42%	0.29%	0.16%

**Targets: Description of Stakeholder Input**

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 4, Suspensions/Expulsions were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

**FFY 2021 SPP/APR Data**

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

YES

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

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Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	146	0.71%	0.68%	0.00%	Met target	No Slippage

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

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

**State's definition of "significant discrepancy" and methodology**

Data on the suspensions and expulsions of children with disabilities was derived from the IDEA Section 618 data submitted by LEAs via the State data collection system and database, STARS. The information was submitted in STARS using unique student identification numbers for each student and infraction. The data uploaded in the STARS system was validated by State staff.

This validated data was used to populate the Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2020-21 due in November 2021. Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) was used to determine significant discrepancy.

The State uses the "state bar" method for defining significant discrepancy. The State compared the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State. The FFY2021 state rate (based on 2020-21 data) for suspending/expelling students with disabilities for more than ten days is 0.0074%. The State sets the state bar as one percentage points higher than the state rate. Thus, any LEA that suspends or expels 1.0074% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. The LEA must have a "cell" size of greater than 10 with suspensions and expulsions of students with disabilities greater than 10 days in a school year.

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

In FFY 2021 (using 2020-21 data), no LEA in the State was found to have significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of students with IEPs. No LEAs met the minimum cell size, therefore, all LEAs were excluded.

The low suspension/expulsion rate was due to many LEAs providing virtual learning during the majority of the 2020-21 school year. Prior to COVID, the state's indicator 4 rates were much higher than the school year, .416% (SY 2019-2020) and .251% (SY 2018-2019). Given this, the threshold set at +1% created a rather conservative definition of significant discrepancy. Considering the extremely low state rate in the recent years due to the COVID-19 school closures, the thresholds may not look as conservative. NM will be exploring alternative ways of defining significant discrepancy in the coming year.

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

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

No LEA was found to have significant discrepancy, therefore no review of policies, procedures and practices were required.

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

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

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

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

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

**4A - Prior FFY Required Actions**

None

**4A - OSEP Response**

OSEP cannot determine whether the data are valid and reliable. The State reported that 146 districts met the minimum n size requirement, and 147 districts did not meet the minimum n size requirement and were excluded from the calculation. The number of districts excluded from the calculation because they do not meet the minimum “n” size, plus the number of districts that met the State- established minimum “n” size, do not equal the total number of districts the State reported in either the FFY 2020 Introduction (which was 147). Therefore, OSEP could not determine whether the State met its target.

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

**4A - Required Actions**

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

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

## Indicator 4B: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

### Historical Data

Baseline Year	Baseline Data
2016	0.81%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.81%	0.00%	0.00%	0.00%	0.00%

#### Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

#### FFY 2021 SPP/APR Data

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

YES

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

147

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	146	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

Data on the suspensions and expulsions of children with disabilities was derived from the IDEA Section 618 data submitted by LEAs via the State data collection system and database, STARS. The information was submitted in STARS using unique student identification numbers for each student and infraction. The data uploaded in the STARS system was validated by State staff.

This validated data was used to populate the Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2020-21 due in November 2021. Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) was used to determine significant discrepancy.

The State uses the "state bar" method for defining significant discrepancy. The State compared the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State. The FFY2021 state rate (based on 2020-21 data) for suspending/expelling students with disabilities for more than ten days is 0.0074%. The State sets the state bar as one percentage points higher than the state rate. Thus, any LEA that suspends or expels 1.0074% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. The LEA must have a "cell" size of greater than 10 with suspensions and expulsions of students with disabilities greater than 10 days in a school year. Note that the State examines significant discrepancy by race and ethnicity. Every LEA has a suspension rate calculated for each of the seven race/ethnicity categories. Some LEAs don't have any students with disabilities of a given race/ethnicity, but the State calculates it for every racial/ethnic category that is present at a given LEA. The state bar that the State uses for each racial/ethnic group is the same state bar that was used for 4A (i.e., the 1.0074%); in other words, the State applies the same state bar to each and every racial/ethnic group. A LEA has significant discrepancy when its suspension/expulsion rate for children with disabilities from any racial/ethnic group is 1.0074% or higher.

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

In FFY 2021 (using 2020-21 data), no LEA in the State was found to have significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of students with IEPs, by race/ethnicity. No LEAs met the minimum cell size, therefore, all LEAs were excluded.

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

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

No LEA was found to have significant discrepancy, therefore no review of policies, procedures and practices were required.

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

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

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

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

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

**4B - Prior FFY Required Actions**

None

**4B - OSEP Response**

OSEP cannot determine whether the data are valid and reliable. The State reported that 146 districts met the minimum n size requirement, and 147 districts did not meet the minimum n size requirement and were excluded from the calculation. The number of districts excluded from the calculation because they do not meet the minimum “n” size, plus the number of districts that met the State- established minimum “n” size, do not equal the total number of districts the State reported in either the FFY 2020 Introduction (which was 147). Therefore, OSEP could not determine whether the State met its target.

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

**4B- Required Actions**

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

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

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

- A. Inside the regular class 80% or more of the day;
- B. Inside the regular class less than 40% of the day; and
- C. In separate schools, residential facilities, or homebound/hospital placements.

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

#### Data Source

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

#### Measurement

- A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

#### Instructions

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

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

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

## 5 - Indicator Data

### Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
A	2019	Target >=	53.00%	53.00%	53.00%	53.00%	51.53%
A	51.38%	Data	49.82%	49.93%	48.95%	51.38%	52.51%
B	2019	Target <=	18.00%	18.00%	18.00%	18.00%	16.59%
B	17.10%	Data	18.62%	18.14%	17.66%	17.10%	16.42%
C	2019	Target <=	0.91%	0.91%	0.91%	0.91%	0.39%
C	0.39%	Data	0.87%	0.79%	0.85%	0.39%	0.68%

### Targets

FFY	2021	2022	2023	2024	2025
Target A >=	51.68%	51.83%	51.98%	52.13%	52.28%
Target B <=	16.08%	15.57%	15.06%	14.55%	14.04%
Target C <=	0.38%	0.37%	0.36%	0.35%	0.34%

#### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 5, Education Environments were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

#### Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Child Count/Educational Environment	07/06/2022	Total number of children with IEPs aged 5 (kindergarten) through 21	51,143

Source	Date	Description	Data
Data Groups (EDFacts file spec FS002; Data group 74)			
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	26,816
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	8,197
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	186
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	28
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	167

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

NO

#### FFY 2021 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	26,816	51,143	52.51%	51.68%	52.43%	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	8,197	51,143	16.42%	16.08%	16.03%	Met target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	381	51,143	0.68%	0.38%	0.74%	Did not meet target	No Slippage

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

When students returned to in-person learning, the State saw an overall increase in the number of parents, who selected to home-school their students. This movement to homeschool included students with disabilities, especially for those students with health conditions. This contributed to the increase in the number of students with disabilities that were in homebound placements and for the State not meeting the target for Indicator 5C.

#### 5 - Prior FFY Required Actions

None

#### 5 - OSEP Response

#### 5 - Required Actions





## Indicator 6: Preschool Environments

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

- A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and
- B. Separate special education class, separate school or residential facility.
- C. Receiving special education and related services in the home.

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

#### Data Source

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

#### Measurement

- A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

#### Instructions

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

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

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

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

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

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

## 6 - Indicator Data

### Not Applicable

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

NO

### Historical Data – 6A, 6B

Part	FFY	2016	2017	2018	2019	2020
A	Target >=	52.00%	52.00%	52.00%	52.00%	52.58%
A	Data	41.57%	44.12%	46.13%	52.08%	53.38%
B	Target <=	26.00%	26.00%	26.00%	26.00%	32.33%
B	Data	43.75%	40.49%	25.52%	32.83%	30.19%

### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 6, Preschool Environments were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

### 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	52.08%
B	2019	32.83%
C	2020	25.00%

**Inclusive Targets – 6A, 6B**

FFY	2021	2022	2023	2024	2025
Target A >=	53.08%	54.08%	55.58%	57.58%	60.08%
Target B <=	31.83%	30.83%	29.33%	27.33%	24.83%

**Inclusive Targets – 6C**

FFY	2021	2022	2023	2024	2025
Target C <=	24.00%	23.00%	21.50%	19.50%	17.00%

**Prepopulated Data**

**Data Source:**

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

**Date:**

07/06/2022

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	1,067	1,676	187	2,930
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	418	971	126	1,515
b1. Number of children attending separate special education class	367	393	29	789
b2. Number of children attending separate school	33	30	3	66
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	8	3	1	12

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

NO

**FFY 2021 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 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	1,515	2,930	53.38%	53.08%	51.71%	Did not meet target	Slippage

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B. Separate special education class, separate school or residential facility	855	2,930	30.19%	31.83%	29.18%	Met target	No Slippage
C. Home	12	2,930	0.00%	24.00%	0.41%	Met target	No Slippage

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

The state anticipated a decline in the number of children with IEPs, ages 3 to 5 in preschool, that would be in a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program since the 5 year old students in Kindergarten were removed from the measurement. This is the reason the state established new baselines and targets for this indicator in Federal Fiscal Year (FFY) 2020. The decline or slippage in the number of children receiving the majority of services in a regular early childhood program is a result of the state not having a universal preschool program for children that are 3 years old. This creates an issue with ensuring that children with IEPs are in a regular early childhood program for this age group.

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

**6 - Prior FFY Required Actions**

None

**6 - OSEP Response**

**6 - Required Actions**

## Indicator 7: Preschool Outcomes

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

- a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.
- b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
- c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.
- d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
- e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

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

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

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

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

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

#### Instructions

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

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

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

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

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

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

## 7 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
A1	2020	Target >=	77.73%	77.73%	77.80%	77.80%	69.01%
A1	69.01%	Data	75.95%	78.16%	72.82%	71.78%	69.01%

A2	2020	Target >=	54.43%	54.43%	54.50%	54.50%	41.92%
A2	41.92%	Data	51.10%	49.82%	45.17%	44.34%	41.92%
B1	2020	Target >=	76.49%	76.49%	76.50%	76.50%	69.03%
B1	69.03%	Data	73.70%	75.31%	73.02%	70.81%	69.03%
B2	2020	Target >=	50.31%	50.31%	50.35%	50.35%	37.09%
B2	37.09%	Data	49.54%	45.19%	40.01%	40.30%	37.09%
C1	2020	Target >=	76.85%	76.85%	76.86%	76.86%	68.91%
C1	68.91%	Data	76.84%	78.44%	74.75%	73.80%	68.91%
C2	2020	Target >=	62.33%	62.33%	62.35%	62.35%	49.76%
C2	49.76%	Data	60.28%	58.18%	53.04%	53.78%	49.76%

### Targets

FFY	2021	2022	2023	2024	2025
Target A1 >=	69.51%	70.01%	71.01%	72.51%	74.51%
Target A2 >=	42.42%	42.92%	43.92%	45.42%	47.42%
Target B1 >=	69.53%	70.03%	71.03%	72.53%	74.53%
Target B2 >=	37.59%	38.09%	39.09%	40.59%	42.59%
Target C1 >=	69.41%	69.91%	70.91%	72.41%	74.41%
Target C2 >=	50.26%	50.76%	51.76%	53.26%	55.26%

### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 7, Preschool Outcomes were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

### FFY 2021 SPP/APR Data

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

3,048

#### 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	94	3.08%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	507	16.63%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,016	33.33%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	789	25.89%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	642	21.06%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A,	1,805	2,406	69.01%	69.51%	75.02%	Met target	No Slippage

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>							
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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,431	3,048	41.92%	42.42%	46.95%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	107	3.51%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	541	17.75%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,070	35.10%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	762	25.00%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	568	18.64%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,832	2,480	69.03%	69.53%	73.87%	Met target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,330	3,048	37.09%	37.59%	43.64%	Met 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	84	2.76%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	453	14.86%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	858	28.15%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	773	25.36%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	880	28.87%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,631	2,168	68.91%	69.41%	75.23%	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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,653	3,048	49.76%	50.26%	54.23%	Met target	No Slippage

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The State has four approved instruments from which LEAs can select the instrument they want to use for gathering data for this indicator. The approved instruments are Brigance, Creative Curriculum, Work Sampling, and NM Pre-K Observational Assessment. LEAs may also petition the Special Education Division to request to use a different instrument. The Special Education Division can elect to approve or disapprove the instrument proposed by the LEA. If a non-approved instrument is used by an LEA, the state's database will cause an error notifying the LEA the instrument is not approved.

Students with disabilities, ages 3 to 5, receiving special education and related services must have an entry and exit early childhood assessment completed each year the child is receiving services. The students are assessed in three content areas: Behavior, Social Emotional and Language Acquisition. Students enrolled in an early childhood program for more than 30 days from the end of the school year, are required to have an early childhood entry assessment completed. The early childhood entry assessment is required to be administered within 30 days from the child's program start date, in the current school year. Early childhood exit assessments are administered at least six months after the entry assessment was administered. An exit assessment is required if the student was enrolled in the program for at least six months.

LEAs utilize the Childhood Outcomes Summary Form (COSF) calculator to identify a Progress Achieved Code which best identifies each child's level of performance. The data from the entry and exit assessments are then reported in the STARS system. The entry and exit data can be reported during any of the four State reporting periods, 40, 80, 120 and End of Year; however, the State requires the data to be reported in STARS at the earliest reporting period after the assessment was administered.

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

The State has been working with LEAs to improve data submissions and quality of early childhood outcomes data submitted in STARS. Indicator 7 data is reviewed and monitored each of the four state required reporting periods and LEAs must ensure their data is submitted and is complete. Data reports are also connected to the students age and when a student with disabilities that is age 3 to 5 (and in preschool), LEAs must enter preschool outcome data or the report will cause an error prompting the LEA to submit early childhood outcome data to clear the error. These systems have supported the improvement of LEA data submissions for Indicator 7.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

## 7 - Required Actions



## Indicator 8: Parent involvement

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

#### Data Source

State selected data source.

#### Measurement

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

#### Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

## 8 - Indicator Data

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

### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 8, Parent Involvement was discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

### Historical Data

Baseline Year	Baseline Data
2010	80.20%

FFY	2016	2017	2018	2019	2020
Target >=	84.00%	84.00%	84.00%	84.00%	80.84%
Data	82.45%	84.21%	81.83%	85.90%	84.08%

### Targets

FFY	2021	2022	2023	2024	2025
Target >=	81.48%	82.12%	82.76%	83.40%	84.04%

**FFY 2021 SPP/APR Data**

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
3,239	3,911	84.08%	81.48%	82.82%	Met target	No Slippage

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

The total sample of parents is drawn at the LEA level from stratified groups prior to the sample being selected. Groups are stratified by 1. race/ethnicity 2. school grade (which includes preschool as a grade) and 3. primary disability. Sample sizes are based on the number of students with disabilities, including preschool, in each LEA. The SEA addresses problems with response rates by completing two rounds of surveys, an electronic and paper version. The electronic surveys are sent out first. For those parents that do not respond to the electronic survey, a paper survey is mailed out. Although the survey contains 25 questions, only question one of the survey is included in the numerator calculation for Indicator 8. As long as the parent responds to question one, the information is included in the LEA and state survey results. To minimize selection bias in the survey, the State utilizes a contractor who independently selects the sample based on the sampling plan.

In FFY 2021, preschool parents represented about 8% of the total respondents, with 329 parents responding. Results are weighted by LEA to make sure that the overall state parent involvement percentage is an accurate reflection of the experiences of parents of students with disabilities age 3 to 21 across the state.

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

15,844

**Percentage of respondent parents**

24.68%

**Response Rate**

FFY	2020	2021
Response Rate	25.93%	24.68%

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

- Parents selected for the the survey can complete the survey either electronically or on a paper form. The electronic survey is sent via cell phone and email. Parents that do not respond to the electronic survey are mailed out a paper survey for completion.
- The parent survey is available in the Navajo and Spanish languages for those that may need the survey in these versions in order to respond to the survey.
- A hotline was available for Spanish speaking parents that have questions or need support in completing the survey.
- Data is stratified prior to the sample being selected to ensure that each race/ethnic group is represented appropriately in the sample.
- The State is also considering developing an app for parents to use to respond.
- Another consideration is possibly aligning survey administration with IEP meetings.
- Expanding the timeframe which the survey response period is open.
- Develop an advertising campaign to explain what the survey is about and encourage them to complete and return the survey.
- Coordinate with LEAs who are currently not included in the process. Once the sample is selected by the contractor, share with the LEA so they can also encourage participation.
- Separating preschool from school-age parent surveys to obtain feedback to better inform programming.
- Discuss strategies to increase responses from the parents of students with Specific Learning Disability (SLD).

The Special Education Division will continue to explore using multiple administration methods to increase the response rate.

**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.**

The state analyzed the response rate in two ways:

Race/ethnicity: The representativeness of the responses examined by race/ethnicity revealed that the respondents matched the racial/ethnic make-up of the students with disabilities in the state.

Early/late responses: Responses of parents who responded early in the process to those who responded later in the process. The idea being that perhaps those who do not immediately respond and needed multiple prompts to respond are different in some meaningful way than those who respond immediately. These results showed no statistically significant differences between parents who responded earlier and parents who responded later. Therefore, we conclude that nonresponse bias is not present.

The steps taken to reduce any identified bias include three attempts to obtain a response from parents. The first and second surveys are sent out simultaneously, via text message and email. If a parent does not respond to the text message and email, a paper survey is mailed out to the parent. The paper survey includes a stamped return envelope, so the parent does not have to pay to return the survey. The survey is also available in three languages, English, Navajo and Spanish.

The previous section describes the state's steps to promote responses from a broad cross section of parents of children with disabilities.

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

The State compared the representation by race/ethnicity in the population to the representation in the respondents using a +/- 3% criteria to identify over-or under-representativeness. Using this methodology, no differences were found by race/ethnicity. The children receiving special education services population consists of 10.28% of Native Americans, 63.94% of Hispanics, and 20.75% of Whites in the state. The respondents consist of 10.36% of Native Americans, 61.76% of Hispanics, and 25.52% of Caucasians. The differences for Native Americans and Hispanics were within the +/- 3% criteria. For Caucasians, the difference was +4.77%.

Survey representation was also compared by disability category. All disability categories were closely represented by the disability categories in the state using the +/- 3% criteria to identify over-or under-representativeness. Children in the state are receiving special education services in the following disability categories: 16.27% Speech/Language Impairment; 8.60% Autism and 8.37% Developmental Delay. The respondents consist of 19% Speech/Language Impairment; 9% Autism and 10% Developmental Delay. It was found that the category of Other Health Impairment was over-represented by 4.47%, while the Specific Learning Disability category was underrepresented by 9.15%. Although these variances existed, the overall totals matched the total percentages of children receiving services in the state. Specific Learning Disability is the largest disability category at 46.15% and represented the largest respondent group at 37%. Speech/Language was the second largest group and had the second largest group of respondents and so on. Therefore, this signifies that the demographics of parents are representative of the demographics of children receiving special education services by disability category.

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

NO

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

The strategies the state will use to ensure that in the future, the response data are representative of demographics of underrepresented groups, are listed below:

- Institute a phone survey to eliminate accessibility issues.
- Expand the timeframe in which the survey response period is open.
- Develop an advertising campaign to explain what the survey is about and encourage Parents to complete and return the survey.
- Coordinate with LEAs who are currently not included in the process. Once the sample is selected by the contractor, share with the LEA so they can also encourage participation.
- Separate preschool from school-age parent surveys.
- Discuss strategies to increase responses from the parents of students with Specific Learning Disability (SLD).
- Increase accessibility by having the survey available options such as Braille, large print, etc. for parents that may have disabilities also.

The Special Education Division will continue to explore using multiple administration methods to increase the response rate.

**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 the target group.

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 plan submitted to OSEP was implemented. Sampling is completed at the LEA level. A stratified, random sample of students with disabilities are selected from each LEA based on race/ethnicity, school grade and primary disability. When calculating state-level results, responses are weighted by the student with disability population size (e.g., a LEA that has four times the number of students with disabilities as another LEA will receive four times the weight in computing overall state results.) Since the sampling plan is based on a representative sample from each LEA, and the proper weighting is done in the analysis, the State is assured that the Indicator 8 results are reliable and valid.

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

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

Although response rates and the number of respondent parents reported schools facilitated parent involvement as a means of improving services and results for children with disabilities both decreased in FFY 2021; the State will continue to strategize and develop plans for improving parent involvement and response rates as described above.

## **8 - Prior FFY Required Actions**

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

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

In the FFY2021 SPP/APR , the State did report that its FFY2021 data are from a response group this is representative of the demographics of children receiving special education services. The State stratified the data, as indicated in the State's Sampling plan, to ensure that the data was representative of the demographics of children receiving special education services.

## **8 - OSEP Response**

OSEP's response to the State's FFY 2020 SPP/APR required the State to submit a revised sampling plan for this indicator. The State submitted its revised sampling plan, and OSEP's evaluation of the sampling plan indicated that it is approvable.

## **8 - Required Actions**

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

## Indicator 9: Disproportionate Representation

### Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

#### Data Source

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

#### Measurement

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

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

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

#### Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

#### Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

#### FFY 2021 SPP/APR Data

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

YES

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

28

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	120	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

For an LEA to be considered as having disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification, the following criteria must be met:

- An "n" size of greater than 10 students or more in the racial and ethnic groups; and
- Risk Ratio (RR) and Alternate Risk Ratio (ARR) of 3.0 or above (over-representation) for students ages 5 in Kindergarten – 21; and
- Deficient policies, procedures, and/or practices.

One year of data is used in the calculation.

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.

No LEAs were identified as demonstrating possible disproportionate representation of racial and ethnic groups in special education and related services. If an LEA(s) were identified through the RR or ARR, the LEA(s) would be notified in writing of the disproportionate representation and be required to complete the Indicator 9 Self-Assessment Protocol. The purpose of the self-assessment is to identify if the LEA(s) has deficient policies, procedures, and practices. The State would examine the self-assessment to determine if the policies, procedures, and practices are deficient and contributed to the inappropriate identification.

In addition, the State would send a list of students to the LEA(s) who may have been inappropriately identified in the "possible disproportionate representation" finding. The LEA(s) is then required to submit the following documents for a review by the State: Student Assistance Team (SAT) paperwork for each flagged student, reason for referral, length of time in SAT, interventions implemented, reason student was sent for testing/evaluation, diagnostic report, and/or Review of Existing Evaluation Data (REED). The information is reviewed to determine what portion(s) of the LEA's policies, procedures, and practices need to be updated and/or revised.

Upon conclusion of this process, the State determines whether the disproportionate representation was the result of inappropriate identification.

Provide additional information about this indicator (optional)

Out of 148 LEAs, 28 LEAs were not included in the calculation because the LEAs did not meet the minimum "cell" size of 11. In other words, the LEA did not have greater than 10 students in any of the seven racial/ethnic categories. 120 LEAs met the State's minimum "cell" size. In FFY 2021, zero LEAs were considered to have disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification. The State is compliant with Indicator 9 and had no slippage.

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

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

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

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

**9 - Prior FFY Required Actions**

None

**9 - OSEP Response**

**9 - Required Actions**

## Indicator 10: Disproportionate Representation in Specific Disability Categories

### Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

#### Data Source

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

#### Measurement

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

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

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

#### Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

### 10 - Indicator Data

#### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

#### Targets



FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

**FFY 2021 SPP/APR Data**

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

YES

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

56

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	92	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

An LEA is considered to have disproportionate representation of racial and ethnic groups in a specific disability category that was the result of inappropriate identification if the following criteria are met:

- A "cell" size of greater than 10 students or more in the racial and ethnic groups and the specific disability category; and
- A risk ratio (RR) and alternate risk ratio (ARR) of 3.0 or above (over representation) for students aged 5 in Kindergarten - 21; and
- Deficient policies, procedures, and/or practices.

One year of data is used in the calculation.

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.

No LEAs were identified as demonstrating possible disproportionate representation of racial and ethnic groups in special education and related services. If an LEA(s) were identified, the LEA(s) would be notified in writing of the disproportionate representation and be required to complete the Indicator 10 Self-Assessment Protocol. The purpose of the self-assessment is to determine if the LEAs have deficient policies, procedures, and practices. The State would examine the self-assessment to determine if the policies, procedures, and practices are deficient and contributed to the inappropriate identification.

In addition, the State would send a list of students to the LEA(s) who may have been inappropriately identified in the "possible disproportionate representation" finding. The LEA(s) is then required to submit the following documents for a review by the State: Student Assistance Team (SAT) paperwork for each flagged student, reason for referral, length of time in SAT, interventions implemented, reason student was sent for testing/evaluation, diagnostic report, and/or Review of Existing Evaluation Data (REED). The information is reviewed to determine what portion(s) of the LEA's policies, procedures, and practices need to be updated.

Upon conclusion of this process, the State determines whether the disproportionate representation was the result of inappropriate identification.

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

Out of 148 LEAs, 56 LEAs were excluded from the calculation because the LEAs did not meet the minimum "cell" size requirement. In other words, the LEA did not have greater than 10 students in any of the seven racial/ethnic categories for any of the 6 disability categories. 92 LEAs met the State's minimum "n" size. In FFY 2021, zero LEAs were found to have disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. The State met the target.

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

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

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

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

**10 - Prior FFY Required Actions**

None

**10 - OSEP Response**

**10 - Required Actions**

## Indicator 11: Child Find

### Instructions and Measurement

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

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

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

#### Data Source

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

#### Measurement

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

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

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

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

#### Instructions

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	80.00%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.06%	99.66%	99.64%	99.67%	95.31%

### Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

### FFY 2021 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
8,932	8,868	95.31%	100%	99.28%	Did not meet target	No Slippage

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

64

**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.**

64 children were include in (a) but not included in (b). The number of days beyond the timeline range from 1 to 596.

The reasons for the delays reported by LEAs in completing initial evaluations by the 60 day timeframe include the following:

- 4.17% of LEAs reported that the sixty day timeline fell on the weekend, holiday or during other school closure and did not make arrangements to ensure that the evaluation was completed prior to the non-working days.
- 12.49% reported no service provider was available to complete the evaluation. The state is experiencing a shortage of teachers and related service providers.
- 16.67% reported that the parent requested a delay in the completion of evaluation.
- 66.67% reported evaluation scheduling issues and difficulty scheduling the evaluation with parent.

**Indicate the evaluation timeline used:**

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

State database that includes data for the entire reporting year

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

The State collects the data for Indicator 11 through the State database, the Student Teacher Accountability Reporting System (STARS). Data is collected four times each school year as required by State statute. The reporting periods are called the 40th, 80th, 120th and End of Year. At each reporting period, LEAs upload their data into the STARS system. The STARS system contains business rules which check the dates for the signed parental consent for evaluation, to the date when evaluations were completed, to ensure the process happened within 60 days. LEAs that miss the 60 day timeline must submit a non-compliance code with their data to indicate the reason(s) the timeline was missed.

Once the LEAs have submitted the data, State staff review the LEA data. Two reviews of the data are conducted. The first review is a Data Quality Review to ensure that the data is timely, valid and reliable. This review is completed by the Data Supervisor. The second review is the General Supervision Review where the data is reviewed to ensure that LEAs are meeting the requirements under IDEA, Part B including compliance with indicator 11. Any issues are noted and LEAs are supported with noted issues. FFY2021 is the first year this two-part data review was implemented.

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

The State has continued to make strides to improve the indicator 11 data. The two part data review process described in the previous section has made an impact in the quality of the data submitted by LEAs. Also, the use of data as a tool for monitoring LEAs to ensure compliance with the requirements is making an impact on child find compliance requirements. The monitoring process triggers immediate follow-up with LEAs at each state reporting period.

Although the State saw a decrease in the Indicator 11 data for FFY 2020, to 95.31% from 99.67% the previous fiscal year, which was expected due to the impact of the COVID-19 pandemic, the state rebounded in FFY 2021 with a rate of 99.28%. The State is not exactly at the rate prior to the pandemic but are rebounding from the effects of the pandemic and are on the trajectory to continue to improve the completion of evaluations for children.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
19	16		3

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

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

In accordance with the OSEP Memo 09-02, the State verified that the source of noncompliance is correctly implementing the regulatory requirements, within one-year, through a follow-up review process. 16 LEAs demonstrated no further non-compliance within one-year and the State has determined these LEAs are correctly implementing the specific regulatory requirements based on the following review of updated data (achieved 100% compliance). The verification review consisted of a three-step process.

First, each LEA completed a Root Cause Analysis (RCA). The RCA process requires LEAs to review their own policies, practices and procedures to ensure compliance and identify any issues within their policies, practices and procedures which may be causing the non-compliance to occur. Each of the 16 LEAs submitted a completed RCA to the state which identified varying contributing factors for the non-compliance which ranged from lack of staff to the need to establish procedures when timelines fall during non-working and non-school days.

Second, the state reviewed each of the 16 RCAs submitted by the LEAs along with the policies, practices and procedures. A Corrective Action Plan

(CAP) was developed for each of the 16 LEAs to address the areas the LEA and state identified, whether regulatory or non-regulatory, that are contributing to the non-compliance. The CAP included action steps, timelines for completion of each action step and the documentation required to verify each LEA completed the required action step(s) for the identified issues. The LEAs were required to submit documentation evidencing all action steps were complete, the state reviewed the documentation submitted for each action step and verified each item as corrected. Once all action steps of the CAP were completed and the state was assured the LEA was correctly implementing regulatory requirements, the CAP was closed by the state. The State implemented a new process for FFY 2021 which added rigor to the process and includes a final review of all information and determination for CAP closure by the Deputy Director of Special Education.

Third, subsequent data submitted by the LEAs into the State's database, STARS, was reviewed by the state. At the time the data was reviewed, each of the 16 LEAs had a score of 100% for Indicator 11. In addition, in FFY 2021, the State instituted a new process to include an independent review of LEA files and information. The state collected signed parental consents and initial evaluations for review for a random sampling of students. All documents reviewed demonstrated each LEA was compliant with the 60 day timeline. Once the STARS data and documents were verified, the state determined each LEA met the above conditions for each of the three steps necessary to ensure the regulatory requirements are being implemented correctly, and thereby each of the 16 LEAs were correctly implementing the regulatory requirements within one year from the identification of the non-compliance.

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

The State verified that each individual case of non-compliance was corrected. First, the State reviewed the indicator 11 Summary Report generated by the STARS system to obtain a list of students that did not have an evaluation completed by the 60 day timeline.

Second, the State reviewed the Indicator 11 Summary Report to determine if an evaluation date was entered for each student identified in the first step, even if the date was after the 60 day timeline. If the evaluation date was in the STARS system, the individual case of non-compliance was considered corrected. If the evaluation date was not in the STARS system, the State contacted the LEA and requested evaluation and parent consent for evaluation documentation to determine the status of the evaluation. The State monitored the STARS system until each evaluation was completed and/or documentation was provided to confirm each student received an evaluation. All students in the 16 LEAs identified in the first step had an evaluation completed within one year as verified through the STARS system or a documentation review, thus it was determined each individual case of non-compliance was corrected within one year from the identification of the non-compliance.

**FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The 3 LEAs which remain noncompliant have corrected the noncompliance at the student level or individual cases of non-compliance but have not met Prong 2 requirements. Therefore, the 3 LEAs have not satisfied the correction of noncompliance requirements. We anticipate by the clarification period, the LEAs will have satisfied the Prong 2 requirements.

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

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

**11 - Prior FFY Required Actions**

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

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

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

The State has addressed the Prior FFY Required Action in the "Correction of Findings of Noncompliance Identified in FFY 2020" section of the FFY2021 APR. See above.

**11 - OSEP Response**

The State did not report whether it has established a timeline, and if so, what the State's timeline is for initial evaluations, as required by the Measurement Table.

**11 - Required Actions**

In the FFY 2022 SPP/APR, the State must report whether it has established a timeline, and if so, what the State's timeline is for initial evaluations, as required by the Measurement Table.

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 3 uncorrected findings of noncompliance identified in FFY 2020 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State

must describe the specific actions that were taken to verify the correction.

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

## Indicator 12: Early Childhood Transition

### Instructions and Measurement

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

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

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

#### Data Source

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

#### Measurement

- a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
- e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
- f. # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

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

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

#### Instructions

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

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

Targets must be 100%.

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

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

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

## 12 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2005	94.40%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	96.06%	99.48%	83.90%	97.41%	91.64%

#### Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

#### FFY 2021 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	949
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	13

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	762
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.	1
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	137
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	762	798	91.64%	100%	95.49%	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**

36

**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.**

36 children were included (a), but not in b, c, d, e or f. The range of days beyond the third birthday when eligibility was determined and the IEP was developed were 1 to 196. The reasons for the delays are as follows:

- 5.56% of children withdrew from Part C by parent prior to the child's third birthday.
- 5.56% of children moved out of the LEA's educational jurisdiction.
- 5.56% of children's third birthdays were on a weekend, holiday or during other school closures. LEAs did not ensure the student's IEP was developed prior to these time periods when school was closed.
- 33.33% of children's parents requested a delay in holding the IEP meeting.
- 50.00% of LEAs reported having evaluation scheduling issues, difficulty scheduling IEPs with parents and other delays.

**Attach PDF table (optional)**

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

State database that includes data for the entire reporting year

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

The State collects the data for Indicator 12 through the State database, the Student Teacher Accountability Reporting System (STARS). Data is collected four times each school year as required by State statute. The reporting periods are called the 40th, 80th, 120th and End of Year. At each reporting period, LEAs upload their data into the STARS system. The STARS system contains business rules which checks for each child's third birthdate and the date(s) the IEP was developed and implemented, to ensure each child that requires it has an IEP developed and implemented by the third birthday. LEAs that do not have an IEP developed and implemented by a child's third birthday, must submit a non-compliance code with their data to indicate the reason(s) the timeline was missed.

Once the LEAs have submitted their data, State staff review the LEA data. Two reviews of the data are conducted. The first review is a Data Quality Review to ensure that the data is timely, valid and reliable. This review is completed by the Data Supervisor. The second review is the General Supervision Review where the data is reviewed to ensure that LEAs are meeting the requirements under IDEA, part B including compliance with indicator 12. Any issues are noted and LEAs are supported with any noted issues. FFY2021 is the first year this two-part data review was implemented.

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

Over the past few years, the data for this indicator has fluctuated. In FFY 2021, the 95.49% rate was an improvement over the FFY2020 rate of 91.64%. This can be attributed to the emphasis the State has placed on quality data submissions of all data points through the STARS system. We will continue to improve processes and work with the Part C program to cross-reference data points.

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
13	12		1

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

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

The State verified that the source of noncompliance is correctly implementing the regulatory requirements through a follow-up review process, that the 12 LEAs demonstrated no further non-compliance within the OSEP required timeline of 12 months and were correctly implementing the specific regulatory requirements (achieved 100% compliance) based on the following review of updated data. This determination was made using a three-step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA process requires LEAs to review their own policies, practices and procedures to ensure compliance and identify any issues within the policies, practices and procedures which are causing the non-compliance to occur. Each of the 12 LEAs submitted a completed RCA to the state and had varying contributing factors for the non-compliance from the need to strengthen monitoring of data points associated with indicator 12 to a need for training.



Second, the State reviewed each of the 12 RCAs submitted by the LEAs along with the policies, practices and procedures. A Corrective Action Plan (CAP) was developed for each of the 12 LEAs to address the areas the LEA and state identified, whether regulatory or non-regulatory, that are contributing to the non-compliance. The CAP included action steps, timelines for completion of each action step and the documentation required to verify each LEA completed the required action step(s) for the identified issues. The LEAs were required to submit documentation evidencing all action steps were complete, the state reviewed the documentation submitted for each action step and verified each item as corrected. Once all action steps of the CAP were completed and the state was assured the LEA was correctly implementing regulatory requirements, the CAP was closed by the State.

Third, subsequent data submitted by the LEAs into the State's database, STARS, was reviewed by the state. At the time the data was reviewed, each of the 12 LEAs had a score of 100% for Indicator 12. Once the data was verified, the state determined each LEA met the above conditions for each of the three steps necessary to ensure the regulatory requirements are being implemented correctly, and thereby each of the 12 LEAs were correctly implementing the regulatory requirements.

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

The State verified that each individual case of non-compliance was corrected. First, the State reviewed the indicator 12 Summary Report generated by the STARS system to obtain a list of students that did not have an IEP developed and implemented by the each student's third birthday.

Second, the State reviewed the Indicator 12 Summary Report to determine if an IEP date was entered for each student identified in the first step, even if the date was after the student's third birthday. If the IEP date was in the STARS system, the individual case of non-compliance was considered as corrected. If the IEP date was not in the STARS system, the State contacted the LEA and requested the IEP. The state monitored the STARS system until each IEP was completed and/or documentation was provided to confirm an IEP was developed and implemented. All students in the 12 LEAs identified in the first step had an IEP completed and implemented within one year as verified through the STARS system or a documentation review, thus it was determined each individual case of non-compliance was corrected.

**FFY 2020 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The 1 LEA which remains noncompliant have corrected the noncompliance at the student level or individual cases of non-compliance but have not met Prong 2 requirements. Therefore, the 1 LEA has not satisfied the correction of noncompliance requirements. We anticipate by the clarification period, this LEA will have satisfied the Prong 2 requirements.

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

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

**12 - Prior FFY Required Actions**

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

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

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

The State has addressed the Prior FFY Required Action in the "Correction of Findings of Noncompliance Identified in FYY 2020" section of the FFY2021 APR. See above.

**12 - OSEP Response**

**12 - Required Actions**

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2020 was corrected.

When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2021 and each LEA with remaining noncompliance identified in FFY 2020: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Indicator 13: Secondary Transition

### Instructions and Measurement

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

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2009	98.45%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	93.08%	95.87%	96.33%	97.63%	99.41%

### Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

### FFY 2021 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1,567	1,578	99.41%	100%	99.30%	Did not meet target	No Slippage

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

State database that includes data for the entire reporting year

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

The data is collected at the State level for each LEA with students age sixteen and above. A sample is drawn from the LEAs' 40 day student data reported in STARS, the State's data system. LEAs are required to submit IEPs to the State for the sample drawn. The State has a secure Special Education Monitoring site where LEAs upload the Individualized Education Programs (IEPs). The State reviews each IEP to determine if each of the required eight components are in the IEP and are compliant with the requirements for this indicator. IEPs that are compliant and those that are non-compliant by LEA are identified through this process.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	YES
If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age?	NO

**If no, please explain**

The State's policies and procedures require that students with disabilities, starting at age fourteen, begin secondary transition planning and thereby meet the requirements of this indicator. However, the State has chosen to exclude the data for students that are ages fourteen and fifteen from the data reported in this APR. The State elects to keep the Federal and State data separate.

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

Starting in school year 2022-2023, the State will be incorporating a quality review of IEPs in addition to the compliance review. As a State, we are committed to ensuring that students with disabilities are prepared for college, career and life. With this in mind, a quality focus helps to ensure the State is doing more than just the minimum and are raising the expectations for the services for students with disabilities receive to prepare for the next phase in their lives.

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

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

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

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

The State verified that the source of noncompliance is correctly implementing the regulatory requirements through a follow-up, that the 3 LEAs demonstrated no further non-compliance within the OSEP required timeline of 12 months and were correctly implementing the specific regulatory requirements (achieved 100% compliance) based on the following review of updated data. Each LEA completed a Root Cause Analysis (RCA). The RCA requires LEAs to review their policies, practices and procedures to ensure compliance and identify any issues with their own policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State. Second, the State reviewed each LEA's RCA along with the policies, practices and procedures. The State worked with each LEA to correct any issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify each LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, subsequent data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA must have a score of 100% for Indicator13 at the time of the data review. The 3 LEAs met the conditions for each of the three steps and are considered to be correctly implementing all regulatory requirements.

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

The State verified that each individual case of noncompliance was corrected. The State conducts an annual review of IEPs for compliance with the requirements of Indicator 13, which include the 8 components of a secondary-transition IEP. Any individual IEP that is found to be noncompliant must be corrected within 10 days, unless the student is no longer in the student's educational jurisdiction. The state completed a review of the corrected IEPs and determined each IEP for the 3 LEAs contained all 8 components of the items which could be corrected. Therefore, each individual case of non-compliance was determined to be corrected within the OSEP required timeline.

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

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

**13 - Prior FFY Required Actions**

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

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

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

The State has addressed the Prior FFY Required Action in the "Correction of Findings of Noncompliance Identified in FY 2020" section of the FFY2021 APR. See above.

**13 - OSEP Response**

**13 - Required Actions**

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

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

## Indicator 14: Post-School Outcomes

### Instructions and Measurement

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

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

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

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

#### Data Source

State selected data source.

#### Measurement

- A. Percent enrolled in higher education =  $[(\# \text{ of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school}) \div (\# \text{ of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school})] \times 100$ .
- B. Percent enrolled in higher education or competitively employed within one year of leaving high school =  $[(\# \text{ of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school}) \div (\# \text{ of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school})] \times 100$ .
- C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment =  $[(\# \text{ of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment}) \div (\# \text{ of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school})] \times 100$ .

#### Instructions

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

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

#### I. Definitions

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

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

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

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

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

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

#### II. Data Reporting

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

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

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

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

“Leavers” should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, “leavers” who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also

happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

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

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

### III. Reporting on the Measures/Indicators

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

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

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

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

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

## 14 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
A	2020	Target >=	49.00%	49.00%	49.00%	49.00%	30.28%
A	30.28%	Data	41.13%	40.01%	36.80%	35.61%	30.28%
B	2020	Target >=	76.00%	76.00%	76.00%	76.00%	69.53%
B	69.53%	Data	76.39%	75.47%	73.08%	74.81%	69.53%
C	2020	Target >=	80.00%	80.00%	80.00%	80.00%	76.91%
C	76.91%	Data	80.94%	82.82%	77.76%	79.42%	76.91%

### FFY 2020 Targets

FFY	2021	2022	2023	2024	2025
Target A >=	30.78%	61.56%	62.56%	63.06%	65.06%
Target B >=	80.00%	81.00%	82.50%	84.50%	87.00%
Target C >=	77.41%	77.91%	78.91%	80.41%	82.41%

### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 14, Post-School Outcomes were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

### FFY 2021 SPP/APR Data

Total number of targeted youth in the sample or census	2,610
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,997
Response Rate	76.51%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	638
2. Number of respondent youth who competitively employed within one year of leaving high school	862
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)	72
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).	77

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Enrolled in higher education (1)	638	1,997	30.28%	30.78%	31.95%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,500	1,997	69.53%	80.00%	75.11%	Did not meet 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)	1,649	1,997	76.91%	77.41%	82.57%	Met target	No Slippage

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

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

**Response Rate**

FFY	2020	2021
Response Rate	59.75%	76.51%

**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 converted to an electronic survey versus a paper survey this school year. The link to complete the survey was made available on the Public Education Department-Special Education Division website for student's to access. This has never been done before in the state and helped to increase the response rate for FFY2021.

Moving forward, the Special Education Division (SED) will establish a partnership with the New Mexico Division of Vocational Rehabilitation (DVR) to support the post-school outcomes data gathering process. Since DVR is potentially serving the population we are in need of data from, this is a logical partnership to assist with the data collection. In addition, SED will collaborate with our Parent Training Centers (PTCs) to get out information to students through social media and their information outlets. Also, a collaboration with higher education agencies will be developed to send out information about

the survey to students. The SED has established internal processes for follow-up and will continue to use these processes to ensure LEAs are supporting the data collection process. In the sections below, strategies for increasing the response rate for underrepresented groups are described.

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

The total response rates were analyzed by race/ethnicity, gender and disability category. The response rates were calculated in each of these categories and compared to the race/ethnicity, gender and disability categories of the youth who are no longer in secondary school or respondents. The data analysis revealed a close correlation in the response rates by race/ethnicity by respondents and the racial/ethnic of youth who are no longer in secondary school. The only area where there was a small difference noted was among Hispanic students, where the response rate was smaller than the number of Hispanic youth who are no longer in secondary school.

To promote responses from Hispanic youth who are no longer in secondary school, the State will have a Spanish version of the survey available for youth who may need access to the survey in the Spanish language in order to respond. In addition, the SED will collaborate with the Language and Culture Bureau to ensure that there is equitable access to the survey for all students thereby respond to the survey.

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

As indicated in the previous section, the data was analyzed by race/ethnicity and by disability category as requested by the stakeholders in the stakeholder engagement process. The data analysis by race/ethnicity revealed a close correlation in the response rates for the majority of racial/ethnic categories and the racial/ethnic make-up of youth who are no longer in secondary school. The category where a difference was noted was among Hispanic students. Response rates were smaller than the number of Hispanic youth who are no longer in secondary school.

The data was also analyzed by disability category as recommended by stakeholders. The analysis revealed a variance of 1.05% between respondent's disability category of hearing impaired and the number of youth who are no longer in secondary school. The analysis revealed smaller differences among the other disability categories and the youth who are no longer in secondary school.

**The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)**

NO

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

To promote responses from Hispanic youth who are no longer in secondary school, the State will have a Spanish version of the survey available for youth who may need access to the survey in the Spanish language in order to respond. In addition, the SED will collaborate with the Language and Culture Bureau to ensure that there is equitable access to the survey for all students thereby respond to the survey. In addition, the State will work to ensure the survey is available to youth that are hearing impaired including making the survey available in Teletypewriters (TTY). The State will continue to seek and implement methods for improving access and thereby response rates to the survey.

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

The metric used to determine representativeness is +/- 5% discrepancy in the proportion of responders compared to the 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)**

The survey administered to youth who exited secondary school in 2020-2021 was electronic versus a paper version as previously administered. In addition, the survey was made available on the website which was easily accessible. Further, LEAs were also informed the survey response rate would be considered in assigning LEA annual determination under the areas of timely and valid and reliable date. All of these efforts improved response rates and efforts to continuously improve will also keep on.

Although the State did not meet the target in category B. Enrolled in higher education or competitively employed within one year of leaving high school, overall the State rates improved over FFY2020 rates. The work to improving outcomes for students will continue as well.

## 14 - Prior FFY Required Actions

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

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

## 14 - OSEP Response



## **14 - Required Actions**

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

## Indicator 15: Resolution Sessions

### Instructions and Measurement

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

**Results Indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

**Data Source**

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

**Measurement**

Percent = (3.1(a) divided by 3.1) times 100.

**Instructions**

*Sampling is not allowed.*

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

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

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

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

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

### 15 - Indicator Data

Select yes to use target ranges

Target Range is used

#### Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	3
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	1

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

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 15, Resolution Sessions were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

#### Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2016	2017	2018	2019	2020
Target >=	55.00% - 70.00%	55.00% - 70.00%	55.00% - 70.00%	55.00%-70.00%	55.00%-70.00%
Data	100.00%		100.00%	100.00%	

#### Targets

FFY	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	55.00%	70.00%	55.00%	70.00%	55.00%	70.00%	55.00%	70.00%	55.00%	70.00%

**FFY 2021 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
1	3		55.00%	70.00%	33.33%	Did not meet target	N/A

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

Although one of these resolution sessions did not result in a resolution agreement, the matter did settle through mediation with a mediated agreement.

**15 - Prior FFY Required Actions**

None

**15 - OSEP Response**

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

**15 - Required Actions**

## Indicator 16: Mediation

### Instructions and Measurement

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

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

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

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

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

## 16 - Indicator Data

### Select yes to use target ranges

Target Range is used

### Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	29
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	17
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	6

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

NO

### Targets: Description of Stakeholder Input

Stakeholders were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress during each Stakeholder Engagement meeting, including where Indicator 16, Mediation Sessions were discussed. Most of the feedback received from stakeholders through the engagement process was to continue with the baselines and targets established in FFY2020, as they are still relevant. It is also important to note that stakeholders are still concerned with the lingering impacts the COVID-19 pandemic will have on student outcomes, including State and LEA performance on the SPP/APR indicators. Stakeholders continue to recommend that the targets hold steady for two more years or show small incremental increases, as the pandemic impacts State and LEA rates. The stakeholder groups will review the data each year and prior to the submission of the FFY2022 SPP/APR, to reestablish baseline and targets if needed.

### Historical Data

Baseline Year	Baseline Data
2005	61.30%

FFY	2016	2017	2018	2019	2020
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00%-85.00%	70.00%-80.00%
Data	78.05%	68.29%	71.43%	69.57%	70.83%

### Targets

FFY	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%

**FFY 2021 SPP/APR Data**

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target (low)	FFY 2021 Target (high)	FFY 2021 Data	Status	Slippage
17	6	29	70.83%	70.00%	80.00%	79.31%	Met target	No Slippage

Provide additional information about this indicator (optional)

**16 - Prior FFY Required Actions**

None

**16 - OSEP Response**

**16 - Required Actions**

## Indicator 17: State Systemic Improvement Plan

### Instructions and Measurement

**Monitoring Priority:** General Supervision

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

#### Measurement

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

#### Instructions

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

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

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

#### Overview of the Three Phases of the SSIP

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

##### **Phase I: Analysis:**

- Data Analysis;
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Children with Disabilities;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

#### Specific Content of Each Phase of the SSIP

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

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

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

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

##### A. Data Analysis

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

##### B. Phase III Implementation, Analysis and Evaluation

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

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

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

**C. Stakeholder Engagement**

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

**Additional Implementation Activities**

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

**17 - Indicator Data**

**Section A: Data Analysis**

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

New Mexico's State Identified Measurable Result (SiMR): Increase the reading proficiency of students with disabilities in second grade, as measured by statewide-standardized reading assessments.

Currently, New Mexico's statewide-standardized reading assessment is Istation's Indicators of Progress (ISIP) which is a formative computer adaptive assessment that reflects the reading ability level of each student and measures growth over time. Istation is administered three times per year: at the beginning of the year (BOY), middle of the year (MOY), and end of the year (EOY).

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

NO

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

YES

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

The subset of the population for indicator 17 is second-grade students with disabilities at forty ECLIPSE schools. There are a total of 77 schools, 37 schools participated with ECLIPSE in the Fall of 2021, and are all in one district.

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

NO

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

<https://webnew.ped.state.nm.us/wp-content/uploads/2023/01/ECLIPSE-Theory-of-Action-FFY-2021.pdf>

**Progress toward the SiMR**

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

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

NO

**Historical Data**

Baseline Year	Baseline Data
2019	12.40%

**Targets**

FFY	2021	2022	2023	2024	2025
Target> =	16.50%	17.00%	17.60%	18.60%	20.10%

**FFY 2021 SPP/APR Data**

Grade 2 SWDs Proficient in ECLIPSE schools	Total grade 2 SWDs in ECLIPSE schools	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
27	164	16.51%	16.50%	16.46%	Did not meet target	No Slippage

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

The FFY 2021 data source was the end of the year (EOY) Istation data reporting from the Accountability office of the New Mexico Public Education Department.

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

The SiMR targets the reading proficiency of 2nd-grade students with disabilities in participating schools, as measured by the Istation assessment. Student performance scores are collected and compiled by the Istation platform after completion of the assessments. Istation shares this data with the New Mexico Public Education Accountability Office, which then sends the data for the 40 schools to the ECLIPSE team for evaluation. The ECLIPSE team then reviews and analyzes the data of 2nd-grade students with disabilities by averaging proficiency rates and the overall proficiency of the 40 participating schools. The overall proficiency rate of EOY Istation scores determines progress toward the SiMR target.

**Optional: Has the State collected additional data (i.e., benchmark, CQI, survey) that demonstrates progress toward the SiMR? (yes/no)**

**Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)**

NO

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

NO

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

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

<https://webnew.ped.state.nm.us/wp-content/uploads/2023/01/SSIP-Implementation-Evaluation-Plan-FFY-2021.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.**

Each of the key deliverables in the areas of planning/operational activities, data analysis, support for schools, and stakeholder engagement have all been updated to reflect the activities completed for FFY 2021.

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

As the pandemic waned, the ECLIPSE program has been able to implement and evaluate more key deliverable activities to support students with disabilities.

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

The major categories of the infrastructure improvement strategy included planning/operational activities, school support services, and stakeholder engagement. During this reporting period, the program's strategic plan was revised based on program evaluation. Systems and protocols were developed to support the implementation of the strategic plan.

1. Planning/Operations Activities: As ECLIPSE moved into its second year under the management of the Special Education Division of the New Mexico Public Education Department (NMPED), the ECLIPSE team focused on improving the program's support. We focused on five primary planning and operations activities. These activities relied heavily on data analysis to guide decision making.
  - a. We added 37 new schools to the ECLIPSE program from the state's largest district, Albuquerque Public Schools (APS).
  - b. We conducted an internal evaluation of the program. We collected and analyzed a variety of qualitative and quantitative data to measure the efficacy of the program. Data collection and analysis tools included Google Forms, Survey Monkey, Excel, Tableau, and Otter (transcription software). Qualitative data tools included participant surveys, interviews, and observations. Quantitative data tools included student reading proficiency scores, participant surveys, coaching logs, contractors' invoices, and other program artifacts.
  - c. We evaluated the performance of program contractors.
  - d. We developed a strategic plan based on program evaluation results.
  - e. We identified the need to hire an outside program evaluator to support improvement strategies.

2. Support for schools was provided via a variety of services.

- a. Data-Based Professional Development/Targeted Assistance: Regional Education Cooperative (REC) collected and analyzed formative assessment data (Istation BOY, MOY, and EOY) from participating schools to determine the needs of students. This data provided the REC with the information needed to design targeted assistance in the form of professional development for ECLIPSE school staff. We resumed leadership professional development targeting administrative support for EBPs, particularly in the areas of observations, coaching, and feedback cycles. Our NMPED partner, Priority Schools Bureau, provided leadership training for school administrators. Collaborating for Outstanding Readiness in Education, New Mexico State University (CORE NMSU), provided targeted assistance at the classroom level to special education teachers across the state of New Mexico.
- b. Needs-based school allocation funds paid for professional development that was not provided by RECs and for materials/supplies targeting students with disabilities (SWDs). An ECLIPSE team member reviewed allocation reports monthly to track and approve spending.
- c. Instructional Coaching: ECLIPSE contracted with CORE NMSU to provide 20 instructional coaches to support educators with literacy instruction. Coaching logs were revised to better align with improvement criteria and the statewide literacy initiative.
- d. The ECLIPSE team created toolkits, timelines, and information sheets to support participants' understanding of the program. A small cohort participated in a usability study to provide feedback on program toolkits.

2. Stakeholder Engagement: Stakeholder engagement focuses on family engagement, school team participant engagement, community engagement, and contracted support specialists engagement (i.e. coaches). All levels of stakeholder engagement rely on data to determine areas for improvement and support.

- a. Parent/Family Engagement: ECLIPSE support specialists provided ongoing literacy training for parents/families and school staff on effective family literacy engagement with an emphasis on Structured Literacy. REC provided hands-on literacy family engagement training at each ECLIPSE participating school.
- b. District/School Level: APS collaborative meetings were held to align the ECLIPSE program with APS' organizational structure. School Implementation Partners (SIPs) worked directly with CORE NMSU coaches and REC support specialists. In most cases, SIPs are K-3 special education teachers. SIPs attended virtual gatherings with CORE NMSU coaches and directors.
- c. Community Level: Select community representatives gathered as members of the IDEA B panel four times during the reporting period. During these meetings, the ECLIPSE team gave presentations focused on strategic planning based on data analysis.



- d. Contractors: Engagement with contracted specialists occurred in several ways including regular meetings, emails, and phone conversations. To support collaboration, ECLIPSE held individual contractor meetings as well as all contractor meetings to discuss the program.
- e. Collaborative Conversations: To support the ECLIPSE program, regular meetings were held internally, with participants, and with program and agency partners. We implemented internal processes to facilitate collaboration, such as using Google docs to co-develop protocols. To enhance stakeholder collaboration, ECLIPSE published a newsletter twice during the year and established a web page. ECLIPSE also communicated its values, vision, mission, and goals to all stakeholders.

**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.**

1. Planning/operational activities:
  - a. 37 APS Schools were added, Istation data of SWD at these schools had been among the lowest in the state, demonstrating the need for support. It was to support systemic improvement efforts.
  - b. Program evaluation Survey results suggested participants did not understand the program goals and lacked participant motivation. The root cause of this barrier was a lack of communication. Development of a program logo increased the identification of the program. A collaboration to define values, vision, mission, and goals and create a newsletter, web page, guidance manuals, and toolkits to identify expectations, participant roles, and responsibilities. A follow-up survey revealed this helped to alleviate misconceptions and increased stakeholder motivation, trust, and collaboration, developing sustainability of program participation.
  - c. Contractor work evaluations revealed overlapping roles and responsibilities. This resulted in friction between contractors and confusion within school teams. The contractor's roles became more defined. In subsequent contract negotiations, roles and responsibilities were redefined. This short-term outcome increased staff accountability and monitoring and led to greater sustainability.
  - d. A review and update of the strategic plan encompass all areas of the systemic framework, including governance, data, finance, staffing, accountability/monitoring, quality standards, professional development, and technical assistance.
  - e. Evaluator: A program evaluator to support improvement strategies was hired, Short-term and intermediate outcomes include maintaining timelines, improving data collection analysis, and new areas of development. Working with evaluators will increase sustainability and improve progress toward the SiMR.
2. Support for Schools:
  - a. Data-Based Professional Development/Targeted Assistance
    - i. EC Data-Based Targeted Assistance data analysis supported targeted assistance decisions. If student Istation data indicated a weakness in a specific literacy component, PD support and targeted assistance were provided. Short-term outcomes supported ECLIPSE schools by assisting them in analyzing data. The decisions impact progress towards the SiMR. An outcome of data analysis is school team development based on data literacy, moving towards long-term goals of sustainability.
    - ii. Administrative Coaching short-term outcomes of PSB supported principals with analyzing data of the results of coaching teachers, instructional outcomes and PD. These decisions impact progress towards the SiMR. An intermediate outcome was the use of EBPs with greater intentionality in progress toward the SiMR.
    - iii. CORE NMSU Coaching short-term and intermediate outcomes impacted the internal processes and ongoing strategic plan revisions. One short-term outcome was data suggesting coaching logs needed accurate topics. This resulted in defined coaching indications and PD needs. An intermediate outcome was that teachers used EBPs more effectively, resulting in progress toward the SiMR.
  - b. The needs based school allocation of ECLIPSE placed needed materials/supplies in SWD classrooms to support Structured Literacy. The allocation supported teachers in coaching and PD. Accountability/monitoring, data, finance, and PD are part of the system's framework. The intermediate outcomes support student learning resulting in progress toward the SiMR.
  - c. Instructional Coaching supported teachers with new strategies and goal setting to improve literacy outcomes for SWD, through PD and data in the systems framework. Data collected suggested a short-term outcome of teachers feeling supported. The intended outcome of instructional coaching is to change adult behaviors and implementation to SWD which leads to the achievement of the SiMR and sustainability.
3. Stakeholder Engagement
  - a. Parent/Family Engagement: ongoing literacy training with a greater emphasis on Structured Literacy. Families developed strategies for supporting SWDs at home to increase student learning opportunities and achievement. Family literacy events provided hands-on supplies so the family could support literacy at home. Surveys indicated families felt better prepared to support students at home. Ongoing literacy training for families supports SiMR achievement and is related to data and accountability/monitoring in the systems framework.
  - b. District/School: surveys indicated SIPs appreciated the support and collaborative opportunities of SIP gatherings, which gave SIPs opportunities to speak with other special educators, share strategies, and emotional support. The short-term impact of social-emotional well-being leads to long-term sustainability, which includes teacher retention. We collaborated with APS teacher support specialists, curriculum and instruction, special education, and behavioral health, and a short-term outcome was the development of ECLIPSE toolkits.
  - c. Community Level: short-term outcome was the stakeholder note-taking template that was developed to share timely feedback, this was part of the ongoing strategic plan. An intermediate outcome was to discuss their feedback with an additional stakeholder.
  - d. Contractors: interactions between ECLIPSE and contractors revealed the need for improved communication to ensure that service providers were consistent in philosophies and messaging this would reduce confusion and support their roles and responsibilities. An intermediate outcome is monthly individual contractor and large group meetings for communication and collaboration.
  - e. Agency Collaborative Conversations: Reinforcement of newly adopted philosophies of the mission, vision, values, and goals were reviewed at meetings. This reduced overlapping and redundant requirements, this included agency teams of Structured Literacy initiatives and Multi-Layered Systems of Support (MLSS).

**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.**

We plan to continue our strategic plan, as outlined in the following steps.

1. Planning/Operational Activities:
  - a. Expand the ECLIPSE team. Include a deputy director of special education curriculum and instruction and hire an additional curriculum specialist. The anticipated outcome of this strategy is increased capacity to continue and expand the work.
  - b. Expand the role of the outside evaluator to contribute to planning and operational activities. The anticipated outcome of this strategy is a more comprehensive operational plan and increased accountability to staying on track with timelines.
2. Data Analysis

- a. Launch a pilot study of the data analysis/root cause analysis. Use the results and learnings from the pilot to develop a more comprehensive data analysis component of support. The anticipated outcome of this strategy is an increased use of data to identify student and school goals. This will include data collection and data analysis from instructional coaches, professional development contractors, and classroom educators.
  - b. Implement a more robust data analysis protocol with the support of the outside evaluator. This will include protocols and timelines for data collection and data analysis provided by the ECLIPSE leadership team, instructional coaches, professional development contractors, school and district administrators, and classroom educators. The anticipated outcome of this strategy is more accountability for adhering to data collection and analysis timelines and protocols.
3. School Support Services
- a. Hire an additional coaching contractor to work with the schools within APS. This contractor has extensive work with APS schools and is knowledgeable of the organizational structure. We anticipate this action will result in greater participation and increased ownership of the APS school teams.
  - b. Expand the family literacy component by including PRO and EPIC. The anticipated outcome of this strategy is to improve their understanding of student literacy expectations and support their child to improve their literacy skills at home.
  - c. With the goal of training instructional coaches and other interested stakeholders to support Structured Literacy, ECLIPSE will host a literacy summit to increase knowledge and understanding of how to implement Structured Literacy when teaching students with disabilities. Include national experts, state university scholars, and other participants with specialized knowledge. This strategy will result in additional training for instructional coaches and other interested stakeholders in Structured Literacy methodology. The anticipated outcome of this strategy is to increase awareness, understanding, and coaching skills in Structured Literacy. This will include anticipated outcomes in instructional coaching support for teachers that will increase the teacher's knowledge of awareness, understanding, and use of Structured Literacy.
4. Stakeholder Engagement
- a. Develop the Networked Improvement Community to expand stakeholder input. Include participants from higher education institutions, parent advocacy groups (PRO and EPICs), agency partners, contractors, districts, parents, and others. The anticipated outcome of this strategy by involving many stakeholder groups is to improve collaboration to build a sustainable program.

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

For the FFY 2021 SSIP reporting period, the New Mexico ECLIPSE (Indicator 17) program continued its implementation of evidence-based practices. SED identified five EBPs that provided a framework for improvement throughout the state's public education system. These include: 1) Data Driven Instruction; 2) Leadership, Observation, Coaching and Feedback Cycles 3) School Culture: Family/Community Engagement 4) School Culture: Teacher Collaboration 5) Structured Literacy PD and Implementation. New Mexico is now focusing on statewide structured literacy initiatives following evidence from the science of reading.

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

Each of the following evidence-based practices supports the SiMR because they lead to changes in adult behavior that supported students with disabilities improvement in reading achievement.

1. Data Driven Instruction: REC provided online and or in-person data-driven instruction to school principals and special education teachers. ECLIPSE schools were able to complete formative assessments during the school year. REC analyzed that data and provided data-driven instruction training. CORE NMSU provided instructional coaching to ECLIPSE special education teachers; anecdotal assessment data was analyzed, and the next steps were determined.
2. Leadership, Observation, Coaching, and Feedback Cycles: Priority Schools Bureau, an interagency partner, provided year-long professional development training to administrators.
3. School Culture: Family/Community Engagement: REC provided online and or in-person parent/family literacy events focused on SWDs. Parents/families were provided a tote bag with hands-on literacy materials (for example whiteboard, and index cards) to support their child's reading at home.
4. School Culture: Teacher Collaboration: CORE NMSU instructional coaches supported special education teachers and their general education partners by facilitating collaborative discussions about shared students with disabilities.
5. Structured Literacy PD and Implementation: CORE NMSU and REC partners received Structured Literacy training to aid in their support of teachers at ECLIPSE schools with implementing Structured Literacy methodologies.

**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.**

1. Data Driven Instruction: Data-driven instruction means teachers use data to make instructional decisions based on individual student performance and the trends and patterns they identify at a classroom and school level. When done effectively, school staff will change instructional practices based on student needs. Specifically, ECLIPSE focuses on analyzing student performance on Istation components. For example, if Istation data consistently indicates a weakness in kindergarten phonemic awareness, ECLIPSE specialists support school staff with changing instruction to target that skill. Making instructional decisions based on student data increases student outcomes by providing them with the instruction they need.
2. Leadership, Observation, Coaching, and Feedback cycles: A key to affecting school change, is the professional development of administrators. Administrators who are consistently in classrooms observing teachers and providing feedback can affect positive change in teachers and teaching strategies which impacts student performance.
3. School Culture: Family/Community Engagement: ECLIPSE supports schools with increasing family engagement. The parent/family literacy events train parents in hands-on fun literacy activities to support their child's reading at home. This increases parent/caregiver knowledge and skills about literacy development, which in turn, supports child outcomes and progress toward the SiMR.
4. School Culture: Teacher Collaboration: ECLIPSE provides partner teachers with time and a framework for collaborative conversations about shared students with disabilities. Collaboration between special education teachers and their general education partners is critical in ensuring that students with disabilities are successful in their Least Restrictive Environment. For example, collaboration provides general education teachers with the support needed to implement IEPs with fidelity.
5. Structured Literacy PD and Implementation: Evidence suggests that most students can learn how to read when taught with Structured Literacy methods. ECLIPSE coaches provide teachers with support in implementing Structured Literacy principles and practices.

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

To monitor the fidelity of implementation of the selected EBPs and assess practice change we used data obtained from participant surveys, verbal feedback gained during empathy interviews, coaching and targeted assistance logs, REC and coaching invoices, ongoing observations, meeting notes, anecdotal records, and formative student reading assessments. The ECLIPSE program team used a variety of analysis tools such as fishbone diagrams and interrelationship diagrams to evaluate the efficacy of the program and to identify change initiatives. Data was analyzed to monitor program efficacy

and modifications were made in response to individual school and teacher needs. For example, if observations and coaching logs noted staff needed additional training in early literacy instruction, steps were taken to provide that training. ECLIPSE identified the need to streamline the response to data analysis and has modified internal processes to better address the fidelity of implementation and assess practice change. For example, CORE NMSU instructional coaches were able to use needs-based allocation to directly request support such as instructional materials based on their observations of teacher needs. This will decrease delays in obtaining resources and improve responsive change based on data.

**Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.**

No other data were collected in support of the continuation of each evidence-based practice.

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

Based on the program analysis in the Spring of 2021, which includes changes in statewide initiatives, ECLIPSE plans to make improvements to current activities and strategies within the identified EBPs (Data Driven Instruction; Leadership Observation, Coaching, and Feedback Cycles; School Culture: Teacher Collaboration; School Culture: Teacher Collaboration; and Structured Literacy PD and Implementation.) This includes the expansion of ECLIPSE school teams.

1. Data Driven Instruction - We plan to continue to focus on data analysis to support instructional decisions. We will provide training to school teams on data analysis to identify trends, categories, and patterns in student performance. Part of this training will focus on conducting a root cause analysis to identify barriers to student learning. Anticipated outcomes include school teams' improved ability to conduct data analysis to identify trends, categories, and patterns in student reading performance. Another anticipated outcome is school teams' increased ability to identify barriers to student learning in reading.
2. Leadership Observation, Coaching, and Feedback Cycles - We plan to continue this support to school and district administrators. School administrators will continue to receive administrative PD (from the PED's literacy division) on Structured Literacy. Providing administrators with PD on how to observe, coach, and provide feedback to teachers on how they are implementing Structured Literacy practices will reinforce teachers' learned strategies. We anticipate this will result in greater adoption of EBPs, and impact student reading proficiency.
3. School Culture: Family/Community Engagement - In FFY 2022, we will continue to provide family literacy events. As REC support specialists prepare for the 22-23 SY, schools will have a choice about whether to have events remotely or in person. To measure participation in the events, we will continue to track the number of attendees at each event and obtain their feedback following the events. We have set a target of increasing participation in family literacy events by 10%. In addition to having an REC conduct family literacy events, Parents Reaching Out (PRO), a parent advocacy organization, will conduct literacy events. An anticipated outcome is that parents and families will increase their ability to support their children in literacy at home through attending hands-on literacy events and using literacy tools at home.
4. School Culture: Teacher Collaboration - Throughout the state, we are seeing decreasing numbers of special education teachers and available substitute teachers. The teacher shortage is having a profound effect on schools and the ability of teachers to deliver specialized instruction to SWDs. To address these barriers, the state has requested increases in teacher salaries. A bill is currently going through legislation. In addition, the state has engaged with stakeholders (teachers, LEAs, parents, and community members) to address these issues and to continue to build trust and collaboration. We plan to continue supporting partner teachers. CORE NMSU will support these teams by collaborating to better serve their shared students. We anticipate this will impact student reading proficiency and progress toward the SiMR.
5. Structured Literacy PD and Implementation - We plan to expand coaches' and teachers' content knowledge of implementing Structured Literacy when teaching students with disabilities. We plan to host a Special Education Structured Literacy Summit in which we explore strategies for adapting Structured Literacy methods when needed for specialized instruction. Coaches and teachers who attend the Summit will increase their awareness and understanding of Structured Literacy and begin to implement learned strategies into their reading classes and in specially designed instruction for students with disabilities. We anticipate this will impact student reading proficiency and progress toward the SiMR. We also plan to convert the ECLIPSE toolkits into an online orientation course in Canvas, the NMPED learning management system. We anticipate this strategy will support participants' understanding of the program's alignment with Structured Literacy New Mexico. This will result in greater adoption of EBPs and impact student reading proficiency.

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

YES

**If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.**

The evaluation data indicates that the programmatic changes we have made are beginning to have a positive impact on student proficiency rates. We plan to continue to implement the SSIP without modifications while closely monitoring progress towards goals.

**Section C: Stakeholder Engagement**

**Description of Stakeholder Input**

ECLIPSE is a New Mexico Public Education Department, Special Education Division (SED) Program that addresses the State Performance Plan (SPP) Indicator 17, Results Driven Accountability (RDA) program administered by the SED. The purpose of Indicator 17 is to improve academic results for children with disabilities in grades Kindergarten through third grade. The Indicator 17 program is characterized in its name Excellence from Coaching in Literacy for Intensive Preparation in Special Education (ECLIPSE). The ECLIPSE program engaged stakeholders in key improvement efforts with the following strategies:

1. ECLIPSE program coordinators presented data and program updates to the state IDEA Panel (members include: parents, advocates, state staff, and educators) during the 2021-2022 school year. IDEA Panel members participated and were engaged in the ECLIPSE program presentations. An ECLIPSE IDEA Panel committee met as a small group to discuss the program at the conclusion of the day. The ECLIPSE IDEA Panel committee provided EOY qualitative program feedback via a Google survey. Survey results indicated that panel members felt the program is making good progress in improving literacy outcomes for students with disabilities. A consistent recommendation among responses included increasing parent involvement in the program.
2. One ECLIPSE stakeholder meeting was held during 2021-2022 via the Zoom online platform. Stakeholders included the ECLIPSE staff, Regional Education Cooperative Executive Directors (REC'S), Special Education Directors, ECLIPSE Principals, ECLIPSE Special Education Teachers, CORE NMSU Director, and Regional Education Cooperative Contractors. Stakeholders were provided with ECLIPSE program details for the school year and stakeholders provided verbal feedback about the ECLIPSE program at the conclusion of the meeting.
3. Parent engagement stakeholder meetings were held via online platforms and in person events to provide direct explicit literacy training to parents via

hands-on activities. Once trained, parents could engage their students' in fun literacy activities at home. Regional Education Cooperative (REC) contractors dropped off tote bags with the hands-on literacy materials to each school prior to the online parent training. Parent survey data following the training indicated favorable results; parents were pleased with the literacy tools that could be utilized at home with their child. Since some of the training was online, many parents along with their child/ren attended the interactive family literacy event.

4. The ECLIPSE team interviewed 6 school participants – 4 administrators and two teachers. The interviews were coded and added for recurrent themes. Common themes for improving the program included communicating clearer participation expectations and sharing timelines earlier in the school year. Administrators felt teachers needed more support with data analysis. Special education teachers felt they did not have enough time to collaborate with general education teachers, which limited their ability to support students effectively.

5. An online end-of-year survey was sent to all ECLIPSE stakeholders as the 2021-2022 school year ended. The feedback from this survey supported the ongoing development of an ECLIPSE strategic plan focused on short-term goals, intermediate goals, and longer-term goals.

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

The ECLIPSE program engaged stakeholders in key improvement efforts with the following strategies:

1. ECLIPSE program coordinators presented data and program updates to the state IDEA Panel (members include: parents, advocates, state staff, and educators) during the 2021-2022 school year. IDEA Panel members participated and were engaged in the ECLIPSE program presentations. An ECLIPSE IDEA Panel committee met as a small group to discuss the program at the conclusion of the day. The ECLIPSE IDEA Panel committee provided EOY qualitative program feedback via a Google survey.

2. One ECLIPSE stakeholder meeting was held during 2021-2022 via the Zoom online platform. Stakeholders included the ECLIPSE staff, Regional Education Cooperative Executive Directors (REC'S), Special Education Directors, ECLIPSE Principals, ECLIPSE Special Education Teachers, CORE NMSU Director, and Regional Education Cooperative Contractors. Stakeholders were provided with ECLIPSE program details for the school year and stakeholders provided verbal feedback about the ECLIPSE program at the conclusion of the meeting.

3. Parent engagement stakeholder meetings were held via online platforms and in-person events to provide direct explicit literacy training to parents via hands-on activities. Once trained, parents could engage their students in fun literacy activities at home. Regional Education Cooperative (REC) contractors dropped off tote bags with the hands-on literacy materials to each school prior to the online parent training. Parent survey data following the training indicated favorable results; parents were pleased with the literacy tools that could be utilized at home with their child. Since some of the training was online, many parents along with their child/ren attended the interactive family literacy event.

4. The ECLIPSE team interviewed 6 school participants – 4 administrators and two teachers. The interviews were coded and added for recurrent themes.

5. An online end-of-year survey was sent to all ECLIPSE stakeholders as the 2021-2022 school year ended. The feedback from this survey supported the ongoing development of an ECLIPSE strategic plan focused on short-term goals, intermediate goals, and longer-term goals.

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

YES

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

1. To address concerns expressed by stakeholders, the State designed the following strategies:

2. Feedback from the state IDEA B panel and parent engagement events indicated that participants felt the program is making good progress in improving literacy outcomes for students with disabilities. A consistent recommendation among responses included increasing parent involvement in the program. To address this concern, the ECLIPSE team plans to solicit input from the parent advocacy group Parents Reaching Out and to add parent representatives to an advisory panel (Networked Improvement Community).

3. Interviews with school participants and participant surveys revealed common themes for improving the program. These included: communicating clearer participant roles and responsibilities, and expectations; sharing timelines earlier in the school year; and clarifying the program mission, goals, and values. To address these concerns, the ECLIPSE team developed timelines and expectations descriptions that were shared at the end of Spring 2021. In addition, the ECLIPSE team developed an ECLIPSE informational packet detailing program specifics and emailed ECLIPSE newsletters to program participants.

4. Administrators felt teachers needed more support with data analysis. Targeted assistance for data analysis was increased to support school staff.

5. Special education teachers felt they did not have enough time to collaborate with general education teachers, which limited their ability to support students effectively. To address the need for increased collaboration time, school teams will have opportunities to participate in training together. For example, coaches will be working with teaching partners (special education and general education teachers who share students with disabilities). In addition, school teams will work together to analyze data and conduct a root cause analysis.

**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.**

In the next fiscal year, we plan to increase participation in family literacy activities. Engaging families in literacy events supports progress towards the SiMR because families learn about how to reinforce EBPs their students are being taught at school. During COVID, we learned families like having the option of whether to attend events in person or remotely. We will continue to offer both options. To measure participation in the events, we will continue to track the number of attendees at each event and obtain their feedback following the events via surveys. The ECLIPSE program far exceeded our goal of a 2% increase in parent participation at family literacy events. 549 parents participated in the 21-22 SY which is an increase from the 20-21 SY of 47%. We have set a target of increasing participation in family literacy events for the 22-23 SY by 10%.

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

In FFY 2022, we will continue to provide family literacy events. As REC support specialists prepare for the 22-23 SY, schools will have a choice about whether to have events remotely or in person. To measure participation in the events, we will continue to track the number of attendees at each event and obtain their feedback following the events. We have set a target of increasing participation in family literacy events by 10%.

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

Throughout the state, we are seeing decreasing numbers of special education teachers and available substitute teachers. The teacher shortage is having a profound effect on schools and the ability of teachers to deliver specialized instruction to SWDs. To address these barriers, the state has requested increases in teacher salaries. A bill is currently going through legislation. In addition, the state has engaged with stakeholders (teachers, LEAs, parents, and community members) to address these issues and to continue to build trust and collaboration.

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

We recognize the importance of family engagement in student academic achievement, so supporting this activity is a priority. We plan to talk to our REC partners and ECLIPSE stakeholders about additional ways to increase family engagement.

**17 - Prior FFY Required Actions**

None

**17 - OSEP Response**

**17 - Required Actions**

## **Certification**

### **Instructions**

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

#### **Certify**

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

#### **Select the certifier's role:**

Designated by the Chief State School Officer to certify

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

#### **Name:**

Deborah Dominguez-Clark

#### **Title:**

Director of Special Education for New Mexico

#### **Email:**

deborah.clark@ped.nm.gov

#### **Phone:**

505-819-1337

#### **Submitted on:**

04/27/23 6:28:48 PM

**Determination Enclosures**

**RDA Matrix**

## 2023 Part B Results-Driven Accountability Matrix

**Results-Driven Accountability Percentage and Determination<sup>1</sup>**

Percentage (%)	Determination
67.50%	Needs Assistance

**Results and Compliance Overall Scoring**

	Total Points Available	Points Earned	Score (%)
<b>Results</b>	24	12	50.00%
<b>Compliance</b>	20	17	85.00%

**2023 Part B Results Matrix**

**Reading Assessment Elements**

Reading Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	87%	1
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	84%	1
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	13%	0
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	93%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	22%	0
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	91%	1

**Math Assessment Elements**

Math Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments	87%	1
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments	84%	1
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	26%	0
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	91%	1
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	11%	0
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress	92%	1

<sup>1</sup> For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the *Individuals with Disabilities Education Act* in 2023: Part B."

**Exiting Data Elements**

<b>Exiting Data Elements</b>	<b>Performance (%)</b>	<b>Score</b>
<b>Percentage of Children with Disabilities who Dropped Out</b>	7	2
<b>Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**</b>	91	2

\*Due to privacy concerns the Department has chosen to suppress this calculation.

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



2023 Part B Compliance Matrix

Part B Compliance Indicator <sup>2</sup>	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2020	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	NVR	N/A	0
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.00%	N/A	2
Indicator 11: Timely initial evaluation	99.28%	NO	2
Indicator 12: IEP developed and implemented by third birthday	95.49%	NO	2
Indicator 13: Secondary transition	99.30%	YES	2
Timely and Accurate State-Reported Data	89.01%		1
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			2
Specific Conditions	None		
Uncorrected identified noncompliance	None		

<sup>2</sup> The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: [https://sites.ed.gov/idea/files/2023\\_Part-B\\_SPP-APR\\_Measurement\\_Table.pdf](https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR_Measurement_Table.pdf)

Data Rubric

FFY 2021 APR<sup>3</sup>

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

<sup>3</sup> In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

		618 Data <sup>4</sup>		
Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 4/6/22	0	1	0	1
Personnel Due Date: 11/2/22	1	1	1	3
Exiting Due Date: 11/2/22	1	1	1	3
Discipline Due Date: 11/2/22	1	1	1	3
State Assessment Due Date: 12/21/2022	1	0	1	2
Dispute Resolution Due Date: 11/2/22	1	1	1	3
MOE/CEIS Due Date: 5/4/22	1	1	1	3
			<b>Subtotal</b>	18
<b>618 Score Calculation</b>			<b>Grand Total</b> (Subtotal X 1.23809524) =	22.29

<sup>4</sup> In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

<b>Indicator Calculation</b>	
A. APR Grand Total	24
B. 618 Grand Total	22.29
C. APR Grand Total (A) + 618 Grand Total (B) =	46.29
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
<b>Denominator</b>	52.00
D. Subtotal (C divided by Denominator*) =	0.8901
E. Indicator Score (Subtotal D x 100) =	89.01

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

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

**DATE: February 2023 Submission**

### SPP/APR Data

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

### Part B 618 Data

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

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

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

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



## How the Department Made Determinations

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

<https://sites.ed.gov/idea/how-the-department-made-determinations/>