

AR Part B

FFY2014 State Performance Plan / Annual Performance Report

Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

In order to ensure consistent data across indicators, provide the number of districts in this field and the data will be loaded into the applicable indicator data tables.

This data will be prepopulated in indicators B3A, B4A, B4B, B9, and B10.

General Supervision System:

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

Components of the State’s General Supervision System

The Arkansas Department of Education Special Education Unit (ADE-SEU) is composed of the following sections:

- Associate Director’s Office
- Dispute Resolution Section (DRS)
- Monitoring/Program Effectiveness (MPE)
- State Program Development
- Grants/Data Management (G/DM)
 - Funding and Finance
 - Arkansas IDEA Data & Research Office at the University of Arkansas at Little Rock (UALR)
- Curriculum and Assessment

Associate Director’s Office: The ADE-SEU works in collaboration with local school districts to provide special education services for students with disabilities (ages 3 to 21) in an effort to ensure that all special education students in Arkansas receive a Free Appropriate Public Education (FAPE) as outlined in the Individuals with Disabilities Education Act (IDEA). The ADE-SEU is committed to improving educational results for students with disabilities through statewide leadership and support to schools, educators, students, families, and other stakeholders.

Additional responsibilities include the oversight of statewide compliance with all federal and state special education laws and regulations, development of programs and services, management of federally required data reporting and analysis, and administration of state and local special education budgets.

The ADE-SEU staff works in partnership with the Associate Director in designing and/or conducting activities associated with initiatives undertaken to fulfill state and federal regulations and improve outcomes for students with disabilities.

These include:

- maintaining an effective system for communication within the unit and across other divisions and units;
- embracing the IDEA Partnership Model, Leading by Convening, and using the framework to engage multiple stakeholders across the state (e.g. surveys, cross agency collaboration, state conferences, regional meetings) in state-level special education issues and needs;
- providing technical assistance to parents and other stakeholders;
- supporting the implementation of programs and services to meet the needs of students with disabilities and their teachers;
- developing and disseminating policies, procedures and regulations consistent with federal and state statutes;
- representing the ADE-SEU when working with other divisions within the ADE and outside agencies with whom the ADE-SEU collaborates and cooperates;
- working within the agency and with Institutions of Higher Education to ensure special educators are adequately prepared and supported to meet the needs of students with disabilities;
- overseeing statewide compliance with all federal and state special education laws and regulations;
- implementing a risk-based tiered system of monitoring and technical assistance focused on results;
- maintaining an effective system for dispute resolution;
- working collaboratively with other ADE divisions, as well as across agencies to provide professional development and technical assistance based on established need at the state, regional and district level; analyzing data and following the data driven State Systemic Improvement Plan to guide the PD and TA focus for the unit.
- overseeing the implementation of special grants including the State Personnel Development Grant and PROMISE Grant;
- monitoring and responding to the activities of the Arkansas General Assembly when it is in session;
- providing guidance to the ADE regarding the impact of proposed or current policy and regulations around special education issues;
- overseeing the development and implementation of the existing statewide alternate portfolio assessment in science and new online assessment for literacy and math for students with significant cognitive disabilities implemented during the 2014-2015 school year, as well as related statewide personnel training activities;
- assisting in the collection, review, analysis, and reporting of required LEA and state data; assigning LEA Annual Performance Report (APR) determinations, which include required actions and sanctions as applicable, using a variety of factors (APR indicators, fiscal audits, monitoring findings, and so forth);
- maintaining effective internal controls for program and fiscal requirements; and
- administering state and local grant applications.

Dispute Resolution: The ADE-SEU includes a Dispute Resolution Section (DRS). The DRS is a component of the State's general supervision system. The DRS is responsible for managing the due process hearing system and the complaint investigation system, both of which are required by the Individuals with Disabilities Education Act (IDEA), as amended. Implementation of both systems is accomplished under Arkansas state rule, Special Education and Related Services: Procedural Requirements and Program Standards (Arkansas Department of Education, 2008). The DRS also provides oversight of the Arkansas Special Education Mediation Project (ASEMP) administered by the UALR Bowen School of Law Mediation Clinic.

The DRS coordinates and provides general supervision for all three dispute resolution systems to ensure disputes are resolved in accordance with federal and state regulations. The Administrator of the DRS works closely with the

administrator and staff of the Monitoring/Program Effectiveness (MPE) Section to ensure prompt resolution of complaints filed with the DRS.

When violations of IDEA are found, during a complaint investigation or due process hearing and corrective actions are ordered, the DRS monitors and ensures compliance by the public agency. As part of its efforts in monitoring and ensuring compliance with corrective actions contained in hearing decisions or investigation reports, the DRS may request staff of the MPE section to make on-site inspections of school districts and early childhood programs to verify compliance.

The DRS works collaboratively with public agencies to achieve compliance; however, the DRS has the duty to recommend to the Associate Director the withholding of funds from a public agency that is unable or unwilling to achieve compliance within a reasonable period, subject to notice and opportunity for a hearing.

Compliance issues discovered during mediation and/or complaint investigations that are not part of the original complaint or mediation request are referred to the appropriate ADE-SEU Area Supervisor for resolution.

The DRS has developed internal policies to ensure that due process hearing requests are assigned immediately to hearing officers on a rotational basis. In addition, internal policies, procedures, and practices were developed and implemented to ensure that complaint investigation reports were administratively complete within the required timeline.

The ADE-SEU established the Arkansas Special Education Mediation Project, which began providing mediation services to parents of students with disabilities, local education agencies, and education service cooperatives (ESCs) in August 2003. The Project is sponsored and funded by the Special Education Unit and is supervised by the UALR Bowen School of Law in Little Rock. The Project makes mediation services available to resolve disputes involving the identification, evaluation, educational placement, and provision of a free appropriate public education to students with disabilities as defined by the IDEA. Mediation services are free of charge to parents of students with disabilities and schools/ESCs. The mediation program is designed to resolve disputes before a formal request is made for a due process hearing or a complaint investigation, but is also available after a complaint has been filed. Mediation services are intended to reduce costs and improve relations between parents of children with disabilities and school districts (k-12) and ESCs that provide services on behalf of their member school districts to eligible children with disabilities ages 3-5 (pre-school). The availability and use of this process does not obstruct access to the due process hearing or complaint systems

Monitoring/Program Effectiveness and Non-Traditional Programs (MPE): The MPE section monitors special education programs for compliance with state and federal regulations and provides technical assistance for program improvement. The primary focus of the MPE section is improving educational results for students with disabilities and ensuring that all local educational agencies (LEAs) and other public agencies meet the Individuals with Disabilities Education Act (IDEA) program requirements.

The MPE section personnel work collaboratively with other sections within the special education unit, as well as across

divisions within the ADE in carrying out the MPE section's overall supervision of the provision of special education and related services. By working in conjunction with these sections, MPE Area Supervisors can assist administrators in developing and implementing staff in-service and personnel development training designed to meet the needs of individual programs, specific geographic areas throughout the state and, if needed, statewide activities. This can also impact the areas of training that receive emphasis in the higher education teacher preparation training programs. The staff of the MPE section works with the ADE Special Education Associate Director to ensure that students identified as needing special education and related services are included in statewide and district-wide assessments. The MPE section also works to ensure that all students have access to the general education curriculum and programs as a part of their Individualized Education Program (IEP).

The Arkansas Department of Education, Special Education Unit, continues to review and revise monitoring procedures, working toward full implementation of a risk-based tiered system of monitoring and technical assistance, which includes a focus on results. This system is designed to: a) ensure LEAs comply with IDEA requirements b) identify compliance barriers that may negatively impact student results, and c) identify technical assistance needs.

One component of the tiered system is a four-year monitoring cycle. All LEAs participate in self-monitoring activities on the cycle and can also be selected for on-site monitoring visits and/or submission of applicable items based on established risk. Self-monitoring provides an opportunity for school staff to review their own program data and self-identify strengths and needs. Self-monitoring is different than past monitoring practices in which the State identified problem areas for the LEA, directed the LEA to correct deficiencies in those areas, and then checked to make sure it was completed. That system often resulted in a Band-Aid approach, as opposed to the systemic changes the ADE-SEU would like to see. LEAs know their own programs and are better at identifying where program strengths and weaknesses lie than the state monitoring team which is limited to two or three days on-site. The self-monitoring procedures enable LEAs to take ownership of their own programs and use their data to build capacity for maintaining compliance and improving services for students with disabilities.

A comprehensive on-site results-driven monitoring process is also part of the tiered system and has been implemented with LEAs determined to be at high risk and those who have volunteered to be part of a pilot. The ADE reserves the right to implement monitoring activities on or off site based on a variety of risk factors regardless of the cycle.

To assist ADE-SEU in determining a district's level of monitoring and technical assistance needs, a more formalized process for determining risk is being developed that incorporates a number of variables. This process was shared with all LEAs in the fall of 2015 and used to identify technical assistance needs for LEAs in the 2015-2106 school year.

Timelines are established for agencies to submit documentation of completed corrective actions.. Follow-up monitoring is conducted to ensure actions have been taken to maintain compliance with regulations.

The ADE has the authority under Section 452 of GEPA to withhold, in whole or in part, any further payments of IDEA funds to an LEA that fails to correct identified fiscal noncompliance. Prior to withholding IDEA funds, the LEA must have reasonable notice and an opportunity for a hearing. Pending the outcome of the hearing, the ADE may suspend

payment to the LEA, suspend the authority of the LEA to obligate funds, or both. Withholding or suspending of funds is limited to the programs or projects (or portions thereof) that affected the determination. In addition to these actions, the ADE may utilize any other authority available to it to enforce the requirements of IDEA, including a referral to the ADE Standards Assurance Unit for review of compliance with the rules governing standards for accreditation.

State Program Development: The State Program Development Section of the ADE-SEU assists public agencies such as schools, institutions of higher education, state and private agencies in the development of programs and trainings to improve services for students with disabilities. This section provides information and assists in the coordination for the following projects:

- Recruitment and Retention

Recruitment and Retention of highly qualified teachers is paramount to improving outcomes for students with disabilities. Arkansas provides tuition reimbursement for individuals pursuing certification in speech/language pathology, vision, and hearing. In addition, the special education unit works in collaboration with the ADE Division of Educator Effectiveness through job fairs and dissemination of recruitment materials. In a continuing effort to recruit qualified education personnel for all Arkansas public school districts, the Arkansas Department of Education has made available a web-based recruitment service, TeachArkansas. This service is designed to help those responsible for personnel recruitment to meet the challenges of placing the most qualified education professionals in our schools. This service for Arkansas's public schools is provided by the Arkansas Department of Education (ADE) through collaboration of the Special Education and Professional Quality Enhancement Units.

- Arkansas Deaf-Blind Project also known as Children and Youth with Sensory Impairments (CAYSI)

CAYSI is a federally funded program serving individuals from birth to age 21 who are deaf/blind or who are at risk for deaf/blind. CAYSI consultants provide training, technical assistance and information to families, educators and others who work with these individuals. CAYSI supports the philosophy of inclusion of the individual with deaf/blindness in educational, vocational, recreational and community environments.

- Paraprofessionals

Paraprofessionals are invaluable resources in the provision of quality special education services. Arkansas has developed training to meet the changing demands for skilled paraprofessionals in today's classrooms. The training modules are a collaborative effort between paraprofessionals, teachers, administrators, parents and their communities. The training is designed to be informational, practical and activity based for paraprofessionals.

- The Arkansas Co-Teaching Project

The Arkansas Co-Teaching Project assists districts in improving LRE and is focused on ensuring students are accessing and progressing in the general education curriculum. The Arkansas Co-Teaching Project provides support to schools interested in implementing a new co-teaching program or improving an existing one. Support is provided through comprehensive training, technical assistance, and informational resources.

- Qualified Interpreters

In an effort to increase the number of qualified interpreters in the State, the ADE-SEU has partnered with the Training and Assessment Systems for K-12 Educational Interpreter's Center (TASK12), which is part of the Technical Assistance for Excellence in Special Education (TAESE) Center.

State Personnel Development Grant: The ADEs State Personnel Development Grant works with districts and educational cooperatives to support RTI implementation and maximize all students' literacy and behavioral outcomes. The SPDG is focused on increasing the capacity of the state, regional educational cooperatives, and districts to support RTI implementation with fidelity; improve educators' ability to implement evidence-based literacy and behavior support practices; and improve literacy and behavior outcomes for all students. The SPDG offers general, targeted, and intensive RTI supports statewide and has partnered with multiple ADE Units, national TA Centers, and stakeholders to ensure resources are evidence-based, address LEA needs, and support RTI implementation fidelity.

Grants/Data Management: The Grants/Data Management Section is comprised of the **Funding and Finance** Office and the **IDEA Data and Research** Office.

Funding and Finance participates in general supervision by ensuring the appropriate use of IDEA funds as well as state and local funds specifically budgeted for special education. The Section provides support for school districts, education service cooperatives, and State agencies in developing all grant applications and budgets pertaining to IDEA federal, state and local funds. The process includes:

- identifying appropriate and or inappropriate use of federal funds through the budgeting process so action can be taken, when necessary, to ensure timely correction of identified noncompliance;
- identifying appropriate and or inappropriate use of state and local funds through the budgeting process to ensure maintenance of effort is being met;
- analyzing required reporting from all funded entities on the use of funds to achieve desired program outcomes (special grants reporting on spending and program results, early intervening, annual and periodic Title VI-B, and Section 619 budget expenditure reports);
- providing technical assistance in conjunction with the ADE finance and technology staff as well as targeted special education budget workshops;
- conducting budget analysis on state funded catastrophic occurrences and residential placements to ensure accurate requests and use of funds; and
- monitoring of established deadlines for reporting and use of automation to ensure adherence to spending and reporting deadlines.

Fiscal Monitoring: In compliance with the corrective actions issued September 7, 2015 as a result of OSEP's review of the State's procedures for fiscal requirements and other state reported information, the ADE notified all LEAs of the revised IDEA Part B allocation and disbursement procedures through the publication of a commissioner's memo. The memo published on September 21, 2015, provided LEAs with the allocation and disbursement procedure documents for IDEA Part B Section 611 & 619, which include the ADE's responsibility to retain records used to demonstrate the method

by which the state makes base payments.

Additionally, the ADE has revised its policies and procedures for fiscal monitoring consistent with IDEA and the Uniform Guidance. As noted in OSEP's letter accompanying the report of findings, ADE had revised some of its policies and procedures prior to the conclusion of OSEP's monitoring activities, and corrected areas of noncompliance.

The ADE notified LEAs of its revised fiscal monitoring policies and procedures, including the requirement for the ADE and LEAs to maintain financial and programmatic records in accordance with federal laws and regulations through the publication of an additional commissioner's memo. The memo with attached procedure documents was published on November 5, 2015, and made available on the ADE website. Additionally, ADE informed the Arkansas Legislative Audit of the findings of noncompliance and corrective actions required.

The ADE provided preliminary training on its updated fiscal procedures at the annual LEA Academy on September 15, 2015. A power point training guide was posted on the Funding and Finance section of the ADE-SEU Website on November 23, 2015 and a risk assessment for use of IDEA funds was posted for LEAs to access through their secure log in that same day in order to establish a baseline for future monitoring activities. The risk assessment along with other information will be used in the future to determine the intensity of monitoring activities. A web conference was conducted on December 15, 2016 to support LEAs in completing the Risk Assessment component of the revised fiscal monitoring.

All LEAs were given seven-week window (November 23, 2015 – January 11, 2016) to complete the risk assessment. Risk Assessments are currently being analyzed and feedback will be provided to LEAs by mid-April, 2016.

The ADE-SEU will do a combination of onsite and desk monitoring in the spring of 2016 with six LEAs that have been determined to be in fiscal distress. Beginning with the 2016-2017 school year, districts on the program monitoring cycle will complete the fiscal risk assessment and monitoring activities will be conducted based on established risk which will include the results of the risk assessment as well as other information.

Arkansas IDEA Data & Research: The Arkansas IDEA Data & Research Office provides quality data management, analysis, technical assistance, and research for the enhancement of the Arkansas Department of Education's general supervision mandate. In addition, the Office strives to promote IDEA research among faculty and students of UALR for a greater understanding of policy, procedures, and practices across the state. Working in conjunction with the Funding and Finance Section, the IDEA Data & Research Office ensures standardized data collection procedures for federal reporting, state and district level data analysis, and public dissemination of program effectiveness data including school district and early childhood program profiles, Significant Disproportionality-Coordinated Early Intervening Services Profiles, the State Performance Plan, and the Annual Performance Report.

The Arkansas IDEA Data & Research Office coordinates with multiple ADE Divisions on various projects by providing leadership and guidance in the areas of data collection and survey design as well as data related LEA personnel training. The

Office is also actively involved in the general supervision of LEAs through the identification and correction of noncompliance related to the statewide student management system (SMS). For example, the referral tracking sub-module in the special education module of the SMS is one area where noncompliance can be identified. The process for identification of noncompliance is outlined below.

Identification of Noncompliance: Prior to calculation of Indicators 11 and 12 for the APR in October/November /December, referral records that exceeded the 60 day evaluation timeline for which the LEA entered a code of “other” are closely examined to determine if they meet exclusionary criteria. If further clarification is necessary, LEA supervisors are contacted via phone or email. For compliance with State regulations this process also is applied to the 30 day eligibility determination timeline.

When an LEA fails to submit referral data and does not notify the ADE-SEU that it had zero referrals for the school year, the LEA receives a 0% rate for the related indicator(s). Further, any missing data which prohibits the calculation of a record (i.e. missing date) is considered a missed timeline since verification of timeliness cannot be made. This results in the elevation of the record to being “flagged” for noncompliance.

Verification of Services and Correction: The referral tracking data captures eligibility determination date, status as to placement in special education (y/n), and date of parental consent for placement, thus allowing verification of the entire referral process. If these data elements are missing, the IDEA Data & Research Office staff reviews the APSCN special education modules and/or the MySped Resource DDS Application to verify that students who had their evaluation timelines exceed 60 day were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.

How the Components Function as a General Supervision System

The IDEA requires that the primary focus of IDEA monitoring be on improving education results and functional outcomes for children with disabilities, and ensuring the State meets the IDEA program requirements; hence, the Monitoring/Program Effectiveness (MPE) section monitors LEAs for procedural compliance on regulatory issues and provides technical assistance to support their efforts toward improving results for students with disabilities and their families.

The MPE section personnel work collaboratively with other sections within the special education unit as well as across divisions within the ADE in carrying out the MPE section’s overall supervision of the provision of special education and related services. By working in conjunction with these sections, MPE Area Supervisors can identify monitoring and technical assistance needs, and assist administrators in developing and implementing staff in-service and personnel development training designed to meet the needs of individual programs, specific geographic areas throughout the state and, if needed, statewide activities. This can also impact the areas of training that receive emphasis in the higher education teacher preparation training programs.

The ADE-SEU general supervision instruments and procedures identify and correct IDEA noncompliance in a timely manner. The system of identifying and correcting noncompliance includes processes and procedures implemented by the ADE-SEU Dispute Resolution Section (DRS) in the coordination of due process hearings, complaint investigations, and

the use of pre-filing mediation services. While hearing officers conduct due process hearings, ADE-SEU Area Supervisors in the MPE and the Non-Traditional Programs (NTP) sections typically investigate complaints. The DRS coordinates and provides general supervision for all three dispute resolution systems to ensure disputes are resolved in accordance with federal and state regulations. The Administrator of the DRS works closely with the administrator and staff of the MPE section to ensure prompt resolution of complaints filed with the DRS.

Working in conjunction with the Funding and Finance section, the IDEA Data & Research Office ensures standardized data collection procedures for federal reporting, state and district level data analysis, and public dissemination of program effectiveness data including school district and early childhood program profiles, Significant Disproportionality-Coordinated Early Intervening Services Profiles, the State Performance Plan, and the Annual Performance Report.

The finance section works with data management and other special education consultants who verify services and results of programs for students with disabilities ensuring they are correlated to the expenditure requirements. The entire budget process requires that each district submit written assurances along with their annual application and budget application.

Correction of Noncompliance and Improved Performance

When an LEA/ESC or other public agency is determined to have a finding of noncompliance, a compliance action plan (CAP) is written to address the deficiency with specified timelines for correction and submission of evidence for review. In the monitoring system, the ADE-SEU may impose needed corrective strategies on a public agency, and require that specific documentation to be submitted to demonstrate implementation of corrective actions.

Individual LEAs may be required to conduct a self-review of policies, procedures and practices, to address identified deficiencies, with the corresponding timelines for review to gauge the effectiveness of their implementation of corrective actions. ADE-SEU staff monitoring the public agency's effectiveness will require revisions to the plan if the efforts appear to be ineffective.. Prior to determining that the public agency has substantially corrected the noncompliance, additional on-site follow up and/or review of more recent data will occur to verify correction of noncompliance.

Public agencies must submit written assurance and/or evidence that the deficiencies within a CAP have been corrected as directed. When written assurance is provided, evidence that documents the public agency's progress in correcting the noted deficiencies must be available at the public agency for review by the ADE-SEU staff. Upon the receipt of all requested evidence cited in a CAP or CAPs and verification by the ADE-SEU staff of full correction, the ADE-SEU will notify the public agency of its compliance status.

Correction of noncompliance in a timely manner is determined after a review of documentation submitted by the public agency along with other monitoring activities. DRS staff reviews the evidence provided by public agencies to demonstrate compliance with corrective actions as required in a hearing decision or complaint investigation report. If the evidence submitted is insufficient to meet the required corrective action, the DRS staff works with the public agency to achieve

compliance. If necessary, the ADE-SEU may send one or more staff on-site to verify that a public agency is complying with the corrective action(s). A public agency under a corrective action directive from a hearing decision or complaint investigation report is required to provide periodic updates to DRS staff addressing the status of compliance with corrective actions until noncompliance is corrected.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

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.

Arkansas's Technical Assistance System

The state provides professional development and technical assistance to LEAs around compliance and performance indicators through a variety of mechanisms based on established needs. The MPE section provides technical assistance (TA) specific to compliance and program improvement based on monitoring findings, desk audits, APR Determinations, Indicator Data, referrals from the ADE School Improvement Unit, and other information. Various consultant groups provide technical assistance around student specific issues and program improvement in an effort to build capacity within the LEA.

An online referral system, Central Intake and Referral/Consultant Unified Intervention Team (CIRCUIT), is used to meet technical assistance requests around specific needs, and consultants are assigned based on the referral. A central entity receives referrals and the case is assigned to a consultant. Evidence-based practices based on current literature review are used in the provision of technical assistance, and each TA provider participates in ongoing approved professional development to improve skills and knowledge-base. Memorandums of Understanding (MOUs) outline required skills and functions of each consultant group.

Technical Assistance activities are logged in monthly activity report and reviewed by the administrative team in the special education unit. Special Education Consultant Teams that are deployed through CIRCUIT are inclusive of the following:

- Arkansas Transition Services: Arkansas Transition Services serves all 75 counties in Arkansas in an effort to improve transition outcomes for students with disabilities. Their mission is to effectively assist students with disabilities, educators, parents, agency personnel and community members in preparing students to transition from school to adult life and reach positive post-school outcomes. They provide technical assistance, trainings and consultations to special education teachers and other relevant staff, as well as to various agency personnel. Services are provided at no cost.
- Arkansas Behavior Support Services: The behavior support consultants provide: individual student assistance, including assistance with behavior plan development and programming; and assistance with classroom/building/district level program development to meet the social/behavioral needs of students with disabilities.
- Technology and Curriculum Access Center: The Technology and Curriculum Access Center (TCC), located within Easter Seals Arkansas, provides assistive technology assessments, consultation, equipment loans, and in-service training to meet the needs of children and young adults with disabilities. TCC provides support for appropriate accommodations and modifications and assists districts and state agencies with required large-scale assessment such as the alternative assessment for Students with Disabilities.

- **Education Services for the Visually Impaired (ESVI):** ESVI consultants provide: recommendations for adaptations and modifications to enhance the student's opportunities for learning; assessment, instruction, and consultation in the use of recommended low vision devices, adaptive mobility devices and canes; recommendations for large print or Braille books; recommendations for assistive equipment and materials; and assistance as needed with required Functional Vision Assessments and Learning Media Assessments.
- **Traumatic Brain Injury (TBI) Services:** TBI Services include: consulting with school districts on intervention strategies that assist schools in managing student behavior; enhancing academic achievement of low performing students; assessment and identification of students potentially in need of special education services; and providing staff development to school faculty and administrators regarding TBI.
- **Children and Youth with Sensory Impairments (CAYSI):** CAYSI is a federally funded program serving individuals from birth to age 21 who are deaf/blind or who are at risk for deaf/blind. CAYSI consultants provide training, technical assistance and information to families, educators and others who work with these individuals. CAYSI supports the philosophy of inclusion of the individual with deaf/blindness in educational, vocational, recreational and community environments.
- **Easter Seals Outreach (ESO):** ESO consultants provide assessments and recommend services for children with disabilities ages 3-21. Services include: evaluations for ASD identification and augmentative/alternative communication; psycho-educational assessments; student centered planning and addressing specific needs of individual students or an entire classroom.
- **Educational Audiology Resources for Schools (EARS):** EARS services include: managing hearing screening programs to assist with amplification and other classroom technical assistance; and recommendations for accommodations/modifications for students with auditory processing disorders, cochlear implants, etc. A full range of evaluation services are available including audiological assessments, counseling/guidance for parents and hearing conservation education. Speech pathology services include specialized assessments (with a written report), classroom observations, assistance with writing appropriate goals, as well as modeling therapy with individual students.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

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 students with disabilities.

Arkansas's Professional Development System

The state provides professional development and technical assistance to LEAs around compliance and performance indicators through a variety of mechanisms based on established needs. The MPE section provides technical assistance (TA) specific to compliance and program improvement based on monitoring findings, desk audits, APR Determinations, Indicator Data, referrals from the ADE School Improvement Unit, and other information. Various consultant groups provide technical assistance around student specific issues and program improvement in an effort to build capacity within the LEA.

The consultant groups assist in meeting the challenges of providing 21st century special education services. Arkansas's professional development mission is to promote sound research-based district, building and classroom educational practices to achieve the educational results required by the Individuals with Disabilities Education Act (IDEA) and the Arkansas Department of Education. Consultants respond to statewide needs as well as those of individual school districts. The statewide professional development system is designed to build the capacity of local special education personnel and, to the extent appropriate, that of general educational professionals, as well. The state's professional development system is focused on increasing online and blended learning opportunities to ensure professional development meets the needs of all educators. Special Education professional development teams are inclusive of the following:

- **Arkansas Transition Services:** Arkansas Transition Services serves all 75 counties in Arkansas in an effort to improve transition outcomes for students with disabilities. Their mission is to effectively assist students with disabilities, educators, parents, agency personnel and community members in preparing students to transition from school to adult life and reach positive post-school outcomes. They provide technical assistance, trainings and consultations to special education teachers and other relevant staff, as well as to various agency personnel. Services are provided at no cost.
- **The Arkansas State Personnel Development Grant (SPDG):** The Arkansas SPDG maintains a collaborative relationship with the broader ADE. The SPDG staff is involved in numerous ADE initiatives including the ESEA Flexibility. SPDG staff also works with the ADE Curriculum and Instruction Unit to develop resources to support districts in the implementation of evidence-based literacy and math interventions and Positive Behavioral Interventions and Supports for all students, including students with disabilities.
- **Arkansas Behavior Support Services:** The behavior support consultants provide: individual student assistance, including assistance with behavior plan development and

programming; and assistance with classroom/building/district level program development to meet the social/behavioral needs of students with disabilities.

- **Technology and Curriculum Access Center:** The Technology and Curriculum Access Center (TCC), located within Easter Seals Arkansas, provides assistive technology assessments, consultation, equipment loans, and in-service training to meet the needs of children and young adults with disabilities. TCC provides support for appropriate accommodations and modifications and assists districts and state agencies with required large-scale assessment such as the alternative assessment for Students with Disabilities.
- **Co-Teaching Project:** The Arkansas Co-Teaching Project provides support to schools interested in implementing a new co-teaching program or improving an existing one. Support is provided through blended online and face-to-face comprehensive training, technical assistance, and informational resources.
- **IDEA Data and Research Office:** The IDEA Data & Research Office provides quality data management, analysis, technical assistance, and research for the enhancement of the Arkansas Department of Education's general supervision of local education agencies' special education programs by ensuring accurate, valid, and timely data to meet all state and federal reporting.
- **Interagency Collaborations:** The ADE-SEU continues to be involved in interagency collaborations to enhance the provision of special education services for children with disabilities.
- **Curriculum and Assessment:** The ADE-SEU works closely with the Student Assessment Unit and the Curriculum and Instruction Unit to ensure all students have access to and progress in the general education curriculum with meaningful participation in statewide assessments.
- **Education Services for the Visually Impaired (ESVI):** ESVI consultants provide: recommendations for adaptations and modifications to enhance the student's opportunities for learning; assessment, instruction, and consultation in the use of recommended low vision devices, adaptive mobility devices and canes; recommendations for large print or Braille books; recommendations for assistive equipment and materials; and assistance as needed with required Functional Vision Assessments and Learning Media Assessments.
- **Traumatic Brain Injury (TBI) Services:** TBI Services include: consulting with school districts on intervention strategies that assist schools in managing student behavior; enhancing academic achievement of low performing students; assessment and identification of students potentially in need of special education services; and providing staff development to school faculty and administrators regarding TBI.
- **Speech-Language Pathology Services:** Speech-Language services include: consultation and technical assistance to individuals and districts on a variety of communication, regulatory, and service delivery issues; professional education information in the form of training, self-study materials, and announcements; and a resource and equipment loan program which includes professional texts, assessment tools, self-study materials, and auditory trainers.
- **Medicaid in the Schools (MITS):** Medicaid in the Schools services include training, technical assistance, support for electronic billing, program management, policy and program development, initiation/development of new revenue streams, and collection/management/and analysis of data.
- **Children and Youth with Sensory Impairments (CAYSI):** CAYSI is a federally funded program serving individuals from birth to age 21 who are deaf/blind or who are at risk for deaf/blind. CAYSI consultants provide training, technical assistance, and information to families, educators, and others who work with these individuals. CAYSI supports the philosophy of inclusion of the individual with deaf/blindness in educational, vocational, recreational and community environments.
- **Easter Seals Outreach (ESO):** ESO consultants provide assessments and recommend services for children with disabilities ages 3-21. Services include: evaluations for ASD identification and augmentative/alternative communication; psycho-educational assessments; student centered planning and addressing specific needs of individual students or an entire classroom.
- **Educational Audiology Resources for Schools (EARS):** EARS services include: managing hearing screening programs to assist with amplification and other classroom technical assistance; and recommendations for accommodations/modifications for students with auditory processing disorders, cochlear implants, etc. A full range of evaluation services are available including audiological assessments, counseling/guidance for parents and hearing conservation education. Speech pathology services include specialized assessments (with a written report), classroom observations, assistance with writing appropriate goals, as well as modeling therapy with individual students.
- **Dispute Resolution Section:** The DRS encourages the use of mediation and other collaborative strategies to resolve disagreements between parents and educators around the provision of special education services. This section provides ongoing technical assistance to LEAs on due process rules and regulations, mediations, complaints and hearings.
- **UALR School of Law Mediation Project:** Trained professional mediators assist parties in finding effective solutions to the problems affecting educational services for children with disabilities. Mediators can facilitate IEP Meetings to guide the process of the meeting and assist members of the IEP team in communicating effectively to develop an acceptable IEP.
- **Speech/Language Pathology Aides/Assistants:** LEAs may seek approval for a program to use Speech-Language Pathology Support Personnel (assistants and aides) who can perform tasks as prescribed, directed and supervised by master's level speech-language pathologist. The LEAs submit written proposals developed collaboratively by the supervising speech-language pathologist and the administrator(s) who will be most directly involved with the program. The LEAs may design a service delivery model which best meets the needs of students and professionals involved.
- **Arkansas Promise Grant:** Arkansas PROMISE is a research project open to youth ages 14 to 16 who currently receive SSI benefits. For 1000 youth, PROMISE will provide additional services to youth and their families to support their education and career goals. Services include: Intensive case management, two paid competitive work experiences, education and employment training and support for youth and families, benefits counseling, health and wellness training, and money to address emergency financial needs.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Stakeholder Involvement: apply this to all Part B results indicators

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

Stakeholder Involvement:

The initial development of the Arkansas State Performance Plan (SPP) and Annual Performance Report (APR) began in May 2005 with the appointment of a 40-member stakeholder group. This group consisted of consumers, parents, school officials, legislators, and other interested parties. Initial orientations to the SPP/APR were provided to the stakeholders group as well as to the State Advisory Council in June 2005.

A half-day working session was conducted for members of the stakeholder group and the State Advisory Council. After a brief orientation, members were assigned to one of three task groups focusing on the establishment of measurable and rigorous targets, strategies for improving performance, and steps necessary for obtaining broad-based public input. The recommendations and considerations generated by these task groups laid the foundation for the development of the Arkansas SPP/APR.

After additional work to develop the content of the SPP around the indicators, the SPP/APR was presented to the State Advisory Council for its comments and modifications. These

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

changes were incorporated and presented to the 40-member stakeholder group in a series of conference calls.

Further changes suggested by the stakeholder group were made in November 2005 while additional data and targets were assembled. The SPP was posted on the ADE-SEU website as a series of program area "mini-volumes" in mid-November 2005. Comments were solicited from the public on the SPP topics of FAPE in the LRE, pre- and post-school outcomes, child find, and special education overrepresentation.

Stakeholders along with the State Advisory Council are informed of upcoming changes to the SPP/APR including the SSIP, quarterly as part of the State Advisory Council meeting. This gives stakeholders the opportunity to provide input and feedback on a regular basis. Stakeholders also have opportunities to provide input and feedback during other meetings such as the LEA Academy held each fall and the Special Education Data Summit.

Each January the newest version of the SPP/APR which includes SSIP updates is presented to the State Advisory Council prior to its submission to the US Department of Education. The feedback provided is incorporated into the SPP/APR for current and subsequent submissions.

Attachments

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

Reporting to the Public:

How and where the State reported to the public on the FFY 2013 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 2013 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, including any revision if the State has revised the SPP that it submitted with its FFY 2013 APR in 2015, is available.

Following the submission of the Arkansas APR each year, the Arkansas Department of Education, Special Education Unit (ADE-SEU) post the report to the ADE-SEU website <https://arksped.k12.ar.us/DataAndResearch/PublicReporting.html>. The website is the primary vehicle for the annual dissemination of the SPP/APR.

The ADE reports annually to the public on each Local Education Agency's (LEA) performance against the SPP targets using the ADE-SEU website <https://arksped.k12.ar.us/DataAndResearch/PublicReporting.html> within 120 days of submitting the SPP/APR. LEAs are provided the opportunity to review their report for one week prior to making it public. This allows the LEAs to ask the ADE any questions regarding the data used in their report.

Attachments

File Name	Uploaded By	Uploaded Date	Remove
ar_clarification_technical_assistance.pdf	Jody Fields		<input type="button" value="R"/> e m o v e

Actions required in FFY 2013 response

None

OSEP Response

The State's determinations for both 2014 and 2015 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 30, 2015 determination letter informed the State that it must report with its FFY 2014 SPP/APR submission, due February 1, 2016, 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.

Required Actions

The State's IDEA Part B determination for both 2015 and 2016 is Needs Assistance.

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

In the State's 2016 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 2015 SPP/APR submission, due February 1, 2017, 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

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs graduating from high school with a regular diploma. (20 U.S.C. 1416 (a)(3)(A))

Historical Data

Baseline Data: 2011

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			88.00%	89.00%	77.00%	77.00%	85.00%	85.00%	85.00%	85.00%
Data		87.49%	94.15%	90.18%	81.42%	81.42%	75.76%	75.31%	79.15%	80.44%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	85.00%	85.00%	85.00%	85.00%	85.00%

Key:

Targets: Description of Stakeholder Input

Arkansas' target for Indicator 1: Graduation is the same target set under Title I of the ESEA. The SPP/APR stakeholders including the state advisory council were informed of the statewide target and how the four-year graduation cohort is calculated and that special education is a subset of the greater graduation rate calculation. The discussion also focused on how students who stay past four-years effect the graduation and dropout rates.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	12/2/2015	Number of youth with IEPs graduating with a regular diploma	2,545	
SY 2013-14 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	12/2/2015	Number of youth with IEPs eligible to graduate	3,061	null
SY 2013-14 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec C150; Data group 695)	12/2/2015	2012-13 Regulatory four-year adjusted-cohort graduation rate table	83.14%	Calculate <input type="checkbox"/>

FFY 2014 SPP/APR Data

Number of youth with IEPs in the current year's adjusted cohort graduating with a regular diploma	Number of youth with IEPs in the current year's adjusted cohort eligible to graduate	FFY 2013 Data	FFY 2014 Target	FFY 2014 Data
2,545	3,061	80.44%	85.00%	83.14%

Graduation Conditions Field

Provide the four-year graduation cohort rate. The four-year graduation rate follows a cohort, or a group of students, who begin as first-time 9th graders in a particular school year and who graduate with a regular high school diploma in four years or less. An extended-year graduation rate follows the same cohort of students for an additional year or years. The cohort is "adjusted" by adding any students transferring into the cohort and by subtracting any students who transfer out, emigrate to another country, or die during the years covered by the rate.

Under 34 C.F.R. §200.19(b)(1)(iv), a "regular high school diploma" means the standard high school diploma awarded to students in a State that is fully aligned with the State's academic content standards and does not include a GED credential, certificate of attendance, or any alternative award. The term "regular high school diploma" also includes a "higher diploma" that is awarded to students who complete requirements above and beyond what is required for a regular diploma.

Arkansas' graduation rate is outlined in Section 7.1 of the Consolidated State Application Accountability Workbook for State Grants under Title IX, Part C, Section 9302 of the Elementary and Secondary Education Act (Public Law 107-110). The Accountability workbook can be accessed on the Arkansas Department of Education's website at http://arkansased.org/programs/word/accountability_workbook_052311.docx.

Section 7.1 High School Graduation Rate

Definition of High School Graduation Rate

Consistent with guidance from the United States Department of Education staff in the Office of Elementary and Secondary Education, Arkansas will use the four-year adjusted cohort graduation rate to calculate graduation rate.

As defined in 34 C.F.R. §200.19(b)(1)(i)-(iv), the four-year adjusted cohort graduation rate is the number of students who graduate in four years with a regular high school diploma divided by the number of students who form the adjusted cohort for the graduating class. From the beginning of 9th grade, students who are entering that grade for the first time form a cohort that is subsequently "adjusted" by adding any students who transfer into the cohort later during the 9th grade and the next three years and subtracting any students who transfer out, emigrate to another country, or die during that same period.

[Subpopulations are established during the 9th grade year. If a student is identified as a student with a disability (SWD) he/she will remain in the subpopulation cohort even if he/she is dismissed from services.]

The following formula provides an example of the four-year graduation rate for the cohort entering 9th grade for the first time in the fall of the 2008-2009 school year and graduating by the end of the 2011-2012 school year.

Formula: Four-Year Graduation Rate

(Number of cohort members who earned a regular high school diploma by the end of the 2011- 2012 school year)

DIVIDED BY

(Number of first-time 9th graders in fall 2008 (starting cohort) plus students who transfer in, minus students who transfer out, emigrate, or die during school years 2008-2009, 2009-2010, 2010-2011, and 2011-2012)

High School Graduation Base Rate

Consistent with guidance from the United States Department of Education, staff in the Office of Elementary and Secondary Education and in accordance with 34 C.F.R. § 200.19(b) (1)(i)-(iv), Arkansas has been working on the following steps in order to comply with NCLB regulations in connection with high school graduation rate. Ninth grade students who are in attendance on October 1st constitute the base rate for computing the graduation rate.

Overview of Issue/Description of System or Process

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Beginning with the 2008-09 graduating class, a minimum of twenty-two (22) units shall be earned by a student in order to graduate from an Arkansas public high school. Specifically for the graduating class of 2008-2009, the minimum required units are as follows:

CORE - Sixteen (16) units

English - four (4) units

Oral Communications - one half ($\frac{1}{2}$) unit

Social Studies - three (3) units [one (1) unit of World History, one (1) unit of U. S. History, one half ($\frac{1}{2}$) unit of Civics or Government]

Mathematics - four (4) units [one (1) unit of Algebra or its equivalent and one (1) unit of Geometry or its equivalent. All math units must build on the base of algebra and geometry knowledge and skills]

Comparable concurrent credit college courses may be substituted where applicable.

Science - three (3) units [at least one (1) unit of Biology or its equivalent and one (1) unit of a Physical Science]

Physical Education - one half ($\frac{1}{2}$) unit

Health and Safety - one half ($\frac{1}{2}$) unit

Fine Arts - one half ($\frac{1}{2}$) unit

CAREER FOCUS - Six (6) units

All units in the career focus requirement will be established through guidance and counseling at the local school district based on the student's contemplated work aspirations. Career Focus courses will conform to local district policy and reflect state frameworks through course sequencing and career course concentrations where appropriate.

Specifically, for the graduating classes of 2009-2010, 2010-2011, 2011-2012, 2012-2013, the required twenty-two (22) units, at a minimum, shall be taken from the "Smart Core" curriculum or from the "Core" curriculum. Only one (1) of the required units may be in a physical education course. All students will participate in the Smart Core curriculum unless the parent or guardian waives the student's right to participate. In such case of a waiver, the student will be required to participate in Core. The required twenty-two (22) units, at a minimum, are to be taken from the Smart Core or Core as follows:

SMART CORE - Sixteen (16) units

English - four (4) units - 9th, 10th, 11th, 12th

Mathematics - four (4) units [All students must take a mathematics course in grade 11 or grade 12 and complete Algebra II.] Comparable concurrent credit college courses may be substituted where applicable.

Algebra I or Algebra A & B (Grades 7-8 or 8-9)

Geometry or Investigating Geometry or Geometry A & B (Grades 8-9 or 9-10)

Algebra II

Fourth math unit range of options: (choice of: Transitions to College Math, Pre-Calculus, Calculus, Trigonometry, Statistics, Computer Math, Algebra III, or an Advanced Placement math)

Natural Science - three (3) units with lab experience chosen from Physical Science, Biology or Applied Biology/Chemistry, Chemistry, Physics or Principles of Technology I & II or PIC Physics

Social Studies - three (3) units

Civics or Civics/American Government

World History

American History

Oral Communications - one half ($\frac{1}{2}$) unit

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Physical Education - one half (½) unit

Physical Education - one half (½) unit

Health and Safety - one half (½) unit

CAREER FOCUS - Six (6) units

All units in the career focus requirement shall be established through guidance and counseling at the local school district based on the students' contemplated work aspirations. Career focus courses shall conform to local district policy and reflect state frameworks through course sequencing and career course concentrations where appropriate.

Local school districts may require additional units for graduation beyond the sixteen (16) Smart Core and the six (6) career focus units. These may be in academic and/or technical areas. All the Smart Core and career focus units must total at least twenty-two (22) units to graduate.

CORE - Sixteen (16) units

English - four (4) units

Oral Communications - one half (½) unit

Social Studies - three (3) units [one (1) unit of world history, one (1) unit of U. S. history, one half (½) unit of civics or government]

Mathematics - four (4) units [one (1) unit of algebra or its equivalent* and one (1) unit of geometry or its equivalent.* All math units must build on the base of algebra and geometry knowledge and skills.] Comparable concurrent credit college courses may be substituted where applicable.

Science - three (3) units [at least one (1) unit of biology or its equivalent and one (1) unit of a physical science]

Physical Education - one half (½) unit

Health and Safety - one half (½) unit

Fine Arts - one half (½) unit

*A two-year algebra equivalent or a two-year geometry equivalent may each be counted as two units of the four (4) unit requirement.

CAREER FOCUS - Six (6) units

All units in the career focus requirement shall be established through guidance and counseling at the local school district based on the students' contemplated work aspirations. Career focus courses shall conform to local district policy and reflect state frameworks through course sequencing and career course concentrations where appropriate.

Local school districts may require additional units for graduation beyond the sixteen (16) Core and the six (6) career focus units. These may be in academic and/or technical areas. All the Core and career focus units must total at least twenty-two (22) units to graduate.

A unit of credit shall be defined as the credit given for a course, which meets for a minimum of 120 clock hours. A minimum average six-hour day or minimum 30-hour week is required.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 2: Drop Out

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs dropping out of high school. (20 U.S.C. 1416 (a)(3)(A))

Historical Data

Baseline Data: 2008

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≤			2.83%	2.87%		4.25%	4.20%	4.20%	4.20%	2.77%
Data		2.59%	3.51%	3.37%	4.28%	3.66%	3.06%	2.92%	2.62%	1.97%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≤	2.62%	2.54%	2.29%	2.14%	1.98%

Key:

Targets: Description of Stakeholder Input

Arkansas' target for Indicator 2: Dropout rate is based on the NCES calculation reported as part of the Common Core of Data (CCD). The calculation is the subset of the single year event rate for students in grades 7-12. The SPP/APR stakeholders including the state advisory council were informed of the two measurement options and how changing the measurement would impact the dropout rate. The stakeholders agreed to keep the measurement as the subset of the greater statewide dropout rate. The discussion around target setting included the previous methodology of using a four-year moving average and whether the declining trend of recent years will continue. Based on the trend data from the past eight years targets were selected for 2013 and 2018, with the targets for years 2014-2017 representing an equitable growth rate needed to meet the 2018 target.

FFY 2014 SPP/APR Data

Number of youth with IEPs who exited special education due to dropping out	Total number of high school students with IEPs	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
453	22,368	1.97%	2.62%	2.03%

Use a different calculation methodology

- Change numerator description in data table
- Change denominator description in data table

Please explain the methodology used to calculate the numbers entered above.

Arkansas has chosen to maintain the previous calculation as optioned to states by OSEP. In accordance with Arkansas Code Annotated §6-15-503, the calculated school enrollment census (October 1 through September 30) total is used to determine the dropout rate for all students. Dropouts include students who leave prior to graduation including students who pursue taking the General Educational Development test leading to a General Equivalency Diploma (GED).

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

The single-year event data for this indicator is collected through the Arkansas Public School Computer Network (APSCN) student information system and submitted through the EDEN submission system (ESS) by the ADE Data Administration Office. Data Administration provides the numbers for this indicator to the Special Education Unit. The data reflects students enrolled in grades 7-12.

Beginning with the 2004-2005 school year, the following process is used to determine the number of dropouts.

- On or before October 1 of each school year, each district conducts a census of all students enrolled at each school to arrive at a school enrollment census total for each grade.
- The number of students transferring into each school after the October 1 census through September 30 of the following school year shall be added to the October 1 census total for each grade.
- The number of students transferring out of each school after the October 1 census through September 30 of the following school year is subtracted from the October 1 census total for each grade.
- The number of students incarcerated, deceased, or graduating early is subtracted from the October 1 census total for each grade.
- Each district maintains separate records regarding students who leave the public school system to be home schooled under Arkansas Code Annotated §6-15-503.
- Beginning with the 2004-2005 school year, the calculated school enrollment census total is used to determine the dropout rate for each school.
- For grades two through twelve (2-12), the school enrollment census total for each grade of the current school year is compared to the school enrollment census total for each of the previous grades of the previous school year.
- For grade one (1), the current school year school enrollment census total for grade one is compared to the school enrollment census total for the Kindergarten class of the previous year.

Examples of the calculation used to determine the dropout rate for grades 7 through 12 are as follows:

1. If the number of dropouts for grade seven was 0 and the October 1 enrollment was 51, the 7th grade dropout rate is $0/51 = .00$ or 0.00%.
2. If the number of dropouts for grade eight was 3 and the October 1 enrollment was 63, the 8th grade dropout rate is $3/63 = .0476$ or 4.76%.
3. If the number of dropouts for grade nine was 1 and the October 1 enrollment was 56, the 9th grade dropout rate is $1/56 = .0179$ or 1.79%.
4. If the number of dropouts for grade 10 was 2 and the October 1 enrollment was 60, the 10th grade dropout rate is $2/60 = .0333$ or 3.33%.
5. If the number of dropouts for grade 11 was 4 and the October 1 enrollment was 54, the 11th grade dropout rate is $4/54 = .0741$ or 7.41%.
6. If the number of dropouts for grade 12 was 3 and the October 1 enrollment was 57, the 12th grade dropout rate is $3/57 = .0526$ or 5.26%. Overall the rate would be $10/284 = .0352$ or 3.52%

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 3A: Districts Meeting AYP/AMO for Disability Subgroup

Monitoring Priority: FAPE in the LRE

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

- A. Percent of the districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP/AMO targets for the disability subgroup.
- B. Participation rate for children with IEPs.
- C. Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.

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

Historical Data

Baseline Data: 2008

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥					16.67%	16.95%	17.15%	17.15%	17.15%	17.16%
Data					16.67%	13.64%	6.25%	19.38%	34.25%	1.59%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	17.65%	18.14%	18.63%	19.12%	19.61%

Key:

Targets: Description of Stakeholder Input

Arkansas' targets for Indicator 3A: Assessment is based on ESEA state targets and trend analysis. During a State advisory council meeting in 2011-12 stakeholders were engaged in a discussion on how the change from AYP to AMO would affect the previously set targets. On going stakeholder discussions around this issue involved the flexibility gap reduction that is used to calculate AMO along with APR trend data from the past five years. The 2014-2018 AMO targets were established which represent an annual growth rate of ¼ of a standard deviation (0.49).

FFY 2014 SPP/APR Data

Does your State have an ESEA Flexibility Waiver of determining AYP?

Yes No

Are you reporting AYP or AMO?

AYP AMO

Number of districts in the State	Number of districts that met the minimum "n" size	Number of districts that meet the minimum "n" size AND met AMO	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
255	238	166	1.59%	17.65%	69.75%

Provide additional information about this indicator (optional)

Arkansas had 255 districts and charter schools participate in the statewide assessment in FFY2014. The Arkansas 2014-15 school year is a baseline year for the PARCC and NCSC tests. The AMO calculation is based on a single year of data and is not comparative to the previous years.

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Targets have not been adjusted based on the new assessment since the FFY 2015 school year will be a baseline year as well. Arkansas is no longer a PARCC state and will implementing ACT ASPIRE in FFY 2015 as its statewide assessment for literacy and mathematics. NCSC will remain as the alternate assessment for literacy and mathematics.

Actions required in FFY 2013 response

None

OSEP Response

Indicator 3A is not applicable for FFY 2014.

Required Actions

Indicator 3B: Participation for Students with IEPs

Monitoring Priority: FAPE in the LRE

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

- A. Percent of the districts with a disability subgroup that meets the State’s minimum “n” size that meet the State’s AYP/AMO targets for the disability subgroup.
- B. Participation rate for children with IEPs.
- C. Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.

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

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Reading	A Overall	2005	Target ≥		95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		96.56%	97.84%	98.62%	98.59%	99.12%	98.78%	98.81%	97.81%	97.72%
Math	A Overall	2005	Target ≥		95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
			Data		96.56%	97.81%	98.62%	98.02%	98.88%	98.61%	98.61%	97.69%	96.91%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

	FFY	2014	2015	2016	2017	2018
Reading	A ≥ Overall	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A ≥ Overall	95.00%	95.00%	95.00%	95.00%	95.00%

Key:

Explanation of Changes

Format of table was changed to overall and the previous years did not populate

Targets: Description of Stakeholder Input

Arkansas’ targets for Indicator 3B: Assessment is based on ESEA state targets. The State advisory council meetings participation trend analysis was discussed. The stakeholders were informed that the target of participation is set in the ESEA flexibility plan and does not change from year to year.

FFY 2014 SPP/APR Data: Reading Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A Overall	0	0	97.72%	95.00%	

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

FFY 2014 SPP/APR Data: Math Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A Overall	0	0	96.91%	95.00%	

Public Reporting Information

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

For a comparison of special education students to all students please visit the Arkansas Department of Education's Data Center (<https://adedata.arkansas.gov/>) and select Arkansas School Performance Report Card (<https://adesrc.arkansas.gov/>).

Additionally, assessment results for all students with disabilities at the state level as well as participation by school building and grade level will be available on the Special Education website under Data and Research in the public reporting section <https://arksped.k12.ar.us/DataAndResearch/PublicReporting.html>.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 3C: Proficiency for Students with IEPs

Monitoring Priority: FAPE in the LRE

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

- A. Percent of the districts with a disability subgroup that meets the State’s minimum “n” size that meet the State’s AYP/AMO targets for the disability subgroup.
- B. Participation rate for children with IEPs.
- C. Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.

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

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Reading	A Overall	2005	Target ≥		14.62%	13.17%	19.58%	25.99%	32.40%	38.81%	45.22%	45.22%	31.27%
			Data		14.62%	16.49%	19.95%	24.99%	27.20%	31.49%	63.06%	33.23%	32.26%
Math	A Overall	2005	Target ≥		14.62%	18.54%	25.06%	31.58%	38.10%	44.62%	51.14%	51.14%	40.13%
			Data		18.98%	24.81%	30.86%	38.29%	42.56%	44.86%	45.42%	42.09%	40.56%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

	FFY	2014	2015	2016	2017	2018
Reading	A ≥ Overall	30.29%	32.27%	34.23%	36.19%	38.15%
Math	A ≥ Overall	38.17%	37.19%	39.15%	41.11%	43.07%

Key:

Explanation of Changes

Format of table was changed to overall and the previous years did not populate

Targets: Description of Stakeholder Input

Arkansas’ targets for Indicator 3C: Assessment is based on an analysis of the ESEA state targets and trends. During State advisory council meetings stakeholders were provided the opportunity to discuss target setting which included a review of the trend data from the past eight years. Using the analysis of trend data and +/- one standard deviation (1.96), the proficiency targets are set to reflect the declining trend before rates begin to rebound.

Arkansas is changed assessments in FFY2014 (PARCC and NCSC) and new targets are not being established since the FFY2015 school year will also see a change in assessment administere. In FFY2015 arkansas is administering ACT ASPIRE as the regular assessment. NCSC will remain the alternate assessment. New targets will be established in the FFY2015 APR.

FFY 2014 SPP/APR Data: Reading Assessment

Group Name	Children with IEPs	Number of Children with IEPs	FFY 2013 Data*	FFY 2014	FFY 2014 Data
------------	--------------------	------------------------------	----------------	----------	---------------

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

	who received a valid score and a proficiency was assigned	Proficient		Target*	
A Overall	0	0	32.26%	30.29%	

FFY 2014 SPP/APR Data: Math Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A Overall	0	0	40.56%	38.17%	

Public Reporting Information

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

For a comparison of special education students to all students please visit the Arkansas Department of Education's Data Center (<https://adedata.arkansas.gov/>) and select Arkansas School Performance Report Card (<https://adesrc.arkansas.gov/>).

Additionally, assessment results for all students with disabilities at the state level as well as participation by school building and grade level will be available on the Special Education website under Data and Research in the public reporting section <https://arksped.k12.ar.us/DataAndResearch/PublicReporting.html>.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 4A: Suspension/Expulsion

Monitoring Priority: FAPE in the LRE

Results indicator: Rates of suspension and expulsion:

- A. Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and
- B. Percent of districts that have: (a) a significant discrepancy, 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 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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≤			7.59%	7.11%	7.11%		6.23%	6.23%	6.23%	5.77%
Data		9.06%	7.57%	11.76%	11.76%	7.86%	6.91%	10.26%	3.69%	4.65%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≤	5.43%	5.11%	4.78%	4.45%	4.12%

Key:

Targets: Description of Stakeholder Input

Arkansas' targets for Indicator 4: Discipline is based on trend analysis and compliance requirements. The indicator was discussed with stakeholders which includes the state's advisory council. For Indicator 4A, the discussion included a review of rates and targets from previous years noting that the number of LEAs identified each year fluctuates. After receiving stakeholder input it was determined to continue the declining target rate and to set the new targets at an annual reduction rate of 1/3 of 1 percent.

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts that have a significant discrepancy	Number of districts in the State	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
12	257	4.65%	5.43%	4.67%

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

State’s definition of “significant discrepancy” and methodology

An LEA with a comparative percentage point difference greater than 1.36 is identified as having a significant difference. Arkansas collects student discipline data at the building level for all students through the Arkansas Public School Computer Network (APSCN). Discipline data are submitted to APSCN during Cycle 7 (June) each year. Upon closing the cycle, the ADE-SEU receives two data pulls, an aggregate unduplicated count of general education students by race and ethnicity meeting the greater than 10 days out-of-school suspensions or expulsions and a student level file for children with disabilities which is aggregated into the 618 reporting. The two sets of data allow for the comparative analysis. Further, there is no minimum “n” for Indicator 4A.

The special education benchmark for suspension/expulsion (s/e) rate is the three-year difference between district rates for general education students as compared to children with disabilities greater than 10 days out-of-school suspension/expulsion. Districts are identified as having a significant difference if special education rates are more than 1.36 percentage points higher than the rate for general education students. The formula is presented below.

Formula: Suspension/expulsion rate for children with disabilities – Suspension/expulsion rate for general education students =

Difference between Special Education & General Education students.

Actions required in FFY 2013 response

None

FFY 2013 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2014 using 2013-2014 data)

Description of review

For each of the 12 LEAs that the State identified in 2013-14 as having a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, the State reviewed LEAs policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards via an LEA self-assessment. The State verified each LEAs self-assessment through desk audits and/or on-site visits to determine whether an LEA was in compliance with Part B requirements. The review of policies, procedures, and practices resulted in zero findings of noncompliance.

Each identified district conducted a self-assessment of policies, procedures, and practices which was submitted to the ADE-SEU Monitoring and Program Effectiveness (M/PE) section. The self-assessments were then reviewed for procedural safeguards related to discipline, functional behavior assessments, positive behavioral supports, and intervention planning as well as staff training. When necessary, districts were contacted for clarification and directed to resubmit.

The Disproportionality Self-Assessment is a combination of a state developed document and the National Center for Culturally Responsive Education Systems (NCCREST) document presented at the 2007 OSEP Leadership Conference. Districts identified as having a significant discrepancy are required to submit self-assessments. The Self-Assessment of District Policies, Procedures, and Practices is available on the special education website under Monitoring & Program Effectiveness on the Monitoring Procedure page or <https://arksped.k12.ar.us/Monitoring/Procedures.html>.

If a district fails to comply with any requests, the Associate Director of Special Education is notified for further action. Once the reviews are completed a letter is sent to the district superintendent and special education administrator of the district’s compliance.

- The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)
- The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b). If YES, select one of the following:
 - The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

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

- The State did NOT ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified in FFY 2013

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

OSEP Response

Required Actions

Indicator 4B: Suspension/Expulsion

Monitoring Priority: FAPE in the LRE

Compliance indicator: Rates of suspension and expulsion:

- A. Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and
- B. Percent of districts that have: (a) a significant discrepancy, 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 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))

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			0%	0%	0%	0%	0%	0%	0%	0%
Data						0%	0%	0%	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts that have a significant discrepancy, by race or ethnicity	Number of those districts that have policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements	Number of districts in the State	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
10	0	257	0%	0%	0%

All races and ethnicities were included in the review

State's definition of "significant discrepancy" and methodology

The measurement for 4B uses a percent difference calculation within the LEA. The calculation is the difference of a specific race for SWD with suspension/expulsion exceeding 10 days minus the percent of all general education students with suspension/expulsion exceeding 10 days within the LEA. The following criteria are applied after the percent difference is calculated:

- Special Education Child Count must have more than 40 students
- Special Education Child Count must have more than 10 students in a particular race/ethnicity

In 2013-14, there were 15 districts excluded for identification because the child count did not exceed 40 students. Three districts were excluded for a particular race/ethnicity because the child count did not exceed 10 students in a particular race/ethnicity.

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Any district identified as having a percentage point difference greater than 4 (special education suspension/expulsion rate for a specific race is more than four percentage points higher than general education suspension/expulsion rate), and that is not excluded by the criteria above, is required to submit a self-assessment for the review discipline policies, procedures, and practices.

Actions required in FFY 2013 response

None

FFY 2013 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2014 using 2013-2014 data)

Description of review

Each of the 10 LEAs which the State identified in 2013-14 as having a Significant Discrepancy by Race or Ethnicity, completed a self-assessment of policies, procedures, and practices related to discipline. The State reviewed LEAs' self-assessments relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. The State verified each LEA's self-assessment through desk audits and/or onsite visits to determine whether an LEA was in compliance with Part B requirements. The review of policies, procedures, and practices resulted in zero findings of noncompliance.

Each identified district conducted a self-assessment of policies, procedures, and practices which was submitted to the ADE-SEU Monitoring and Program Effectiveness (M/PE) section. The self-assessments were then reviewed for procedural safeguards related to discipline, functional behavior assessments, positive behavioral supports, and intervention planning as well as staff training. When necessary, districts were contacted for clarification and directed to resubmit.

The Disproportionality Self-Assessment is a combination of a state developed document and the National Center for Culturally Responsive Education Systems (NCCREST) document presented at the 2007 OSEP Leadership Conference. Districts identified as having a significant discrepancy are required to submit self-assessments. The Self-Assessment of District Policies, Procedures, and Practices is available on the special education website under Monitoring & Program Effectiveness on the Monitoring Procedure page or <https://arksped.k12.ar.us/Monitoring/Procedures.html>.

If a district fails to comply with any requests, the Associate Director of Special Education is notified for further action. Once the reviews are completed a letter is sent to the district superintendent and special education administrator of the district's compliance.

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

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.

Correction of Findings of Noncompliance Identified in FFY 2013

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

OSEP Response

Required Actions

Indicator 5: Education Environments (children 6-21)

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs 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))

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2005	Target ≥			48.91%	51.49%	54.29%	56.93%	59.77%	59.77%	59.77%	53.97%
		Data		48.33%	51.05%	51.80%	52.15%	53.10%	53.87%	53.26%	52.88%	52.90%
B	2005	Target ≤			12.52%	12.52%	12.52%	12.51%	12.51%	12.51%	12.51%	12.99%
		Data		12.11%	12.02%	12.65%	13.60%	12.49%	12.42%	12.52%	13.18%	13.39%
C	2005	Target ≤			2.58%	2.57%	2.57%	2.56%	2.56%	2.56%	2.56%	2.55%
		Data		2.60%	2.69%	2.76%	2.82%	2.82%	2.80%	2.70%	2.57%	2.37%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A ≥	55.93%	57.89%	59.85%	61.81%	63.77%
Target B ≤	13.62%	13.03%	12.64%	12.16%	12.00%
Target C ≤	2.53%	2.49%	2.46%	2.43%	2.40%

Key:

Targets: Description of Stakeholder Input

Arkansas’ targets for Indicator 5: Education Environments (children 6-21) are based on trend analysis which revealed a declining rate in the number of students in the regular class 80% or more of the day. The number of students inside the regular class less than 40% of the day as well as in separate schools, residential facilities, or homebound/hospital placements have remained fairly stable over the years. This information was shared with stakeholders and the state advisory council as part of the discussion for setting new targets. For Indicator 5A the target is set to increase by one standard deviation through 2018. The target for Indicator 5B is set to increase before declining. Targets for Indicator 5C are set to steadily decline.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	6/4/2015	Total number of children with IEPs aged 6 through 21	53,740	null

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	28,219	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	7,289	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	c1. Number of children with IEPs aged 6 through 21 in separate schools	511	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	c2. Number of children with IEPs aged 6 through 21 in residential facilities	465	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/2/2015	c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements	273	null

FFY 2014 SPP/APR Data

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	28,219	53,740	52.90%	55.93%	52.51%
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	7,289	53,740	13.39%	13.62%	13.56%
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	1,249	53,740	2.37%	2.53%	2.32%

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 6: Preschool Environments

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children aged 3 through 5 with IEPs 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.

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2011	Target ≥									31.50%	31.01%
		Data									31.00%	30.03%
B	2011	Target ≤									27.13%	29.80%
		Data									27.63%	28.82%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A ≥	31.99%	32.97%	33.95%	34.93%	35.94%
Target B ≤	30.78%	30.30%	29.83%	28.61%	26.65%

Key:

Targets: Description of Stakeholder Input

Arkansas' targets for Indicator 6: Preschool Environment is based on three years of data which revealed a declining rate in the number of children enrolled in a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program. Conversely, there is an increasing rate of children being served in separate special education classes, separate schools, or residential facilities. This information was shared and discussed with stakeholders and the new target for 6A was set with a growth rate of ½ of a standard deviation (0.98). The 6B target was set to decline by ¼ (0.49) of a standard deviation annually.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	Total number of children with IEPs aged 3 through 5	12,881	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	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	3,350	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	b1. Number of children attending separate special education class	207	null

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	b2. Number of children attending separate school	3,626	null
SY 2014-15 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/2/2015	b3. Number of children attending residential facility	16	null

FFY 2014 SPP/APR Data

	Number of children with IEPs aged 3 through 5 attending	Total number of children with IEPs aged 3 through 5	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	3,350	12,881	28.91%	31.99%	26.01%
B. Separate special education class, separate school or residential facility	3,849	12,881	28.57%	30.78%	29.88%

Please explain the methodology used to calculate the numbers entered above.

Explanation of A Slippage

In 2014-15, 26.01% of Arkansas' children with disabilities (CWD) aged 3-5 attended a regular preschool and received the majority of their special education and related services in the regular early childhood program. This is a slight slippage from the 2013-14 rate of 28.91%. While the reason for the slippage is unclear, it is important to note that the majority of the children aged 3-5 are enrolled in private preschools and day care centers which are not part of school districts. This creates a challenge in delivering services to children with disabilities in the regular early childhood program with their non-disabled peers.

At the LEA Academy in October, 2014, the 619 Coordinator presented on LRE in the preschool setting and the importance of inclusive settings relative to increasing child outcomes. Arkansas will continue to prioritize the essential partnerships with early childhood providers to increase the quality of special education services in the regular preschool setting.

Further, Arkansas is part of the Powerful Data for 619 Cross-State group. One area of focus is LRE and how to integrate special education services into the regular preschool settings. This is a challenge for Arkansas as the majority of children receiving special education are served under an itinerant model, meaning the special education providers travel to the child's location. Most children are not enrolled in a school district preschool program; they are in privately operated preschools and daycares as well as Head Start programs and the Arkansas Better Chance program (ABC is the state funded preschool program). Collaborative strategies continue to be developed between private early childhood programs and early childhood special education programs based in the 15 Educational Cooperatives (which operate the early childhood special education programs on behalf of districts) and 16 school districts (which operate their own early childhood special education programs).

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

--

Indicator 7: Preschool Outcomes

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))

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A1	2008	Target ≥						90.00%	90.50%	90.50%	90.50%	89.16%
		Data					89.56%	89.68%	89.61%	89.20%	90.17%	86.76%
A2	2008	Target ≥						69.00%	69.50%	69.50%	69.50%	66.32%
		Data					68.61%	66.74%	66.58%	68.25%	64.56%	63.18%
B1	2008	Target ≥						90.00%	90.50%	90.50%	90.50%	89.98%
		Data					89.64%	91.34%	90.31%	89.81%	90.80%	88.20%
B2	2008	Target ≥						60.00%	60.50%	60.50%	60.50%	57.17%
		Data					59.74%	57.67%	57.43%	57.68%	55.87%	54.65%
C1	2008	Target ≥						92.00%	92.50%	92.50%	92.50%	90.71%
		Data					91.68%	90.32%	90.82%	91.00%	91.40%	89.05%
C2	2008	Target ≥						78.00%	78.50%	78.50%	78.50%	75.95%
		Data					77.81%	76.23%	76.69%	78.03%	74.09%	72.87%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A1 ≥	89.64%	90.12%	90.60%	91.08%	91.56%
Target A2 ≥	66.80%	67.28%	67.76%	68.24%	68.72%
Target B1 ≥	90.46%	90.64%	91.42%	91.90%	92.38%
Target B2 ≥	56.21%	57.19%	58.17%	59.64%	61.11%
Target C1 ≥	89.73%	90.21%	91.17%	91.65%	92.13%
Target C2 ≥	74.97%	73.99%	75.46%	76.93%	78.40%

Key:

Targets: Description of Stakeholder Input

Arkansas' targets for Indicator 7: Preschool Outcomes is based a trend analysis which revealed the rates for all six sub-indicators remained consistent, within one or two percentage points of the baseline year. The results of the analysis were discussed with stakeholders and new targets were set using ¼ to ¾ of a standard deviation. Targets for A1, A2, and B1 were set using ± ¼ of a standard deviation while B2, C1, and C2 uses ± ½ to ¾ of a standard deviation.

FFY 2014 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed	5552.00
--	---------

Outcome A: Positive social-emotional skills (including social relationships)

	Number of Children
a. Preschool children who did not improve functioning	114.00
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	480.00
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1679.00
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1845.00
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1434.00

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. $(c+d)/(a+b+c+d)$	3524.00	4118.00	86.76%	89.64%	85.58%
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. $(d+e)/(a+b+c+d+e)$	3279.00	5552.00	63.18%	66.80%	59.06%

Explanation of A1 Slippage

There were 5,552 children with entry and exit assessment data. Of those that entered or exited the preschool program functioning below level of same-aged peers, 85.58% substantially increased their rate of growth by the time they turned 6 years of age or exited the program. This is a decrease from the FFY 2013 year of 86.76%, and falls short of the 89.64% target by 4.06 percentage points. Although the percentages represent slippage there is evidence of improvement with 30.00% (1,679/5,552) of children having improved functioning nearer to same-age peers. The percentage of children making personal gains but failing to improve functioning nearer to same-age peers increased to 8.00% from the 2012-13 rate of 7.07%.

As for a definitive reason for the slippage, it is difficult to determine. One reason for the possible slippage is early childhood program staff continue to become more proficient in accurately scoring the child's functional levels. Another possible reason is the decrease in the number of students receiving services in the regular preschool setting with their non-disabled peers. Arkansas's preschool environment data reveals that children in preschool settings tend to be pulled out for services instead of integrating into the regular preschool classroom. Arkansas will continue to prioritize the essential partnerships with early childhood providers around increasing quality special education services in the regular preschool setting.

Arkansas continues to provide training on measuring early childhood outcomes and using the child outcomes summary (COS) form. Improvement has been noted in this process during monitoring activities. At the LEA Academy in October, 2014, the 619 Coordinators presentation included early childhood outcomes and the use of the child outcomes summary form. The scoring process was also reviewed during monitoring activities. Additionally, Arkansas is one of the Powerful Data for 619 cohort members and multiple SMART outcomes related to the early childhood outcomes data and the COS process have been established. As part of the cohort, Arkansas will conduct an in-depth review of the COS process at the local level to guide technical assistance.

Explanation of A2 Slippage

Of the 5,552 children with entry and exit assessment data, 59.06% of children were functioning within age level by the time they turned six or exited the program. This represents slippage, a decrease of 4.12 percentage points. Arkansas missed the target of 66.80% by 7.74 percentage points. Although the percentages represent slippage there is evidence of improvement with 38.89% (2,159/5,552) of children having improved functioning nearer to same-age peers or made personal gains.

As for a definitive reason for the slippage, it is difficult to determine. One reason for the possible slippage is early childhood program staff continue to become more proficient in accurately scoring the child's functional levels. Another possible reason is the decrease in the number of students receiving services in the regular preschool setting with their non-disabled peers. Arkansas's preschool environment data reveals that children in preschool settings tend to be pulled out for services instead of integrating into the regular preschool classroom. Arkansas will continue to prioritize the essential partnerships with early childhood providers around increasing quality special education services in the regular preschool setting.

Arkansas continues to provide training on measuring early childhood outcomes and using the child outcomes summary (COS) form. Improvement has been noted in this process during monitoring activities. At the LEA Academy in October, 2014, the 619 Coordinators presentation included early childhood outcomes and the use of the child outcomes summary form. The scoring process was also reviewed during monitoring activities. Additionally, Arkansas is one of the Powerful Data for 619 cohort members and

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

multiple SMART outcomes related to the early childhood outcomes data and the COS process have been established. As part of the cohort, Arkansas will conduct an indepth review of the COS process at the local level to guide technical assistance.

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

	Number of Children
a. Preschool children who did not improve functioning	106.00
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	518.00
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2199.00
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2157.00
e. Preschool children who maintained functioning at a level comparable to same-aged peers	572.00

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
B1. Of those preschool children who entered or exited the preschool 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. $(c+d)/(a+b+c+d)$	4356.00	4980.00	88.20%	90.46%	87.47%
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. $(d+e)/(a+b+c+d+e)$	2729.00	5552.00	54.65%	56.21%	49.15%

Explanation of B2 Slippage

Of the 5,552 children with entry and exit assessment data, 49.15% of children were functioning within age level by the time they turned six or exited the program. This represents slippage, a decrease of 5.50 percentage points. Arkansas missed the target of 56.21% by 7.06 percentage points. Although the percentages represent slippage there is evidence of improvement with 48.94% (2,717/5,552) of children having improved functioning nearer to same-age peers or made personal gains.

As for a definitive reason for the slippage, it is difficult to determine. One reason for the possible slippage is early childhood program staff continue to become more proficient in accurately scoring the child's functional levels. Another possible reason is the decrease in the number of students receiving services in the regular preschool setting with their non-disabled peers. Arkansas's preschool environment data reveals that children in preschool settings tend to be pulled out for services instead of integrating into the regular preschool classroom. Arkansas will continue to prioritize the essential partnerships with early childhood providers around increasing quality special education services in the regular preschool setting.

Arkansas continues to provide training on measuring early childhood outcomes and using the child outcomes summary (COS) form. Improvement has been noted in this process during monitoring activities. At the LEA Academy in October, 2014, the 619 Coordinators presentation included early childhood outcomes and the use of the child outcomes summary form. The scoring process was also reviewed during monitoring activities. Additionally, Arkansas is one of the Powerful Data for 619 cohort members and multiple SMART outcomes related to the early childhood outcomes data and the COS process have been established. As part of the cohort, Arkansas will conduct an indepth review of the COS process at the local level to guide technical assistance.

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children
a. Preschool children who did not improve functioning	92.00
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	361.00
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1257.00
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2008.00
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1834.00

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
C1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome C, the percent who substantially increased	3265.00	3718.00	89.05%	89.73%	87.82%

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
their rate of growth by the time they turned 6 years of age or exited the program. (c+d)/(a+b+c+d)					
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. (d+e)/(a+b+c+d+e)	3842.00	5552.00	72.87%	74.97%	69.20%

Explanation of C1 Slippage

There were 5,552 children with entry and exit assessment data. Of those that entered or exited the preschool program functioning below level of same-aged peers, 87.82% substantially increased their rate of growth by the time they turned 6 years of age or exited the program. This is a decrease from the FFY 2013 year of 89.05%, and falls short of the 89.73% target by 1.91 percentage points. Although the percentages represent slippage there is evidence of improvement with 22.64% (1,257/5,552) of children having improved functioning nearer to same-age peers. The percentage of children making personal gains but failing to improve functioning nearer to same-age peers increased to 6.50% from 5.55% in 2013-14.

As for a definitive reason for the slippage, it is difficult to determine. One reason for the possible slippage is early childhood program staff continue to become more proficient in accurately scoring the child's functional levels. Another possible reason is the decrease in the number of students receiving services in the regular preschool setting with their non-disabled peers. Arkansas's preschool environment data reveals that children in preschool settings tend to be pulled out for services instead of integrating into the regular preschool classroom. Arkansas will continue to prioritize the essential partnerships with early childhood providers around increasing quality special education services in the regular preschool setting.

Arkansas continues to provide training on measuring early childhood outcomes and using the child outcomes summary (COS) form. Improvement has been noted in this process during monitoring activities. At the LEA Academy in October, 2014, the 619 Coordinators presentation included early childhood outcomes and the use of the child outcomes summary form. The scoring process was also reviewed during monitoring activities. Additionally, Arkansas is one of the Powerful Data for 619 cohort members and multiple SMART outcomes related to the early childhood outcomes data and the COS process have been established. As part of the cohort, Arkansas will conduct an in-depth review of the COS process at the local level to guide technical assistance.

Explanation of C2 Slippage

Of the 5,552 children with entry and exit assessment data, 69.20% of children were functioning within age level by the time they turned six or exited the program. This represents slippage, a decrease of 3.67 percentage points. Arkansas missed the target of 74.97% by 5.77 percentage points. Although the percentages represent slippage there is evidence of improvement with 29.14% (1,618/5,552) of children having improved functioning nearer to same-age peers or made personal gains.

As for a definitive reason for the slippage, it is difficult to determine. One reason for the possible slippage is early childhood program staff continue to become more proficient in accurately scoring the child's functional levels. Another possible reason is the decrease in the number of students receiving services in the regular preschool setting with their non-disabled peers. Arkansas's preschool environment data reveals that children in preschool settings tend to be pulled out for services instead of integrating into the regular preschool classroom. Arkansas will continue to prioritize the essential partnerships with early childhood providers around increasing quality special education services in the regular preschool setting.

Arkansas continues to provide training on measuring early childhood outcomes and using the child outcomes summary (COS) form. Improvement has been noted in this process during monitoring activities. At the LEA Academy in October, 2014, the 619 Coordinators presentation included early childhood outcomes and the use of the child outcomes summary form. The scoring process was also reviewed during monitoring activities. Additionally, Arkansas is one of the Powerful Data for 619 cohort members and multiple SMART outcomes related to the early childhood outcomes data and the COS process have been established. As part of the cohort, Arkansas will conduct an in-depth review of the COS process at the local level to guide technical assistance.

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)? Yes

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 8: Parent involvement

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))

Do you use a separate data collection methodology for preschool children? Yes

Will you be providing the data for preschool children separately? Yes

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Preschool	2005	Target ≥			84.00%	85.00%	86.00%	87.00%	88.00%	88.00%	88.00%	89.94%
		Data		82.92%	88.50%	87.60%	90.90%	84.90%	90.50%	92.71%	92.57%	90.02%
School Age	2005	Target ≥			93.00%	94.50%	94.50%	95.00%	96.00%	96.00%	96.00%	94.05%
		Data		95.35%	93.50%	94.40%	95.10%	93.60%	95.10%	95.18%	95.00%	93.57%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Preschool Target ≥	90.92%	91.90%	92.88%	93.86%	94.84%
School-age Target ≥	94.53%	95.01%	95.49%	95.97%	96.45%

Key:

Targets: Description of Stakeholder Input

Arkansas’ targets for Indicator 8: Family Involvement is based a trend analysis which revealed the rates for preschool have fluctuated between 1-3 percentage points over the past few years which is similar to the school age rates. This analysis was presented to stakeholders and keeping in line with setting other indicator targets, the early childhood targets were set to increase by ½ of a standard deviation while school age targets were set to increase by ¼ of a standard deviation.

FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
Preschool	3639.00	3954.00	90.02%	90.92%	92.03%
School-age	17690.00	18498.00	93.57%	94.53%	95.63%

Describe how the State has ensured that any response data are valid and reliable, including how the data represent the demographics of the State.

The number of responding parents/guardians **increased** in 2014-15 for early childhood and school age programs. Representativeness of the respondents shows some racial/ethnic groups and disabilities remain under-represented when compared to December 1, 2014 child count. Part of the under-representation is associated with race/ethnic group and/or disability category not being marked on the surveys by the respondents.

As evident in Table I-8.1, families of children with disabilities (CWD) ages 3-21, who responded to the survey, are not representative of the December 1 child count for 2014-15 by race/ethnicity. Using a +/- 3% as the criteria to identify over- or under-representativeness, families of CWD in early childhood programs are under-represented in the racial/ethnic group of black. Families of CWD in school age programs are significantly under-represented in Black and Hispanic. It should be noted that 17.33% of survey respondents failed to indicate their racial/ethnic group.

Table I-8.1 Percentage Point Difference in Racial/Ethnic Groups in December 2014 Child Count and 2014-15 Family Survey Respondents by Program Type

	Asian	Black	Hispanic	Native American/ Alaska Native	Native Hawaiian/ Pacific Islander	Two or More Races
Early Childhood	0.00%	-3.15%	-1.19%	0.20%	-0.15%	0.73%
School Age	-0.32%	-5.80%	-4.16	-0.24%	-0.27%	0.89%

All special education programs that had a “zero return” on the Family Survey for 2014-2015 were required to complete a Response Table to address Indicator 8, Parent Involvement. The Response Table is a tool to assist the LEA in determining if the issues related to a “zero response” on the Family Outcomes Survey were isolated or more systemic in nature and to identify any follow-up corrective action. The Monitoring/Program Effectiveness section provided technical assistance and support for the implementation of any identified corrective actions, and the district was responsible for assuring the completion of these actions.

Early Childhood

The 2014-15 representativeness by race and disability reflects a marked improvement; however, using the +/- 3% criteria, two racial/ethnic group are under-represented, Black and White. Both are under-represented in developmental delay. The relative difference of child count demographics to early childhood respondents shows improvement from the previous years. Even with improved representativeness and response rates there is a need for continual training on the preparation, collection, and submission of the family surveys. A breakdown of early childhood demographics for child count and survey respondents is presented in Exhibit I-8.2.

Exhibit I-8.2: Early Childhood Family Survey Representativeness

	Not Reported	Asian	Black	Hispanic	Native American/ Alaska Native	Native Hawaiian/ Pacific Islander	Two or More F
Not Reported	2.27%	0.03%	1.39%	0.61%	0.00%	0.00%	0.03%
Autism	0.05%	0.05%	0.44%	0.04%	0.06%	-0.01%	-0.03%
Deaf/Blind	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Hearing Impaired	0.00%	0.00%	-0.01%	-0.06%	-0.01%	0.00%	-0.01%
Multiple Disabilities	0.10%	0.02%	0.04%	0.15%	0.00%	-0.01%	-0.01%
Other Health Impairment	0.03%	0.00%	0.09%	0.13%	0.03%	0.00%	-0.01%
Orthopedic Impaired	0.00%	0.00%	0.01%	-0.01%	0.00%	0.00%	0.00%
Developmental Delay	1.82%	-0.06%	-5.05%	-2.33%	0.01%	-0.10%	-0.58%
Speech Impaired	0.86%	-0.03%	-0.04%	0.25%	0.12%	-0.02%	-0.12%
Traumatic Brain Injury	0.00%	0.00%	0.00%	0.03%	0.00%	0.00%	0.00%
Vision Impaired	0.00%	0.00%	-0.02%	-0.01%	0.00%	0.00%	0.00%
TOTAL*	5.12%	0.00%	-3.15%	-1.19%	0.20%	-0.15%	-0.73%

School Age

The 2014-15 representativeness by race and disability using the +/- 3% criteria, reveals no over- or under-representation by race and disability. However, students in the racial category of black and ethnic category of Hispanic are under-represented collectively. It should be noted that 12.21% of the survey respondents did not indicate the race and/or disability. Even with improved representativeness and response rates, there is a need for continual training on the preparation, collection, and submission of the family surveys. A breakdown of school age demographics for child count and survey respondents is presented in Exhibit I-8.3.

Exhibit I-8.3: School Age Family Survey Representativeness

	Not Reported	Asian	Black	Hispanic	Native American/ Alaska Native	Native Hawaiian/ Pacific Islander	Two or More
Not Reported	3.39%	0.04%	0.85%	0.43%	0.04%	0.00%	0.07%
Autism	0.57%	-0.05%	-0.18%	-0.26%	-0.02%	-0.02%	-0.04%
Deaf/Blind	0.01%	0.01%	0.00%	0.01%	0.00%	0.00%	0.00%
Emotional Disturbance	0.06%	0.00%	-0.05%	-0.05%	0.00%	0.00%	-0.03%
Hearing Impaired	0.05%	-0.02%	-0.07%	-0.07%	0.01%	-0.02%	0.00%
Multiple Disabilities	0.30%	-0.02%	-0.03%	-0.09%	0.00%	-0.01%	0.02%
Mental Retardation	0.98%	-0.02%	-0.46%	-0.41%	-0.03%	-0.04%	-0.08%
Other Health Impairment	1.71%	-0.02%	-1.65%	-0.51%	-0.05%	-0.01%	-0.15%
Orthopedic Impaired	0.02%	0.00%	-0.02%	0.00%	-0.01%	0.00%	-0.01%
Speech Impaired	1.97%	-0.17%	-2.54%	-1.91%	-0.09%	-0.07%	-0.42%
Specific Learning Disability	3.12%	-0.05%	-1.60%	-1.27%	-0.09%	-0.08%	-0.26%
Traumatic Brain Injury	0.02%	0.00%	-0.03%	-0.01%	0.00%	0.00%	0.00%
Vision Impaired	0.02%	-0.01%	-0.02%	-0.02%	0.00%	-0.01%	0.00%
TOTAL*	12.21%	-0.32%	-5.80%	-4.16%	-0.24%	-0.27%	-0.89%

The ADE has launched the My Child/My Student campaign to support better communication between schools and families. The goal of this campaign is to encourage on-going communication between parents and teachers. The campaign will give parents helpful information and tips they can use to discuss their child’s educational progress. Additionally, teachers will be provided questions, tips and resources they can use to converse with a student’s parent(s) or guardian(s). The data is not fully representative of Arkansas’ child count. Arkansas will continue to train LEAs on the preparation, collection, and submission of the family surveys. Each February the IDEA Data & Research Office, in its newsletter, reminds LEAs that they are required to (1) offer every child’s parent/guardian the opportunity to participate in the survey; and (2) submit the survey data to the ADE-SEU no later than July 15th. The newsletter provides strategies for improving response rates along with instructions on how to complete the surveys online via a secure website or by mailing all completed scan forms to the IDEA Data & Research Office for scanning.

In 2014-15, the ADE-SEU established a parent page on its website (<http://arksped.12.ar.us>). Information includes resources, tips and links to helpful websites for parents and teachers. The ADE-SEU will push out information relative to family survey’s through ADE’s social media and post information on the website.

In 2015-16, the ADE SEU instituted monthly technical assistance calls with LEAs and the family survey will be a topic in the Spring of 2016. Further, the ADE-SEU is in the process of reviewing required paperwork and is considering the addition of a distinct component to help ensure parental opportunity to participate in the family survey.

Was sampling used? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No

- Yes, the data accurately represent the demographics of the State
- No, the data does not accurately represent the demographics of the State

Actions required in FFY 2013 response

In the FFY 2014 APR, the State must report whether its FFY 2014 data are from a group representative of the population, and, if not, the actions the State is taking to address this issue.

Responses to actions required in FFY 2013 response

Arkansas will continue to train LEAs on the preparation, collection, and submission of the family surveys. Each February the IDEA Data & Research Office, in its newsletter, reminds LEAs that they are required to (1) offer every child's parent/guardian the opportunity to participate in the survey; and (2) submit the survey data to the ADE-SEU no later than July 15th. The newsletter provides strategies for improving response rates along with instructions on how to complete the surveys online via a secured website or by scan forms. Request for scan forms are made to the IDEA Data & Research Office. Completed forms are to be returned by July 15th annually for scanning. LEAs can keep unused forms for the next school year.

In 2014-15 school year, the ADE launched the My Child/My Student campaign to support better communication between schools and families. The goal of this campaign was to encourage on-going communication between parents and teachers. The campaign gives parents helpful information and tips they can use to discuss their child's educational progress. Additionally, teachers are provided questions, tips and resources they can use to converse with a student's parent(s) or guardian(s).

In 2014-15, the ADE-SEU established a parent page on its website (<http://arksped.12.ar.us>). Information includes resources, tips and links to helpful websites for parents and teachers. The ADE-SEU will push out information relative to family survey's through ADE's social media and post information on the website.

In 2015-16, the ADE SEU instituted monthly technical assistance calls with LEAs and the family survey will be a topic in the Spring of 2016. Further, the ADE-SEU is in the process of reviewing required paperwork and is considering the addition of a distinct component to help ensure parental opportunity to participate in the family survey.

OSEP Response

The State reported that the data for this indicator were collected from a response group that was not representative of the population. OSEP notes that the State included strategies or improvement activities to address this issue in the future.

Required Actions

Indicator 9: Disproportionate Representations

Monitoring Priority: Disproportionate Representations

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts with disproportionate representation of racial and ethnic groups in special education and related services	Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts in the State	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
0	0	257	0%	0%	0%

All races and ethnicities were included in the review

Define “disproportionate representation” and describe the method(s) used to calculate disproportionate representation

Identification –All Disabilities

In order to demonstrate educational equity, relative to opportunity, services, and decision-making, the racial composition of students receiving special education services in a school district should be proportionally similar to the composition of students in the district. Thus, it is important to ensure that racial/ethnic groups in a school district are not disproportionately represented in special education.

To identify disproportionate race/ethnic representation, Arkansas uses Westat's Risk Ratio application. However, the State also applies secondary criteria along with the risk ratio.

Over-Representation

A risk ratio methodology was used to determine if a district has disproportionate representation. District enrollment and special education child count data were examined and adjusted according to the following criteria.

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

1. Students receiving services in a private residential treatment program are removed from the special education child count numbers and the district October 1 enrollment numbers for the selected year. Students in private residential treatment facilities are excluded because the State rules governing private residential treatment facilities state that a student belongs to the district where the facility is located; therefore, enrollment of such students would artificially increase the district's special education child count and district wide enrollment.
2. After the October 1 enrollment and December 1 child count is adjusted for students in private residential treatment facilities, weighted risk ratios are generated. Both risk ratios and weighted risk ratios are examined and the lowest value is selected as the districts risk for identifying students of a particular race for special education.
3. Some risk ratios are considered invalid if (1) the district enrollment of a racial/ethnic group is less than 5% or more than 95% of the district's enrollment or (2) the number of students in the district's child count is equal or less than 40.

Once adjusted, Disproportionate Representation is defined as a district that has risk ratios greater than 4.00 for over-representation.

In 2014/15, 14 districts with an "N" size less than 40 were excluded from being identified for this indicator. Additionally, numerous districts were excluded using the 5% or 95% criteria for specific racial or ethnic categories. Zero districts were excluded from all categories based on the outlier criteria.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

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

OSEP Response

Required Actions

Indicator 10: Disproportionate Representations in Specific Disability Categories

Monitoring Priority: Disproportionate Representations

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%

FFY 2014 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts in the State	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
3	0	257	0%	0%	0%

All races and ethnicities were included in the review

Define “disproportionate representation” and describe the method(s) used to calculate disproportionate representation

To identify disproportionate racial and/or ethnic representation by disability category, Arkansas uses Westat's Weighted Risk Ratio application. However, the State has applied its own criteria in applying the weighted risk ratio.

Over-Representation in a Disability Category

There are six disability categories that must be examined under Indicator 10: Autism, Emotional Disturbance, Intellectual Disability, Other Health Impairments, Specific Learning Disabilities, and Speech Language Impairment. A risk ratio methodology was used to determine if a district had disproportionate representation within the six disabilities. However, the district enrollment and special education child count data were examined and adjusted according to the following criteria.

1. Students receiving services in a private residential treatment program are removed from the special education child count numbers and the district October 1 enrollment numbers for the selected year. Students in private residential treatment facilities are excluded because the State rules governing private residential treatment facilities state that a student belongs to the district where the facility is located; therefore,

enrollment of such students would artificially increase the district’s special education child count and district wide enrollment.

2. After the October 1 enrollment and December 1 child count are adjusted for students in private residential treatment facilities, risk ratios are generated for each of the six disability categories.
3. Further, risk ratios are considered invalid if (1) the district enrollment of a racial or ethnic group is less than 5% or (2) the number of students in a disability category is below 40.

Once adjusted with the above criteria, weighted risk ratios greater than 4.00 are considered an over-representation.

In 2013-14, 16 districts with an “N” size less than 40 were excluded from being identified for this indicator. Additionally, numerous districts were excluded using the 5% criteria for specific racial or ethnic categories. Zero districts were excluded from all categories.

Provide additional information about this indicator (optional)

Each of the 3 LEAs identified district conducted a self-assessment of policies, procedures, and practices which was submitted to the ADE-SEU Monitoring and Program Effectiveness (M/PE) section. The self-assessments were then reviewed for inappropriate policies, procedures and practices effecting disproportionality in the areas of referral, evaluation and eligibility. When necessary, districts were contacted for clarification and directed to submit additional evidence. The review of policies, procedures, and practices resulted in zero findings of noncompliance.

The Disproportionality Self-Assessment is a combination of a state developed document and the National Center for Culturally Responsive Education Systems (NCCREST) document presented at the 2007 OSEP Leadership Conference. Districts identified as having a significant discrepancy are required to submit self-assessments. The Self-Assessment of District Policies, Procedures, and Practices is available on the special education website under Monitoring & Program Effectiveness on the Monitoring Procedure page or <https://arksped.k12.ar.us/Monitoring/Procedures.html>.

If a district fails to comply with any requests, the Associate Director of Special Education is notified for further action. Once the reviews are completed a letter is sent to the district superintendent and special education administrator of the district’s compliance.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

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

OSEP Response

Required Actions

Indicator 11: Child Find

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		91.91%	98.93%	97.69%	98.50%	99.00%	99.41%	99.42%	99.60%	99.62%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
17,258	17,184	99.62%	100%	99.57%

Number of children included in (a), but not included in (b) [a-b]	74
---	----

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.

In 2014-15, there were 17,258 children with parental consent to evaluate who were evaluated. The number of children evaluated within the State's 60-day timeline was 17,184 or 99.57%, .05% less than the 2013-14 rate of 99.62%. Of the 17,184 children, 4,141 or 24.10% were determined not eligible, while 13,043 or 75.90% were determined eligible. There were 74 children whose evaluations exceeded the 60 day timeline, an increase from 65 children reported in 2013-14. A verification of the 21 LEAs which the 74 children represent revealed 49 (66.22%) were determined eligible and 25 (33.78%) were found not eligible. The number of days beyond the 60-day timeline varied from 1 to 118 days for students who were later found not eligible and 1 to 164 days for students found eligible. Reasons for exceeding the 60-day timeline includes team error and contractor availability.

A root cause analysis of this indicator continues to identify two key issues: (1) LEA team errors such as timeline calculations, and (2) availability of contracted evaluators. Arkansas regulations do not provide any exceptions for weekends, holidays, or school breaks including summer. State timelines are based on calendar days, not business days. Further analysis of this issue revealed timelines were often exceeded as a result of these non-school periods. In addition, Arkansas has many small districts which utilize contracted services. In discussions with LEAs, the ADE-SEU has recommended (1) a contractual statement which would address the contractor's responsibility related to timelines and repercussions when timelines are missed and (2) the exploration of using fewer contracted evaluators by partnering with other LEAs to hire staff jointly.

Additionally, on of December 21, 2015 using current year data (statewide data system), verification of the correction of noncompliance for the 21 LEAs yielded no recurring noncompliance.

Indicate the evaluation timeline used

- The State used the 60 day timeframe within which the evaluation must be conducted.
- The State established a timeline within which the evaluation must be conducted.

What is the State's timeline for initial evaluations?

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

- State monitoring
- State database that includes data for the entire reporting year

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

Data Collection: There are two different data collection systems for special education. First, there is the Arkansas Department of Education's student management system managed by the Arkansas Public School Computer Network (APSCN) which is utilized by the school districts, charter schools, and educational cooperatives. The second data system is Special Education's MySped Resource web-based application which is utilized by other state agencies offering educational services such as the Department of Human Services Division of Developmental Disabilities Services (DDS) and Arkansas Department of Corrections (ADC).

The end of year data collection is to be submitted to the state information system (SIS) by midnight June 15th. Districts with schools operating year round buildings have until June 30th to submit the year end data. The MySped Resource data collection applications do not close until July 15th since the programs using the MySped Resource applications are 12 month programs.

Preparation for data transfer from the SIS warehouse to special education includes the data and reporting office in ADE's Research and Technology Division forwarding the data files to the ADE Special Education Unit's technology manager by July 15th. Between July 15th and August 15th the special education database administrator prepares and loads the entire end of school year student level data (SIS and MySped Resource) into the special education data warehouse. The preparation includes ensuring all districts are represented in the data set and that no required fields (e.g. disability code) in the various data tables are blank, which would cause the upload to fail. The data sets include school age exits, discipline, early childhood exits, early childhood outcomes, early intervening services, and referral tracking. The IDEA Data & Research Office staff preliminary analysis of data errors is completed by August 31st and LEAs review and correct data errors between September 1st and September 30th.

Data Cleaning, Clarification, and Follow-up (September 1 through November 30): Each LEA can review data error reports via MySped Resource. The error reports are dynamic and contain student information. As errors are corrected the student is removed from the report. The IDEA Data & Research Office staff continue to run error checks throughout the cycle review period (September 1-30) to ensure LEAs are reviewing their data and making corrections prior to the September 30th deadline.

Once the cycle review period is complete, referral records are checked for missing data (i.e. dates or reason for exceeding timelines) related to timely evaluation (Indicator 11) and early childhood transition (Indicator 12) one final time. Any LEA found to still have missing data elements is contacted via phone to finalize the data. Failure to provide evidence of data error corrections (i.e. the missing data) by November 1st may result in a LEA being cited for Timely and Accurate Reporting.

The referral tracking data reviewed by the IDEA Data & Research Office staff begins October 1 and is checked for the following errors:

- Referral Date Exceeds FY
- Age of student is not within acceptable parameters (younger than 2 or older than 21)
- Inconsistent timeline: expected chronological order (referral->initial parental consent->evaluation->eligibility determined->parental consent to place) is not observed
- Process continued without initial parental consent
- 60 day consent to evaluation completion timeline exceeded with no reason recorded
- Evaluation was completed but no eligibility determination date was recorded
- 30 day evaluation to eligibility determination timeline exceeded with no reason recorded
- Indication of placement in special education without a date of parental consent to place recorded
- Indication of placement in special education without an evaluation completion date recorded
- Indication of placement in special education without an eligibility determination date recorded
- Record completed with a reason of "not eligible" with no eligibility determination date recorded
- Special education placement inconsistent (record indicates the student was not placed yet the completion reason is "SP" or record indicates student was placed yet the completion reason is "NE")

- Referral process incomplete

Identification of Non-compliance: Prior to calculation of Indicators 11 and 12 for the APR in October/November, referral records exceeding the 60 day evaluation timeline for which a code of “other” was recorded are closely examined to determine if they meet exclusionary criteria. If further clarification is necessary, LEA supervisors are contacted via phone or email. For compliance of State regulations this process is also applied to the 30 day eligibility determination timeline.

Further, failure of an LEA to submit referral data, without prior notification that they had zero referrals for the year, results in an automatic 0% LEA rate for the related indicator(s). Missing data which prohibits the calculation of a record is considered a missed timeline since verification of timeliness cannot be made. This results in the elevation of the record being “flagged” for noncompliance.

Verification of Services and Correction: The referral tracking data captures eligibility determination date, placement to special education (y/n) and parent consent to place date, thus allowing verification of the whole process. If these data elements are missing, the IDEA Data & Research Office staff reviews the APSCN special education modules and/or the MySped Resource DDS Application to verify that students who had their evaluation timelines exceed 60 day were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.

Verification of correction of noncompliance is further conducted by reviewing the referral tracking data for the current school year. Referrals already entered into the student management system are reviewed to determine if the LEA is currently in compliance. If correction of noncompliance cannot be verified, the records are elevated from a “flag” to a “red flag” and the information is sent to the Associate Director of Special Education for further action.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

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	13	0	0

FFY 2013 Findings of Noncompliance Verified as Corrected

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

The ADE-SEU verified that each of the 13 LEAs with findings in FFY 2013 is correctly implementing the specific regulatory requirements. The verification process included on-site monitoring and the review of the special education modules of the student management system. Through the student management system and on-site monitoring, late initial evaluations were verified to have been completed and an IEP implemented if the child was eligible, unless the child was no longer within the jurisdiction of the LEA.

One LEA was identified as having continuing non-compliance as a result of the review of the student management system prior to submitting the FFY 2013 APR. The non-compliance was based upon one student record and the information was escalated up to the Associate Director's office for further action. Upon notification of the continual non-compliance, the LEA reviewed the student's record in question and found that the wrong date was entered into the student management system and corrected the record. This was verified by the SEA and a finding of non-compliance was not issued.

Further review of the student management system examined current year referrals to verify if a systemic issue existed.

The State will continue to implement and refine verification protocols to ensure LEA compliance with the requirements in 34 CFR §300.301(c)(1), including correction of non-compliance.

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

The State has verified, by reviewing the special education modules of the student management system, that each of the 13 LEAs with findings in FFY 2013 is correctly implementing the specific regulatory requirements.

The State has verified through the student management system initial evaluations, although late, were completed and an IEP implemented if the child was eligible, unless the child was no longer within the jurisdiction of the LEA.

Further review of the student management system examined current year referrals to verify if a systemic issue existed. The records reviewed in November and December 2014

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

by the staff of the IDEA Data & Research Office via the student management system found no further noncompliance.

OSEP Response

Because the State reported less than 100% compliance for FFY 2014, the State must report on the status of correction of noncompliance identified in FFY 2014 for this indicator.

When reporting on the correction of noncompliance, the State must report, in the FFY 2015 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2014 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 2015 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 2014, although its FFY 2014 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2014.

Required Actions

Indicator 12: Early Childhood Transition

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		75.91%	97.58%	97.38%	99.27%	99.14%	99.21%	99.53%	99.15%	99.86%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	568
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	46
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	457
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.	55
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	4

	Numerator (c)	Denominator (a-b-d-e)	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
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. $[c/(a-b-d-e)] \times 100$	457	463	99.86%	100%	98.70%

Number of children who have been served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e	6
--	---

Explanation of Slippage

In 2014-15, 568 children being served in Part C were referred to Part B for eligibility determination. There were 562 children with eligibility determined by their third birthday:

- 46 children were determined not eligible, including 1 child for whom the parents and referral team decided not to test, and
- 457 children were found eligible.

Fifty five (46) children had delays in evaluation or initial consent due to parental refusals to provide consent. Although late, all 46 children had eligibility determined. The reasons for the delays included:

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

- 8 children's evaluations were delayed due to child/family illness making the child unavailable;
- 12 children transferred between programs during the transition process causing a delay in evaluations.
- 16 children had refusal of initial consent by parent.
- 10 children "Part C" failed to refer child for transition within timelines

Although Arkansas is substantially compliant with a rate of 98.70%, it saw a decrease from the 2013-14 rate of 99.77%; thus resulting in decrease of 1.07 percentage points. The delay of identification for six children was due to team error and contractor availability.

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

Six (6) Part C to B referrals did not have eligibility determined prior to the third birthday and were found eligible. The number of days beyond the third birthday ranged from 1 to 86 days.

A root cause analysis found eligibility determination delays were due to team error and contractor availability.

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

- State monitoring
- State database that includes data for the entire reporting year

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

Data Collection: There are two different data collection systems for special education. First, there is the Arkansas Department of Education's student management system managed by the Arkansas Public School Computer Network (APSCN) which is utilized by the school districts, charter schools, and educational cooperatives. The second data system is Special Education's MySped Resource web-based application which is utilized by other state agencies offering educational services such as the Department of Human Services Division of Developmental Disabilities Services (DDS) and Arkansas Department of Corrections (ADC).

The end of year data collection is to be submitted to the state information system (SIS) by midnight June 15th. Districts with schools operating year round buildings have until June 30th to submit the year end data. The MySped Resource data collection applications do not close until July 15th since the programs using the MySped Resource applications are 12 month programs.

Preparation for data transfer from the SIS warehouse to special education includes the data and reporting office in ADE's Research and Technology Division forwarding the data files to the ADE Special Education Unit's technology manager by July 15th. Between July 15th and August 15th the special education database administrator prepares and loads the entire end of school year student level data (SIS and MySped Resource) into the special education data warehouse. The preparation includes ensuring all districts are represented in the data set and that no required fields (e.g. disability code) in the various data tables are blank, which would cause the upload to fail. The data sets include school age exits, discipline, early childhood exits, early childhood outcomes, early intervening services, and referral tracking. The IDEA Data & Research Office staff preliminary analysis of data errors is completed by August 31st and LEAs review and correct data errors between September 1st and September 30th.

Data Cleaning, Clarification, and Follow-up (September 1 through November 30): Each LEA can review data error reports via MySped Resource. The error reports are dynamic and contain student information. As errors are corrected the student is removed from the report. The IDEA Data & Research Office staff continue to run error checks throughout the cycle review period (September 1-30) to ensure LEAs are reviewing their data and making corrections prior to the September 30th deadline.

Once the cycle review period is complete, referral records are checked for missing data (i.e. dates or reason for exceeding timelines) related to timely evaluation (Indicator 11) and early childhood transition (Indicator 12) one final time. Any LEA found to still have missing data elements is contacted via phone to finalize the data. Failure to provide evidence of data error corrections (i.e. the missing data) by November 1st may result in a LEA being cited for Timely and Accurate Reporting.

The referral tracking data reviewed by the IDEA Data & Research Office staff begins October 1 and is checked for the following errors:

- Referral Date Exceeds FY
- Age of student is not within acceptable parameters (younger than 2 or older than 21)
- Inconsistent timeline: expected chronological order (referral->initial parental consent->evaluation->eligibility determined->parental consent to place) is not observed
- Process continued without initial parental consent
- 60 day consent to evaluation completion timeline exceeded with no reason recorded
- Evaluation was completed but no eligibility determination date was recorded

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

- 30 day evaluation to eligibility determination timeline exceeded with no reason recorded
- Indication of placement in special education without a date of parental consent to place recorded
- Indication of placement in special education without an evaluation completion date recorded
- Indication of placement in special education without an eligibility determination date recorded
- Record completed with a reason of “not eligible” with no eligibility determination date recorded
- Special education placement inconsistent (record indicates the student was not placed yet the completion reason is “SP” or record indicates student was placed yet the completion reason is “NE”)
- Referral process incomplete

Specific to Indicator 12 records flagged as being a “Part C to Part B transition” or C to B concurrent record are further checked for:

- o Eligibility determination occurred after the child’s third birthday (exceeding timelines) and no reason was recorded

Identification of Non-compliance: Prior to calculation of Indicators 11 and 12 for the APR in October/November, referral records exceeding the 60 day evaluation timeline for which a code of “other” was recorded are closely examined to determine if they meet exclusionary criteria. If further clarification is necessary, LEA supervisors are contacted via phone or email. For compliance of State regulations this process is also applied to the 30 day eligibility determination timeline.

Further, failure of an LEA to submit referral data, without prior notification that they had zero referrals for the year, results in an automatic 0% LEA rate for the related indicator(s). Missing data which prohibits the calculation of a record is considered a missed timeline since verification of timeliness cannot be made. This results in the elevation of the record being “flagged” for noncompliance.

Verification of Services and Correction: The referral tracking data captures eligibility determination date, placement to special education (y/n) and parent consent to place date, thus allowing verification of the whole process. If these data elements are missing, the IDEA Data & Research Office staff reviews the APSCN special education modules and/or the MySped Resource DDS Application to verify that students who had their evaluation timelines exceed 60 day were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.

Verification of correction of noncompliance is further conducted by reviewing the referral tracking data for the current school year. Referrals already entered into the student management system are reviewed to determine if the LEA is currently in compliance. If correction of noncompliance cannot be verified, the records are elevated from a “flag” to a “red flag” and the information is sent to the Associate Director of Special Education for further action.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1	1	0	0

FFY 2013 Findings of Noncompliance Verified as Corrected

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

Through the student management system, children identified as not having eligibility determined by their 3rd birthday were verified to have (1) had eligibility determined; and (2) an IEP implemented if the child was eligible, unless the child was no longer within the jurisdiction of the LEA.

The ADE-SEU requested that the IDEA Data & Research Office verify the correction of noncompliance via the student management system. A review of subsequent data showed that subgrantees noncompliant in FFY 2013 corrected their noncompliance within one year and continued to be in compliance with the Part C to B requirements in FFY 2014. Additionally, through the student management system it was verified that the LEA developed and implemented the IEPs, although late, unless the child was no longer within the jurisdiction of the LEA.

Technical assistance was provided by M/PE section on the regulatory requirements to ensure the LEA and subgrantees are correctly implementing the specific regulatory requirements. Trainings continue to be held in conjunction with Part C to ensure all parties understand their responsibilities in implementing the requirements of 34 CFR

§300.124, including correction of noncompliance.

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

Through the student management system, children identified as not having eligibility determined by their 3rd birthday were verified to have (1) had eligibility determined; and (2) an IEP implemented if the child was eligible, unless the child was no longer within the jurisdiction of the LEA.

The ADE-SEU requested that the IDEA Data & Research Office verify the correction of noncompliance via the student management system. A review of subsequent data showed that subgrantees noncompliant in FFY 2013 corrected their noncompliance within one year and continued to be in compliance with the Part C to B requirements in FFY 2014. Additionally, through the student management system it was verified that the LEA developed and implemented the IEPs, although late, unless the child was no longer within the jurisdiction of the LEA.

Further review of the student management system examined subsequent year referrals to determine if a systemic issue existed. The records reviewed in November and December 2014 by the IDEA Data & Research Office found no further noncompliance.

Technical assistance continues to be provided by M/PE section on the regulatory requirements to ensure the LEA and subgrantees are correctly implementing the specific regulatory requirements. Trainings continue to be held in conjunction with Part C to ensure all parties understand their responsibilities in implementing the requirements of 34 CFR §300.124, including correction of noncompliance.

OSEP Response

Because the State reported less than 100% compliance for FFY 2014, the State must report on the status of correction of noncompliance identified in FFY 2014 for this indicator.

When reporting on the correction of noncompliance, the State must report, in the FFY 2015 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2014 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 2015 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 2014, although its FFY 2014 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2014.

Required Actions

Indicator 13: Secondary Transition

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 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))

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data						96.34%	96.19%	96.51%	89.07%	98.58%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
350	354	98.58%	100%	98.87%

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

- State monitoring
- 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.

As part of Arkansas' monitoring and general supervision system, the Monitoring/Program Effectiveness section has oversight of special education programs in the state’s public schools and co-ops. The M/PE Section, in conjunction with the ADE-SEU’s Non-Traditional Section, also oversees the implementation of special education programs in the State’s open-enrollment charter schools, State-operated and State-supported facilities and institutions, Juvenile Detention Facilities and DHS-Division of Youth Services (DYS) juvenile treatment centers, and private agencies and residential sites located throughout the state.

Beginning no later than the first IEP to be in effect when an Arkansas youth with an IEP is 16, appropriate measurable postsecondary goals based upon age appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills and the transition services (including courses of study) needed to assist the child in reaching these goals are developed.

The monitoring process includes a review of IEPs to ascertain a program’s status with regard to secondary transition plans. Arkansas utilizes the

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 13 checklist, developed by the National Secondary Transition Technical Assistance Center (NSTTAC), in its monitoring procedures to ensure the transition components are present in every students IEP aged 16-21. The data is collected via an electronic monitoring form completed by the SEA staff and/or LEA staff. If an IEP is found to be noncompliant and correction does not occur prior to issuing a letter of findings, the district is cited for non-compliance and must submit a corrective action plan (CAP) to the ADE-SEU.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1	1	0	0

FFY 2013 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 1 finding of noncompliance from FFY 2013 was corrected as soon as possible, but in no case later than one year from identification. A review of policy, procedures, and practices for each LEA with identified noncompliance was conducted to ensure that the specific regulatory requirements were being correctly implemented.

The ADE-SEU Monitoring/ Program Effectiveness Section (M/PE) verified the correction of noncompliance via desk audits of LEA submitted documentation and/or on-site visits to the LEAs in question. Documentation obtained from on-site monitoring visits and/or desk audits confirmed that all individual student files had been corrected in less than one year unless the student was no longer within the jurisdiction of the LEA. The M/PE staff verified the LEA was correctly implementing the regulatory requirements through the review of additional student records during on-site visits. Therefore, based on desk audits of documentation submitted by the LEA, and/or on-site visits to the LEAs it was determined that the 3 IEPs determined to be out of compliance had been corrected within the one year timeline and the review of updated data verified 100% compliance.

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

The State verified that the 3 student level findings of noncompliance from FFY 2013 were corrected as soon as possible but in no case later than one year from identification. A review of policy, procedures, and practices for each LEA with identified noncompliance was conducted to ensure that the specific regulatory requirements were being correctly implemented.

The ADE-SEU Monitoring/ Program Effectiveness Section (M/PE) verified the correction of noncompliance via desk audits of LEA submitted documentation and/or on-site visits to the LEAs in question. Documentation obtained from on-site monitoring visits and/or desk audits confirmed that all individual student files had been corrected in less than one year unless the student was no longer within the jurisdiction of the LEA. Based on desk audits of documentation submitted by the LEA, and/or on-site visits to the LEAs, it was determined that the 3 IEPs determined to be out of compliance had been corrected within the one year timeline and the review of updated data verified 100% compliance.

The State will continue to refine and implement the verification protocols to ensure LEA compliance with the requirements in 34 CFR §300.301(c)(1), including correction of noncompliance.

OSEP Response

Because the State reported less than 100% compliance for FFY 2014, the State must report on the status of correction of noncompliance identified in FFY 2014 for this indicator.

When reporting on the correction of noncompliance, the State must report, in the FFY 2015 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2014 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 2015 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 2014, although its FFY 2014 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2014.

Required Actions

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 14: Post-School Outcomes

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))

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2009	Target ≥							13.00%	13.00%	13.15%	13.35%
		Data						12.86%	14.54%	15.88%	18.42%	18.17%
B	2009	Target ≥							49.00%	49.00%	49.15%	49.04%
		Data						48.55%	49.52%	42.95%	43.88%	52.19%
C	2009	Target ≥							60.00%	60.00%	60.15%	59.36%
		Data						59.34%	61.05%	55.92%	58.13%	54.64%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A ≥	13.84%	14.33%	14.82%	15.31%	15.80%
Target B ≥	49.53%	50.02%	50.51%	51.00%	51.49%
Target C ≥	60.14%	60.92%	61.70%	62.48%	63.26%

Key:

Targets: Description of Stakeholder Input

Arkansas' targets for Indicator 14: Post-school Outcomes are based on a trend analysis which revealed minimal changes from year to year. The SPP/APR stakeholders including the state advisory council, were informed of the trend analysis and discussed collection methods, representativeness, and target setting. Noting the trend rates, the decision was made to establish a growth rate of ¼ of one standard deviation (0.49) for Indicators 14A and 14B. Indicator 14C, targets were selected for 2013 and 2018, creating an equitable annual growth rate of 0.78 percentage points across the SPP/APR years.

FFY 2014 SPP/APR Data

Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	211.00
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	52.00
2. Number of respondent youth who competitively employed within one year of leaving high school	57.00
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)	14.00
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).	10.00

	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 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A. Enrolled in higher education (1)	52.00	211.00	18.17%	13.84%	24.64%
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	109.00	211.00	52.19%	49.53%	51.66%
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)	133.00	211.00	54.64%	60.14%	63.03%

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

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

Identification of districts for the Post-school outcomes collection is through a stratified random sample. Stratified random sampling without replacement is used to assign each LEA to a sampling year. The district average daily membership (ADM) strata are based upon 2012/13 data. The strata are assigned according to natural splits in the existing ADM data. Within these strata, LEAs were randomly assigned to a collection year. Little Rock School District and Springdale School District, the largest two school districts in Arkansas with an ADM over 20,000, are the only districts within ADM strata 1; therefore, they are sampled in year one (1) and will be sampled a second time in year six (6).

Summaries of the number of districts within each stratum, as well as per year are attached. Treatment of Missing Data: The survey response rate is examined and reported. In addition, missing data is evaluated. Subsequently, a sensitivity analysis is conducted to investigate the effects, if any, of non-response and missing data on results of the survey. Demographic and historical data is evaluated with regard to differences between students who respond and those who do not. Estimates and analysis is adjusted accordingly.

Arkansas conducts a dual collection, phone survey and administrative data mine; however, at the time of submission the administrative data mine data was not available. Delay in data availability is partially tied to administrative changes in participating agencies. The ADE-SEU will continue to work with the agencies to reach a resolution. Therefore, the results of the phone survey data is being reported and if the administrative data mine collection becomes available, Arkansas will update the indicator during the clarification period.

An analysis of representativeness was conducted by the IDEA Data & Research Office on the characteristics of disability type, ethnicity, and exit code on the respondent group to determine whether the youth who responded to the surveys were similar to or different from the total population of youth with an IEP who exited school in 2013-14. A significant difference between the respondent group and the target leaver group is measured by a difference of ±3%. The rate of difference was adopted from the National Post-School Outcomes Center calculator. Negative differences indicate an under-representativeness of the group and positive differences indicate over-representativeness.

The analysis of exit categories revealed an over-representation of graduates and an under-representation of dropouts. The analysis of racial/ethnic categories found black students were under-represented while white students were over-represented in the survey respondents. Further, the only disability category with an under-representation was specific learning disability. While this is a decrease in representativeness as we work to resolve the administrative data collection issues, the representativeness of respondents should recover. The results are presented in Exhibits I-14.1 - I-14.3.

Exhibit I-14.1: Racial/Ethnic Representativeness of Survey Responders by Percentage

	Overall	American Indian/Alaskan Native	Asian	Black (non-Hispanic)	Hispanic	Hawaiian Pacific Islander	White (non-Hispanic)	Two or More
Target Leaver Totals	542	6	0	134	26	1	371	4
Response Totals	211	2	0	38	14	0	156	1
Target Leaver Representation		1.11%	0.00%	24.72%	4.80%	0.18%	68.45%	0.74%
Respondent Representation		0.95%	0.00%	18.01%	6.64%	0.00%	73.93%	0.47%
Difference		-0.16%	0.00%	-6.71%	1.84%	-0.18%	5.48%	-0.26%

Exhibit I-14.2: Reason of Exit Representativeness of Survey Responders by Percentage

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

	Overall	Graduated with a Regular Diploma	Graduated with a Certificate	Dropped Out	Maximum Age
Target Leaver Totals	542	460	8	72	2
Response Totals	211	190	4	15	2
Target Leaver Representation		84.67%	1.48%	13.28%	0.37%
Respondent Representation		90.05%	1.90%	7.11%	0.95%
Difference		5.18%	0.42%	-6.18%	0.58%

Exhibit I-14.3: Disability Representativeness of Survey Responders by Percentages

	Overall	Autism	Emotional Disturbance	Deaf-Blindness	Hearing Impaired	Multiple Disabilities	Intellectual Disability	Other Health Impairment	Orthopedic Impairment	Speech/ Language Impairment	Specific Learning Disability	Traumatic Brain Injury	Visual Impairment
Target Leaver Totals	542	29	20	0	1	10	84	110	0	3	281	3	1
Response Totals	211	16	6	0	1	7	36	43	0	2	97	2	1
Target Leaver Representation		5.35%	3.69%	0.00%	0.18%	1.85%	15.50%	20.30%	0.00%	0.55%	51.85%	0.55%	0.18%
Respondent Representation		7.58%	2.84%	0.00%	0.47%	3.32%	17.06%	20.38%	0.00%	0.95%	45.97%	0.95%	0.47%
Difference		2.23%	-0.85%	0.00%	0.29%	1.47%	1.56%	0.08%	0.00%	0.39%	-5.87%	0.39%	0.29%

Actions required in FFY 2013 response

None

OSEP Response

The State reported that the data for this indicator were collected from a response group that was not representative of the population. OSEP notes that the State included strategies or improvement activities to address this issue in the future.

Required Actions

Indicator 15: Resolution Sessions

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			51.00%	52.00%	53.00%	54.00%	55.00%	55.00%	55.00%	56.96%
Data		50.00%	100%	100%	87.50%	100%	76.67%	78.95%	80.00%	86.96%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	58.92%	60.88%	62.84%	64.80%	66.76%

Key:

Targets: Description of Stakeholder Input

Arkansas' targets for Indicator 15: Resolution Sessions is based on a trend analysis which revealed wide variations across the years. This information was shared with stakeholders and the state advisory council as part of the discussion for setting new targets. The decision was made to continue using one standard deviation as a growth model for this indicator.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	3.1(a) Number resolution sessions resolved through settlement agreements	n	null
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	3.1 Number of resolution sessions	29	null

FFY 2014 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
1	29	86.96%	58.92%	3.45%

Explanation of Slippage

The drop in the number of agreements reached through resolution sessions was due in part to the high number of resolution meetings waived by mutual agreement, and complaint withdrawals and/or dismissals. Sixty-nine percent (68.97%) of resolution sessions were waived by mutual agreement or not held because the complaint was withdrawn or

FFY 2014 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

dismissed, while only 3.45%, or one, had a written settlement agreement. There were four complaints (13.49%) that were fully adjudicated hearings and four due process complaints pending at the end of the year.

Actions required in FFY 2013 response

None

OSEP Response

Required Actions

Indicator 16: Mediation

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))

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			72.50%	73.00%	73.50%	74.00%	75.00%	75.00%	75.00%	73.60%
Data		52.00%	80.00%	75.00%	91.66%	88.24%	100%	72.73%	83.33%	97.06%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	75.56%	77.52%	79.48%	81.44%	83.40%

Key:

Targets: Description of Stakeholder Input

Arkansas’ targets for Indicator 16: Mediation is based on a trend analysis which revealed wide variations across the years. This information was shared with stakeholders and the state advisory council as part of the discussion for setting new targets. The decision was made to continue using one standard deviation as a growth model for this indicator.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1.a.i Mediations agreements related to due process complaints	n	null
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1.b.i Mediations agreements not related to due process complaints	5	null
SY 2014-15 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1 Mediations held	5	null

FFY 2014 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
0	5	5	97.06%	75.56%	100%

Actions required in FFY 2013 response

None

OSEP Response

The State reported fewer than ten mediations held in FFY 2014. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

Required Actions

Indicator 17: State Systemic Improvement Plan

Monitoring Priority: General Supervision

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

Reported Data

Baseline Data: 2014

FFY	2013	2014
Target ≥		
Data	45.65%	44.00%

Key: Gray – Data Prior to Baseline Yellow – Baseline
 Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	45.60%	47.20%	48.80%	50.40%

Key:

Explanation of Changes

Targets have been reset to reflect the baseline of 44.00% for the six elementary schools; however, the annual rate of change selected previously in establishing targets was not adjusted. It remains 1.6 percentage point increase, annually.

Description of Measure

See Attachment for complete SSIP Phase II

Targets: Description of Stakeholder Input

Overview

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Children with Disabilities, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., LEA, region, race/ethnicity, gender, disability category, placement, etc.). As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

See Attachment

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in LEAs to implement, scale up, and sustain the use of evidence-based practices to improve results for children with disabilities. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and initiatives, including special and general education improvement plans and initiatives, and describe the extent that these initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

See Attachment

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

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified result(s) must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified result(s) must be clearly based on the Data and State Infrastructure Analyses and must be a child-level outcome in contrast to a process outcome. The State may select a single result (e.g., increasing the graduation rate for children with disabilities) or a cluster of related results (e.g., increasing the graduation rate and decreasing the dropout rate for children with disabilities).

Statement

See Attachment

Description

See Attachment

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified result(s). The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support LEA implementation of evidence-based practices to improve the State-identified Measurable Result(s) for Children with Disabilities. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build LEA capacity to achieve the State-identified Measurable Result(s) for Children with Disabilities.

See Attachment

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in LEAs, and achieve improvement in the State-identified Measurable Result(s) for Children with Disabilities.

Submitted Theory of Action: No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

Description of Illustration

See Attachment

Infrastructure Development

- (a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
- (b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- (c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- (d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

OSEP Response

Required Actions

Certify and Submit your SPP/APR

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.

Selected: 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: Jody Fields

Title: Special Education Data Manager

Email: jafields@ualr.edu

Phone: 501-569-7219