

AR Part B

FFY2016 State Performance Plan / Annual Performance Report

Attachments

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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 Section

Associate Director's Office: The ADE-SEU works in collaboration with local school districts to provide special education services for children with disabilities (ages 3 to 21) in an effort to ensure that all children with disabilities 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 educators, students, families, and other stakeholders.

The ADE-SEU works in partnership with stakeholders to design and implement an effective system of general supervision to fulfill state and federal regulations and improve outcomes for students with disabilities. Primary activities include:

- maintaining an effective system for communication
- 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 targeted technical assistance to parents and other stakeholders
- supporting the implementation of evidence-based 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 targeted technical assistance based on established needs at the state, regional and district level
- overseeing discretionary grants that support capacity building at the LEA level for the provision of evidence-based services and supports in areas such as secondary transition; supports for students with visual and hearing impairments; programming for students with significant behavior concerns, services for students with traumatic brain injury; and programming for students with autism and significant cognitive disabilities
- providing supports to Local Education Agencies (LEAs) to increase their capacity for recruitment and retention of highly effective special educators
- analyzing data on processes and results, 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 (SPDG), PROMISE Grant, and Deaf/Blind Grant

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- monitoring and responding to the activities of the Arkansas General Assembly
- providing guidance to the ADE regarding the impact of proposed or current policy and regulations on special education programs and services
- overseeing the implementation of the existing statewide alternate portfolio assessment in science and online assessment for literacy and math for students with significant cognitive disabilities, 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 that include required actions and sanctions, as applicable, using a variety of factors (APR indicators, fiscal audits, monitoring findings, etc.)
- maintaining effective internal controls for program and fiscal requirements
- administering state and local grant applications

Dispute Resolution: The Dispute Resolution Section (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 works proactively with parents and districts to resolve conflicts at the lowest possible level.

The DRS has developed internal policies to ensure that when State Complaints are received, they are assigned immediately to complaint teams for investigation. Internal policies, procedures, and practices have been developed and implemented to ensure that complaint investigation reports are administratively complete within the required timelines.

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 have been developed and implemented to ensure that due process hearing timelines are met and hearing officers' decisions are administratively complete within the required timeline.

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. The DRS may request staff of the Monitoring and Program Effectiveness (MPE) section to make on-site inspections of school districts and early childhood programs to verify compliance with corrective actions contained in hearing decisions or investigation reports.

The DRS works collaboratively with public agencies to achieve compliance; however, the DRS may 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.

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 for the resolution of disputes involving the identification, evaluation, educational placement, and the provision of a free appropriate public education to children with disabilities as defined by the IDEA. Mediation services are free of charge to parents of students with disabilities and LEAs. 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, School Districts (K-12), and Education Service Cooperatives (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.

The ADE-SEU Dispute Resolution Section invited individuals representing a variety of stakeholder groups to participate in the Dispute Resolution Streamline Committee in the summer of 2017 in an effort to identify areas for improvement relative to the State's system for dispute resolution. Dr. Tim Hadeen, a national expert in this area, facilitated the committee which included parents, special education teachers, general education teachers, district superintendents, attorneys, a due process hearing officer, advocacy groups, and ADE-SEU staff. Eight major areas of need were identified and the ADE-SEU developed a plan of action to address these areas.

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 LEAs and other public agencies meet the Individuals with Disabilities Education Act (IDEA) program requirements.

MPE section personnel work collaboratively with other sections within the special education unit, as well as across other units and divisions within the ADE, in carrying out the section's overall responsibilities. By working in partnership with other sections, units, and divisions within the agency, the MPE area supervisors are able to assist LEA administrators in developing and implementing staff in-service and personnel development training designed to meet the needs of individual programs, specific geographic areas; and, if needed, on a statewide level. Higher education teacher preparation training programs are often influenced by ADE professional development focus areas.

The MPE section provides professional development and technical assistance to support LEAs in their efforts to ensure that all students access and progress in the general education curriculum, and have access to evidence-based programs as a part of their Individualized Education Program (IEP). Additionally, MPE section staff work to ensure that students identified as needing special education and related services are included in statewide and district-wide assessments.

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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. To assist ADE-SEU in determining the intensity of a district's monitoring and technical assistance needs, a more formalized process for determining risk has been developed that incorporates a number of variables.

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 evidence 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 corrections were completed. That system often resulted in a Band-Aid approach, as opposed to the desired systemic changes. LEAs know their own programs and are better equipped to identify program strengths and weaknesses than the state monitoring team which is often limited to a point-in-time snapshot of the district's special education program. Self-monitoring activities enable LEAs to take ownership of their own programs and use their local data to build capacity for maintaining compliance and improving services for students with disabilities.

Based on self-monitoring results and other identified risk factors, additional monitoring activities could be implemented, ranging from a verification of all or part of the district's self-monitoring submission to a comprehensive on-site visit. Targeted monitoring activities could also be implemented for specific areas of need. For example, there could be a group of LEAs identified to participate in monitoring and technical assistance activities specific to their performance on particular APR indicators.

The ADE reserves the right to implement monitoring activities on or off site based on a variety of risk factors regardless of the cycle.

Timelines are established for agencies to submit documentation of completed corrective actions for any identified noncompliance, and 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 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 impacted 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, and state and private agencies in the development of programs and trainings to improve services for students with disabilities. Primary activities include:

- 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. The ADE-SEU has worked in collaboration with the ADE Division of Educator Effectiveness through job fairs, dissemination of recruitment materials, and in the development of mentoring modules for special educators. Additionally, discretionary funds were used to support LEAs in their efforts to build capacity for recruitment and retention of highly effective special educators.

The amount of time special education teachers are required to spend on paperwork is an ongoing concern in Arkansas and nationally. In an effort to positively impact the recruitment and retention of special educators, a task force representative of multiple stakeholder groups was convened around special education paperwork reduction in January 2016 to reduce unnecessary items and duplication in special education paperwork, while maintaining accountability, procedural safeguards, and parental involvement. Stakeholder feedback and buy-in was critical as we approached the task of reducing special education paperwork. The work of the task force continued through the spring of 2016 and led to the elimination of twelve forms, a streamlined IEP, and condensed evaluation paperwork. During the 2016-2017 school year Arkansas school districts had the option to pilot the updated forms and to provide feedback on their use. The task force met again in the spring of 2017 to finalize forms based on feedback from the pilot, and the final forms were required by the ADE in August of 2017.

Based on survey responses from multiple stakeholder groups, we believe our efforts to streamline and reduce the number of required special education forms has lessened the paperwork burden for our teachers, and provided more time for teaching and learning.

- 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/blindness. 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 worked in partnership with the American Institutes for Research (AIR) and the Arkansas State Personnel Development Grant to develop new online training modules to meet the

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changing demands for skilled paraprofessionals in today's classrooms. The training modules, a collaborative effort between paraprofessionals, teachers, administrators, parents and their communities, were made available in the summer of 2017. The training is designed to be informational, practical and activity-based for both paraprofessionals and special education teachers.

- 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 Co-Teaching Project partners with Johns Hopkins University's Center for Technology in Education (JHU CTE) to implement the yearlong blended Boundless Learning Co-Teaching (BLC) professional development package in Arkansas. The BLC blended package is designed to create co-teacher partnerships that work together to build a 21st century co-teaching team in which each member is clear about the team's mission, goals, and roles. Participating co-teaching partners learn to effectively co-plan, co-instruct, and co-assess so that their students reach academic and behavioral targets.

- Qualified Interpreters

In an effort to increase the number of qualified interpreters in the State, the ADE-SEU partners with educational interpreters and the school districts that employ them by providing assessment opportunities via the Educational Interpreter Proficiency Assessment (EIPA), including funding of the assessment for interpreters who are not performing at the required level outlined in the Arkansas Standards for Educational Interpreters and Transliterators (Fourth edition, 2016). The ADE-SEU also provides educational interpreter workshops with targeted topics, based on EIPA results reports, and works with the states' Registry of Interpreters for the Deaf affiliate chapter in an effort to assist educational interpreters (e.g., mentoring, workshops, etc.).

State Personnel Development Grant: The ADEs State Personnel Development Grant works with districts and education 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; improving educators' ability to implement evidence-based literacy and behavior support practices; and improving 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. This 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.

Primary activities include:

- identifying appropriate and or inappropriate use of federal funds 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 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 services, annual and periodic Title VI-B, and Section 619 budget/expenditure reports)
- providing technical assistance in partnership with the broader ADE finance and technology staff
- conducting budget analysis on state funded catastrophic occurrence (high cost fund) reimbursement requests and residential placement reimbursement requests to ensure accuracy and allowable use of funds
- monitoring of established deadlines for reporting to ensure adherence to spending and reporting deadlines.

Fiscal Monitoring: The ADE-SEU has implemented a risk-based system of fiscal monitoring that utilizes a standard protocol to establish risk, using a rubric with point values assigned to a number of risk factors. Monitoring activities include a fiscal self-assessment completed by LEAs on the cycle for review. Desk monitoring, and onsite review may also be conducted, depending on established risk. Beginning with the 2016-2017 school year, districts on the program monitoring cycle completed the fiscal self assessment, and fiscal monitoring activities were conducted in coordination with program monitoring activities. This coordination facilitates more effective identification of fiscal barriers that could impact results for students with disabilities (e.g., Are PD funds being used appropriately?).

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 partnership with ADE-SEU and other divisions within the agency, 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

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areas of data collection and survey design as well as training LEA personnel in the data entry and submission of special education data. To assist LEAs in increasing their data knowledge and use, the Office is creating a series of webinars called DATA Talk. DATA Talk will cover various topics including basic descriptive statistics, how to create advanced searches in the student management system, and extraction of data from the student management system for analysis and decision making. Further, in partnership with the IDC, the Office has taken the lead in implementing written data protocols for the 618 data sets as well as the APR data sets.

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 is also 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 Arkansas Public School Network (APSCN) special education modules and/or the MySped Resource DDS Application to verify that students who had their evaluation timelines exceed 60 days 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. The Monitoring/Program Effectiveness (MPE) section monitors LEAs for procedural compliance on regulatory issues and provides targeted technical assistance to support LEA efforts in improving results for students with disabilities and their families.

The MPE section personnel work collaboratively with other sections within the ADE-SEU 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 partnership with other sections and units, the MPE Area Supervisors can identify monitoring and technical assistance needs, and assist LEA 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, on a statewide level. Higher education teacher preparation training programs are often influenced by ADE professional development focus areas.

The ADE-SEU general supervision tools and procedures identify and correct IDEA noncompliance in a timely manner. The system of identifying and correcting non-compliance 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 MPE Area Supervisors typically investigate complaints. 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 DRS works closely with the administrator and staff of the MPE section to ensure prompt resolution of complaints filed with the DRS.

The State Program Development Section partners with Curriculum and Assessment, Dispute Resolution, Monitoring and Program Effectiveness, and SPDG staff, along with other divisions within the agency, to assist LEAs, institutions of higher education, and state and private agencies in the development of programs and trainings to improve services for students with disabilities.

Working in partnership with the ADE-SEU and other divisions within the agency, 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 special education consultants who verify services and results of programs for students with disabilities, ensuring they are correlated to the expenditure requirements. The annual application for Part B funds 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. As part of the monitoring process, the ADE-SEU may impose needed corrective strategies on a public agency, and require that specific documentation 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

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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 a 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 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.

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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 targeted technical assistance (TA) for compliance and program improvement based a variety of risk factors including monitoring findings, desk audits, APR Determinations, Indicator Data, referrals from the other units within the agency, and other information. Various consultant groups have traditionally provided technical assistance around student specific issues and program improvement in an effort to build capacity within the LEA. These consultants are in the process of developing supports for a capacity-building model and will be transitioning over the next few years from a student-specific service model.

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 type. A central entity receives referrals and the case is assigned to a consultant. Evidence-based practices are used in the provision of technical assistance, and each TA provider participates in ongoing approved professional development to improve their 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 reports and reviewed by the administrative team in the ADE-SEU. Special Education Consultant Teams that are deployed through CIRCUIT are inclusive of the following:

- Arkansas Transition Services (ATS): 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. ATS staff 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 Specialists (BSS): The behavior support consultants provide school trainings and individual student assistance. BSS services include assistance with behavior plan development and programming, essential principles of behavior, behavior data collection, and assistance with classroom/building/district level program development to meet the social/behavioral needs of students with disabilities.
- Education Services for the Visually Impaired (ESVI): ESVI consultants provide recommendations for adaptations to enhance student opportunities for learning, assessment, and instruction; consultation in the use of recommended low vision devices and adaptive mobility devices and canes; recommendations for large print or Braille books and 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 LEAs on intervention strategies that assist in managing student behavior, enhancing academic achievement of low performing students, and assessment and identification of students potentially in need of special education services, and; the provision of 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

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deaf/blind or who are at risk for deaf/blindness. 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 provides support to build the capacity of districts and special education school teams to implement evidence based instructional and therapeutic methods to positively impact student outcomes. Services are provided to assist staff with incorporating a comprehensive curriculum for students with complex learning needs (significant and/or multiple developmental needs). ESO also provides services for Autism Spectrum Disorder (ASD) identification and augmentative/alternative communication, psycho-educational assessments, loan equipment, 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 making 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.

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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 utilizes a risk-based system to determine technical assistance (TA) needs 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 each LEA.

The State-supported consultant teams 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 (ATS):** 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. ATS staff 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.
- **State Personnel Development Grant (SPDG):** The SPDG works with districts and education cooperatives to support RTI implementation. The SPDG is focused on increasing the capacity of the state, regional education 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.
- **Arkansas Behavior Support Specialists (BSS):** The behavior support consultants provide school trainings and individual student assistance. BSS services include assistance with behavior plan development and programming, essential principles of behavior, behavior data collection, and assistance with classroom/building/district level program development to meet the social/behavioral needs of students with disabilities.
- **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 co-teaching project partners with Johns Hopkins University's Center for Technology in Education (JHU CTE) to implement a year-long blended Boundless Learning Co-Teaching (BLC) professional development package in Arkansas. The BLC blended package is designed to create co-teacher partnerships that work together to build a 21st century co-teaching team in which each member is clear about the team's mission, goals, and roles. Participating co-teaching partners learn to effectively co-plan, co-instruct, and co-assess so that their students reach achievement and behavioral targets. The BLC package includes a formal kick-off session, six facilitated online competency-based modules for

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co-teachers, electronic learning communities for co-teachers and administrators, two on-site co-teaching coaching visits, six virtual administrators' support meetings, and a comprehensive implementation evaluation process.

- **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. IDEA Data & Research, in partnership with the IDEA Data Center (IDC), has taken the lead in facilitating a disproportionality institute to support districts identified with disproportionate representation, significant discrepancy, and/or significant disproportionality or those at risk of being identified.
- **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 ADE Student Assessment Unit and the ADE 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 to enhance student opportunities for learning, assessment, and instruction; consultation in the use of recommended low vision devices and adaptive mobility devices and canes; recommendations for large print or Braille books and 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 LEAs on intervention strategies that assist in managing student behavior, enhancing academic achievement of low performing students, and assessment and identification of students potentially in need of special education services, and; the provision of staff development to school faculty and administrators regarding TBI.
- **Speech-Language Pathology Services:** Speech-Language services include consultation and technical assistance 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 and technical assistance to support LEAs in electronic billing and 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/blindness. 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 provides support to build the capacity of districts and special education school teams to implement evidence based instructional and therapeutic methods to positively impact student outcomes. Services are provided to assist staff with incorporating a comprehensive curriculum for students with complex learning needs (significant and/or multiple developmental needs). ESO also provides services for Autism Spectrum Disorder (ASD) identification and augmentative/alternative communication, psycho-educational assessments, loan equipment, 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 making 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.
- **Educational Interpreter Services:** The ADE-SEU works collaboratively with educational interpreters, the districts who employ them, and the University of Arkansas at Little Rock's Interpreter Education Program. The ADE-SEU provides targeted technical assistance workshops for interpreters to assist them in reaching the qualification standard outlined in the Arkansas Standards for Educational Interpreters and Transliterations, 4th edition.
- **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 for conflicts around the provision of educational services for children with disabilities. Mediators can facilitate IEP Meetings to guide the process 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 proposal, developed collaboratively by the supervising speech-language pathologist and the administrator(s) who will be most directly

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involved with the program, for 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. PROMISE will provide additional services to 1000 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.
- State Program Development: Arkansas has worked in partnership with the American Institutes for Research (AIR) and the Arkansas State Personnel Development Grant to develop new online training modules to meet the changing demands for skilled paraprofessionals in today's classrooms. These training modules, a collaborative effort between paraprofessionals, teachers, administrators, parents and their communities, were made available in the summer of 2017. The modules are designed to be informational, practical and activity-based for both paraprofessionals and special education teachers.

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 comments and recommended modifications. These 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.

During FFY 2013, SPP/APR stakeholders including the state advisory council provided feedback on setting targets for the APR indicators. Each indicator was discussed at length and suggestions were made to change some indicators and leave other indicator targets as set. The discussion around target setting included the previous methodology of using a four-year moving average, establishing the standard deviation, and whether the trends of recent years will continue. As indicator measurements change, stakeholders are engaged around establishing future targets based on the new baseline data.

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.

Stakeholders, including members of the State Advisory Council, are convened around changes to the SPP/APR and the SSIP quarterly as part of the State Advisory Council meeting. This gives stakeholders the opportunity to provide feedback and recommendations on a regular basis.

Other avenues of stakeholder engagement include the LEA Academy held each fall, the ADE Data Conference, various task forces and committees, meetings held with professional organizations such as the Arkansas Association of Special Education Administrators (AASEA), and monthly technical assistance calls for special education administrators.

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 2015 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 2015 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 11/19/2018

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the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2015 APR in 2017, is available.

Public Reporting

Following the submission of the Arkansas APR each year, the Arkansas Department of Education, Special Education Unit (ADE-SEU) post the report link to Grads360 on the ADE-SEU website <http://www.arkansased.gov/divisions/learning-services/special-education/data-research/public-reporting>. 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 <http://www.arkansased.gov/divisions/learning-services/special-education/data-research/public-reporting> 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_technicalassistance_ffy16.docx	Jody Fields	2/1/2018 12:53 PM	

Actions required in FFY 2015 response

OSEP Response

States were instructed to submit Phase III Year Two of the State Systemic Improvement Plan (SSIP) by April 2, 2018. The State provided the required information.

In the FFY 2017 APR, the State must report FFY data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities; (2) measures and outcomes that were implemented since the State's last SSIP submission (i.e., April 2, 2018); and (3) a summary of the infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short- and long-term outcomes that are intended to impact the SiMR.

Required Actions

The State's IDEA Part B determination for both 2017 and 2018 is Needs Assistance. In the State's 2018 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 2017 SPP/APR submission, due February 1, 2019, 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.

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 1: Graduation**

Monitoring Priority: FAPE in the LRE

Results indicator:

Percent of youth with Individualized Education Programs (IEPs) graduating from high school with a regular high school 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	2014
Target ≥			88.00%	89.00%	77.00%	77.00%	85.00%	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%	83.14%

FFY	2015
Target ≥	85.00%
Data	81.89%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	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 2015-16 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	10/12/2017	Number of youth with IEPs graduating with a regular diploma	2,655	
SY 2015-16 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	10/12/2017	Number of youth with IEPs eligible to graduate	3,150	null
SY 2015-16 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec C150; Data group 695)	10/12/2017	2014-15 Regulatory four-year adjusted-cohort graduation rate table	84.29%	Calculate

FFY 2016 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 2015 Data	FFY 2016 Target	FFY 2016 Data
2,655	3,150	81.89%	85.00%	84.29%

Graduation Conditions

Choose the length of Adjusted Cohort Graduation Rate your state is using: 4-year ACGR

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma and, if different, the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma. If there is a difference, explain.

STANDARD IX GRADUATION REQUIREMENTS

14.02 Specifically, for the graduating class of 2013-2014, and all graduating classes thereafter, 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

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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 [one (1) unit of world history, one (1) unit of U. S. history, one half (½) unit of Civics]

Oral Communications - one half (½) unit

Physical Education - one half (½) unit

Health and Safety - one half (½) unit

Economics - one half (½) unit

A one-half (½) unit of Economics is required for graduation and may be counted toward the required three (3) social studies credits or toward the six (6) required career focus elective credits.

If the course is taught by an appropriately licensed social studies teacher, credit may be applied to meet graduation requirements in social studies or toward the career focus electives. If the course is taught by an appropriately licensed business education teacher, graduation credit can only be applied toward career focus requirements.

The appropriate course code must be used to differentiate the application of credit for graduation to either the area of social studies or the area of career focus elective credit.

Fine Arts - 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]

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

Economics - one half (½) unit

A one-half (½) unit of Economics is required for graduation and may be counted toward the required three (3) social studies credits or toward the six (6) required career focus elective credits.

If the course is taught by an appropriately licensed social studies teacher, credit may be applied to meet graduation requirements in social studies or toward the career focus electives. If the course is taught by an appropriately licensed business education teacher, graduation credit can only be applied toward career focus requirements.

The appropriate course code must be used to differentiate the application of credit for graduation to either the area of social studies or the area of career focus elective credit.

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.

14.03 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 thirty (30) hour week is required.

Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? No

Actions required in FFY 2015 response

none

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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	2014
Target ≤			2.83%	2.87%		4.25%	4.20%	4.20%	4.20%	2.77%	2.62%
Data		2.59%	3.51%	3.37%	4.28%	3.66%	3.06%	2.92%	2.62%	1.97%	2.03%

FFY	2015
Target ≤	2.54%
Data	1.94%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≤	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.

Please indicate whether you are reporting using Option 1 or Option 2.

- Option 1
- Option 2

Has your State made or proposes to make changes to the data source under Option 2 when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012? No

FFY 2016 SPP/APR Data

Total number of students with IEPs in grades 7-12 who dropped out	Total number of students with IEPs in grades 7-12	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
371	23,189	1.94%	2.29%	1.60%

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 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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.

Overview of Issue/Description of System or Process

Beginning with the 2004-2005 school year, the following process is used by each school 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:

- 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%.
- 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%.
- 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%.
- 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%.
- 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%.
- 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%

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

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).

Is there a difference in what counts as dropping out for youth with IEPs? No

Actions required in FFY 2015 response

none

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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. Indicator 3A – Reserved
- B. Participation rate for children with IEPs.
- C. Proficiency rate for children with IEPs against grade level 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	2014
Reading	A Overall	2005	Target ≥		95.00%	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%	97.15%
Math	A Overall	2005	Target ≥		95.00%	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%	97.52%

	Group Name	FFY	2015
Reading	A Overall	Target ≥	95.00%
		Data	98.70%
Math	A Overall	Target ≥	95.00%
		Data	98.91%

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

FFY 2016 - FFY 2018 Targets

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

Key:

Targets: Description of Stakeholder Input

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

FFY 2016 SPP/APR Data: Reading Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	36,167	35,736	98.70%	95.00%	98.81%

FFY 2016 SPP/APR Data: Math Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	36,204	35,806	98.91%	95.00%	98.90%

Public Reporting Information

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

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

For a comparison of special education students to all students please visit the Arkansas Department of Education's Data Center (<http://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.

The link is https://arksped.k12.ar.us/documents/data_n_research/PublicReporting/PublicReportingAssessment1617.pdf

Actions required in FFY 2015 response

none

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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. Indicator 3A -- Reserved
- B. Participation rate for children with IEPs.
- C. Proficiency rate for children with IEPs against grade level 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	2014
Reading	A Overall	2005	Target ≥		14.62%	13.17%	19.58%	25.99%	32.40%	38.81%	45.22%	45.22%	31.27%	30.29%
			Data		14.62%	16.49%	19.95%	24.99%	27.20%	31.49%	63.06%	33.23%	32.26%	10.45%
Math	A Overall	2005	Target ≥		14.62%	18.54%	25.06%	31.58%	38.10%	44.62%	51.14%	51.14%	40.13%	38.17%
			Data		18.98%	24.81%	30.86%	38.29%	42.56%	44.86%	45.42%	42.09%	40.56%	10.42%

	Group Name	FFY	2015
Reading	A Overall	Target ≥	32.27%
		Data	13.41%
Math	A Overall	Target ≥	37.19%
		Data	16.00%

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

FFY 2016 - FFY 2018 Targets

	FFY	2016	2017	2018
Reading	A ≥ Overall	34.23%	36.19%	38.15%
Math	A ≥ Overall	39.15%	41.11%	43.07%

Key:

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 FFY2015. Under the guidance of stakeholders, no new targets are being established. In FFY2015 Arkansas began administering ACT ASPIRE as the regular assessment. MSA (formerly NCSC) remained the alternate assessment.

Would you like to use the assessment data below to automatically calculate the actual data reported in your FFY 2013 APR by the grade groups you provided on the Reporting Group Selection page? yes

Would you like the disaggregated data to be displayed in your final APR? yes

Data Source: SY 2016-17 Assessment Data Groups - Reading (EDFacts file spec C178; Data Group: 584) **Date:** 12/14/2017

Reading proficiency data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs who received a valid score and a proficiency was assigned	5018	5236	4875	4704	4416	4257	3558	3145	527	n	n
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	299	263	188	171	78	72	60	38			

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Reading proficiency data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	133	194	257	350	247	247	161	130			
d. IEPs in alternate assessment against grade-level standards scored at or above proficient against grade level											
e. IEPs in alternate assessment against modified standards scored at or above proficient against grade level											
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	310	360	340	267	347	299			329		

Data Source: SY 2016-17 Assessment Data Groups - Math (EDFacts file spec C175; Data Group: 583) **Date:** 12/14/2017

Math proficiency data by grade											
Grade	3	4	5	6	7	8	9	10	11	12	HS
a. Children with IEPs who received a valid score and a proficiency was assigned	5029	5241	4884	4712	4427	4266	3569	3152	526	n	n
b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level	502	333	186	179	87	56	33	18			
c. IEPs in regular assessment with accommodations scored at or above proficient against grade level	439	476	383	598	217	143	73	31			
d. IEPs in alternate assessment against grade-level standards scored at or above proficient against grade level											
e. IEPs in alternate assessment against modified standards scored at or above proficient against grade level											
f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level	350	343	323	306	337	363			313		

FFY 2016 SPP/APR Data: Reading Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	35,736	5,140	13.41%	34.23%	14.38%

FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A Overall	35,806	6,089	16.00%	39.15%	17.01%

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>.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

none

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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: 2016

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≤			7.59%	7.11%	7.11%		6.23%	6.23%	6.23%	5.77%	5.43%
Data		9.06%	7.57%	11.76%	11.76%	7.86%	6.91%	10.26%	3.69%	4.65%	4.67%

FFY	2015
Target ≤	5.11%
Data	7.00%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≤	30.14%	30.00%	29.50%

Key:

Explanation of Changes

Changes to the required measurement necessitated changes to the targets

Targets: Description of Stakeholder Input

Arkansas’ targets for Indicator 4: Discipline in the past was based on trend analysis and compliance requirements. However, the recent measurement changes has lead to the targets being revised. The indicator was discussed with stakeholders which includes the state’s advisory council. For Indicator 4A, the discussion included how the measurement change effected the State’s rate, that FFY 2016 would become a baseline year and setting the FFY 2017 and FFY 2018 with a minimal decline. The Indicator will be revisited as more data becomes available onthe new measurement.

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

The State may only include, in both the numerator and the denominator, districts that met the State-established n size. Report the number of districts excluded from the calculation as a result of the requirement. 186

Number of districts that have a significant discrepancy	Number of districts that met the State’s minimum n-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
22	73	7.00%	30.14%	30.14%

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 discrepancy. 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.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Arkansas's minimum "n" size is two (2). All districts have rates calculated no matter the size of the numerator or denominator. However, if a district is identified with a significant discrepancy and that identification is based on fewer than 2 students with greater than 10 days of suspension/expulsion the district is excluded from being identified. More often than not, the one student in special education is being compared in a district with zero non-disabled students with greater than 10 days of suspension/ expulsion.

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.

$$\text{Formula: } \frac{\text{Suspension/expulsion rate for children with disabilities} - \text{Suspension/expulsion rate for general education students}}{\text{Difference between Special Education \& General Education students}} =$$

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2015 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2016 using 2015-2016 data)

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

For each of the 22 LEAs that the State identified in 2015-16 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 LEA's 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 (NCCRES) 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 <http://www.arkansased.gov/divisions/learning-services/special-education/monitoring-program-effectiveness/monitoring-procedures>.

Additionally, each of the districts participated in the Disproportionality Institute (March 2017) and completed a Success Gap Rubric. Each district's Success Gap Rubric was submitted to the ADE-SEU for review. The review of the Success Gap Rubric's provided the opportunity to develop individual district technical assistance to help meet their needs.

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 on 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:

Correction of Findings of Noncompliance Identified in FFY 2015

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

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2016, and OSEP accepts that revision.

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

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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: 2016

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data						0%	0%	0%	0%	0%	0%

FFY	2015
Target	0%
Data	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	0%	0%	0%

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

The State may only include, in both the numerator and the denominator, districts that met the State-established n size. Report the number of districts excluded from the calculation as a result of the requirement. 0

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 that met the State's minimum n-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
10	0	259	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 2015-16, zero districts were excluded for identification because the child count did not exceed 40 students. Twelve districts were excluded for a particular race/ethnicity because the child count did not exceed 10 students in a particular race/ethnicity. However, no district was excluded from all races.

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 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Review of Policies, Procedures, and Practices (completed in FFY 2016 using 2015-2016 data)

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

Each of the 10 LEAs which the State identified in 2015-16 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 LEAs 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 <http://www.arkansased.gov/divisions/learning-services/special-education/monitoring-program-effectiveness/monitoring-procedures>

Additionally, each of the districts participated in the Disproportionality Institute (March 2017) and completed a Success Gap Rubric. Each district's Success Gap Rubric was submitted to the ADE-SEU for review. The review of the Success Gap Rubric's provided the opportunity to develop individual district technical assistance to help meet their needs.

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:

Correction of Findings of Noncompliance Identified in FFY 2015

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

The State has revised the baseline for this indicator, using data from FFY 2016, and OSEP accepts that revision.

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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	2014
A	2005	Target ≥			48.91%	51.49%	54.29%	56.93%	59.77%	59.77%	59.77%	53.97%	55.93%
		Data		48.33%	51.05%	51.80%	52.15%	53.10%	53.87%	53.26%	52.88%	52.90%	52.51%
B	2005	Target ≤			12.52%	12.52%	12.52%	12.51%	12.51%	12.51%	12.51%	12.99%	13.62%
		Data		12.11%	12.02%	12.65%	13.60%	12.49%	12.42%	12.52%	13.18%	13.39%	13.56%
C	2005	Target ≤			2.58%	2.57%	2.57%	2.56%	2.56%	2.56%	2.56%	2.55%	2.53%
		Data		2.60%	2.69%	2.76%	2.82%	2.82%	2.80%	2.70%	2.57%	2.37%	2.32%

	FFY	2015
A	Target ≥	57.89%
	Data	52.68%
B	Target ≤	13.03%
	Data	13.55%
C	Target ≤	2.49%
	Data	2.35%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A ≥	59.85%	61.81%	63.77%
Target B ≤	12.64%	12.16%	12.00%
Target C ≤	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 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	Total number of children with IEPs aged 6 through 21	57,318	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	30,427	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	7,678	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	c1. Number of children with IEPs aged 6 through 21 in separate schools	487	null

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	c2. Number of children with IEPs aged 6 through 21 in residential facilities	539	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/13/2017	c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements	290	null

FFY 2016 SPP/APR Data

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	30,427	57,318	52.68%	59.85%	53.08%
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	7,678	57,318	13.55%	12.64%	13.40%
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	1,316	57,318	2.35%	2.46%	2.30%

Actions required in FFY 2015 response

none

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Preschool Environments**

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 3 through 5 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	2014
A	2011	Target ≥									31.50%	31.01%	31.99%
		Data								31.00%	30.03%	28.91%	26.01%
B	2011	Target ≤									27.13%	29.80%	30.78%
		Data								27.63%	28.82%	28.57%	29.88%

	FFY	2015
A	Target ≥	32.97%
	Data	25.76%
B	Target ≤	30.30%
	Data	31.57%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A ≥	33.95%	34.93%	35.94%
Target B ≤	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 1/2 of a standard deviation (0.98). The 6B target was set to decline by 1/4 (0.49) of a standard deviation annually.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	Total number of children with IEPs aged 3 through 5	13,474	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	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	3,609	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	b1. Number of children attending separate special education class	147	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	b2. Number of children attending separate school	3,871	null
SY 2016-17 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/13/2017	b3. Number of children attending residential facility	10	null

FFY 2016 SPP/APR Data

	Number of children with IEPs	Total number of children with IEPs	FFY 2015	FFY 2016	FFY 2016
11/19/2018					

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

	aged 3 through 5 attending	aged 3 through 5	Data*	Target*	Data
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	3,609	13,474	25.76%	33.95%	26.78%
B. Separate special education class, separate school or residential facility	4,028	13,474	31.57%	29.83%	29.89%

Use a different calculation methodology

Actions required in FFY 2015 response

none

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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))

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2008	Target ≥						90.00%	90.50%	90.50%	90.50%	89.16%	89.64%
		Data					89.56%	89.68%	89.61%	89.20%	90.17%	86.76%	85.58%
A2	2008	Target ≥						69.00%	69.50%	69.50%	69.50%	66.32%	66.80%
		Data					68.61%	66.74%	66.58%	68.25%	64.56%	63.18%	59.06%
B1	2008	Target ≥						90.00%	90.50%	90.50%	90.50%	89.98%	90.46%
		Data					89.64%	91.34%	90.31%	89.81%	90.80%	88.20%	87.47%
B2	2008	Target ≥						60.00%	60.50%	60.50%	60.50%	57.17%	56.21%
		Data					59.74%	57.67%	57.43%	57.68%	55.87%	54.65%	49.15%
C1	2008	Target ≥						92.00%	92.50%	92.50%	92.50%	90.71%	89.73%
		Data					91.68%	90.32%	90.82%	91.00%	91.40%	89.05%	87.82%
C2	2008	Target ≥						78.00%	78.50%	78.50%	78.50%	75.95%	74.97%
		Data					77.81%	76.23%	76.69%	78.03%	74.09%	72.87%	69.20%

	FFY	2015
A1	Target ≥	90.12%
	Data	84.99%
A2	Target ≥	67.28%
	Data	59.76%
B1	Target ≥	90.64%
	Data	86.39%
B2	Target ≥	57.19%
	Data	49.22%
C1	Target ≥	90.21%
	Data	85.73%
C2	Target ≥	73.99%
	Data	69.62%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A1 ≥	90.60%	91.08%	91.56%
Target A2 ≥	67.76%	68.24%	68.72%
Target B1 ≥	91.42%	91.90%	92.38%
Target B2 ≥	58.17%	59.64%	61.11%
Target C1 ≥	91.17%	91.65%	92.13%
Target C2 ≥	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 2016 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed	0.00
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FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Outcome A: Positive social-emotional skills (including social relationships)

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	80.00	1.46%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	518.00	9.47%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1772.00	32.41%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1652.00	30.21%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1446.00	26.44%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 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)	3424.00	4022.00	84.99%	90.60%	85.13%
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)	3098.00	5468.00	59.76%	67.76%	56.66%

Reasons for A2 Slippage

There were 5,468 children with entry and exit assessment data. Of those, 56.66% were functioning within age expectations by the time they turned 6 or exited the program. This is a decrease from FFY 2015 rate of 59.76% and falls short to the target by 11 percentage points.

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 work on ensuring early childhood outcomes data is accurate and of high quality. As a result of the review of the COS process that Arkansas conducted through the Powerful Data for 619 cohort, an identified need was to integrate the COS process and IEP form. The Integrated COS/IEP is in full implementation which includes a guidance document outlining how to use data to determine the child's rating and then develop goals based on the identified needs, including the COS rating. Additionally, LEAs have been given the link to the DaSy/ECTA COS training modules to share and review with their staff.

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

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	63.00	1.15%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	664.00	12.14%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2244.00	41.04%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1962.00	35.88%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	535.00	9.78%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 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)	4206.00	4933.00	86.39%	91.42%	85.26%
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)	2497.00	5468.00	49.22%	58.17%	45.67%

Reasons for B1 Slippage

There were 5,468 children with entry and exit assessment data. Of those that entered or exited the preschool program functioning below level of same-aged peers, 85.26% substantially increased their rate of growth by the time they turned 6 years of age or exited the program. This is a slight decrease from the FFY 2015 rate of 86.39%, and falls short of the 91.42% target by 6.16 percentage points. Although the percentages represent slippage there is evidence of improvement with 41.04% (2,244/5,468) of children having improved functioning nearer to same-age peers; an increase from 37.78% the previous year. The percentage of children making personal gains but failing to improve functioning nearer to same-age peers increased from 10.31% in FFY 2015 to 12.14% in FFY 2016.

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 work on ensuring early childhood outcomes data is accurate and of high quality. As a result of the review of the COS process that Arkansas conducted through the Powerful Data for 619 cohort, an identified need was to integrate the COS process and IEP form. The Integrated COS/IEP is in full implementation which includes a guidance document outlining how to use data to determine the child's rating and then develop goals based on the identified needs, including the COS rating. Additionally, LEAs have been given the link to the DaSy/ECTA COS training modules to share and review with their staff.

Reasons for B2 Slippage

There were 5,468 children with entry and exit assessment data. Of those, 56.66% were functioning within age expectations by the time they turned 6 or exited the program. This is a decrease from FFY 2015 rate of 59.76% and falls short to the target by 11 percentage points.

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.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Arkansas continues to work on ensuring early childhood outcomes data is accurate and of high quality. As a result of the review of the COS process that Arkansas conducted through the Powerful Data for 619 cohort, an identified need was to integrate the COS process and IEP form. The Integrated COS/IEP is in full implementation which includes a guidance document outlining how to use data to determine the child's rating and then develop goals based on the identified needs, including the COS rating. Additionally, LEAs have been given the link to the DaSy/ECTA COS training modules to share and review with their staff.

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	55.00	1.01%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	465.00	8.50%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1364.00	24.95%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1812.00	33.14%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1772.00	32.41%

	Numerator	Denominator	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
C1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. $(c+d)/(a+b+c+d)$	3176.00	3696.00	85.73%	91.17%	85.93%
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. $(d+e)/(a+b+c+d+e)$	3584.00	5468.00	69.62%	75.46%	65.54%

Reasons for C2 Slippage

There were 5,468 children with entry and exit assessment data. Of those, 65.54% were functioning within age expectations by the time they turned 6 or exited the program. This is a decrease from FFY 2015 rate of 69.62% and falls short to the target by 9.92 percentage points.

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 work on ensuring early childhood outcomes data is accurate and of high quality. As a result of the review of the COS process that Arkansas conducted through the Powerful Data for 619 cohort, an identified need was to integrate the COS process and IEP form. The Integrated COS/IEP is in full implementation which includes a guidance document outlining how to use data to determine the child's rating and then develop goals based on the identified needs, including the COS rating. Additionally, LEAs have been given the link to the DaSy/ECTA COS training modules to share and review with their staff.

Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? Yes

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes

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

The data collection is based on a census of all children with IEPs who had both entry and exit COSF scores and exited early childhood special education because they no longer required services, were kindergarten eligible, or the parents withdrew consent for services, and received at least six months of services. Early childhood programs are permitted to use various assessment instruments, but they must use the child outcomes summary (COS) form and utilize a team approach, which includes the parents, for determining a child's entry and/or exit scores for each outcome area. In the 2016-17 school year, the COS was integrated into the IEP process and is being fully implemented in the 2017-18.

The data is collected via two data systems. The Educational Cooperatives and School Districts submit their child outcomes data through the statewide student management system. The early childhood module has included the outcomes data in FFY 2006. The second data system is a web-based application that was created for the 3-5 program operated under an interagency agreement with the Department of Human Services Division of Developmental Disabilities Services (DDS) in FFY 2006. The DDS application is part of MySpEd Resource, a secure data collection and review portal on the special education website. The DDS application allows the 3-5 programs to enter data directly to ADE-SEU and track children with IEPs (enrollment/child count information, EC outcomes, and EC exits) as well as referrals which include Part C to B transition.

Actions required in FFY 2015 response

none

OSEP Response

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FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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%

	FFY	2014	2015
Preschool	Target ≥	90.92%	91.90%
	Data	92.03%	91.18%
School Age	Target ≥	94.53%	95.01%
	Data	95.63%	93.45%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Preschool Target ≥	92.88%	93.86%	94.84%
School-age Target ≥	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 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
Preschool	3643.00	3946.00	91.18%	92.88%	92.32%
School-age	18926.00	20311.00	93.45%	95.49%	93.18%

The number of parents to whom the surveys were distributed. 37.32% 65000.00

The percentage shown is the number of respondent parents divided by the number of parents to whom the survey was distributed.

The demographics of the parents responding are representative of the demographics of children receiving special education services. No

Describe the strategies the State will use to ensure that in the future the response data are representative of those demographics.

The family survey 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 11/19/2018

The ADE SEU monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2018. Further, the ADE-SEU has finalized its review of required paperwork and has included a distinct component in the paperwork to help ensure parental opportunity to participate in the family survey.

Include the State’s analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

The number of responding parents/guardians increased in 2016-17 for early childhood and school age programs. The number of early childhood respondents increased by 705 and the number of school age respondents increased by 1,742. Representativeness of the respondents shows some racial/ethnic groups and disabilities remain under-represented when compared to December 1, 2015 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 representative of the December 1 child count for 2016-17 by race/ethnicity. Using a +/- 3% as the criteria to identify over- or under-representativeness, families of CWD in early childhood programs are over represented in white and under-represented in black. Families of CWD in school age programs are significantly under-represented in Black and Hispanic. It should be noted that 13.53% of survey respondents failed to indicate the child's racial/ethnic group.

Table I-8.1 Percentage Point Difference in Racial/Ethnic Groups in December 2015 Child Count and 2015-16 Family Survey Respondents by Program Type

	Asian	Black	Hispanic	Native American/ Alaska Native	Native Hawaiian/ Pacific Islander	Two or More Races	White
Early Childhood	-013.%	-5.31%	-1.15%	0.35%	-0.05%	0.21%	4.79%
School Age	-0.27%	-4.81%	-4.20%	-0.22%	-0.18%	-1.04%	-1.51%

All special education programs that had a “zero return” on the Family Survey for 2016-2017 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 2016-17 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. It should be noted that 1.29% of the survey respondents did not indicate the race and/or disability. The relative difference of child count demographics to early childhood respondents shows a marked 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 races	White
Not Reported	0.36%	0.00%	1.09%	0.47%	0.00%	0.05%	0.13%	1.76%
Autism	0.00%	0.02%	0.37%	0.04%	0.00%	-0.03%	0.19%	0.97%
Deaf/Blind	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.05%
Hearing Impaired	0.00%	-0.01%	0.01%	0.02%	0.00%	0.00%	-0.02%	-0.06%
Multiple Disabilities	0.00%	-0.01%	-0.07%	0.15%	0.00%	0.00%	0.00%	0.20%
Other Health Impairment	0.05%	0.00%	0.04%	0.04%	0.00%	0.00%	0.00%	0.11%
Orthopedic Impaired	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.03%
Developmental Delay	0.72%	-0.18%	-6.79%	-2.39%	0.27%	-0.08%	-0.31%	-3.62%
Speech Impaired	0.16%	0.05%	0.08%	0.53%	0.08%	0.02%	0.22%	5.38%
Traumatic Brain Injury	0.00%	0.00%	-0.01%	0.00%	0.00%	-0.01%	0.00%	0.03%
Vision Impaired	0.00%	0.00%	-0.03%	-0.01%	0.00%	0.00%	0.00%	-0.08%
TOTAL*	1.29%	-0.13%	-5.31%	-1.15%	0.35%	-0.05%	0.21%	4.79%

School Age

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

The 2016-17 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 12.24% 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 races	White
Not Reported	2.50%	0.03%	0.75%	0.43%	0.04%	0.04%	0.06%	1.72%
Autism	0.77%	-0.04%	-0.02%	-0.36%	0.01%	-0.02%	-0.04%	-0.53%
Deaf/Blind	0.01%	0.00%	0.00%	0.01%	0.01%	0.00%	0.00%	0.01%
Emotional Disturbance	0.14%	0.00%	-0.15%	-0.04%	-0.02%	0.00%	-0.02%	-0.34%
Hearing Impaired	0.06%	-0.02%	-0.08%	-0.13%	0.00%	-0.02%	-0.01%	-0.13%
Multiple Disabilities	0.23%	-0.01%	-0.01%	-0.07%	0.02%	0.01%	0.02%	0.06%
Mental Retardation	1.18%	0.01%	-0.25%	-0.65%	-0.03%	-0.03%	-0.08%	-0.15%
Other Health Impairment	1.88%	-0.03%	-1.49%	-0.41%	-0.03%	0.01%	-0.31%	-1.06%
Orthopedic Impaired	0.04%	-0.01%	0.00%	0.00%	0.00%	0.00%	0.01%	-0.02%
Speech Impaired	1.74%	-0.15%	-2.41%	-1.55%	-0.07%	-0.08%	-0.33%	-1.90%
Specific Learning Disability	3.62%	-0.05%	-1.10%	-1.42%	-0.13%	-0.08%	-0.33%	0.84%
Traumatic Brain Injury	0.04%	0.00%	-0.01%	-0.01%	0.00%	0.00%	0.00%	0.02%
Vision Impaired	0.04%	0.00%	-0.03%	-0.01%	0.00%	0.00%	-0.01%	-0.03%
TOTAL*	12.24%	-0.27%	-4.81%	-4.20%	-0.22%	-0.18%	-1.04%	-1.51%

The ADE has a dedicated parent page <http://www.arkansased.gov/im-looking-for/parent> which provides parents information and resources to ensure your child is healthy, challenged, supported, engaged, and safe in school. One resource is the My Child/My Student campaign which supports better communication between schools and families 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 were provided questions, tips and resources they can use to converse with a student’s parent(s) or guardian(s).

The ADE-SEU parent page on its website <http://www.arkansased.gov/divisions/learning-services/special-education/parents> provides parents with resources and tips as well as 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.

Was sampling used? No

Was a survey used? Yes

Is it a new or revised survey? No

Actions required in FFY 2015 response

In the FFY 2016 SPP/APR, the State must report whether its FFY 2016 data are from a response group representative of the population, and, if not, the actions the State is taking to address this issue.

Responses to actions required in FFY 2015 OSEP response

The family survey data is not fully representative of Arkansas' child count for FFY2106. 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.

The ADE-SEU monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2018. Further, the ADE-SEU has finalized its review of required paperwork and has included a distinct component in the paperwork to help ensure parental opportunity to participate in the family survey.

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 9: Disproportionate Representation**

Monitoring Priority: Disproportionate Representation

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: 2016

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

FFY	2015
Target	0%
Data	0%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	0%	0%	0%

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

The State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts totally excluded from the calculation as a result of the requirement because the district did not meet the minimum n and/or cell size. 0

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 that met the State's minimum n-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
0	0	259	0%	0%	0%

Were all races and ethnicities included in the review? Yes No

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

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.

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.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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 2016/17, zero districts with an "N" size less than 40 were excluded from being identified for this indicator. Additionally, an outlier criteria (<5% or >95%) was applied to the racial/ethnic categories resulting in numerous districts being excluded from specific racial/ethnic categories. No districts were excluded from all racial/ethnic categories based on the outlier criteria.

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

Not Applicable

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

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

The State has revised the baseline for this indicator, using data from FFY 2016, and OSEP accepts that revision.

Required Actions

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 10: Disproportionate Representation in Specific Disability Categories

Monitoring Priority: Disproportionate Representation

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: 2016

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

FFY	2015
Target	0%
Data	0%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	0%	0%	0%

FFY 2016 SPP/APR Data

Has the State Established a minimum n-size requirement? Yes No

The State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts totally excluded from the calculation as a result of the requirement because the district did not meet the minimum n and/or cell size. 0

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 that met the State's minimum n-size	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
2	0	259	0%	0%	0%

Were all races and ethnicities included in the review? Yes No

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

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.

- 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.
- 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.
- 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 2016/17, zero districts with an "N" size less than 40 were excluded from being identified for this indicator. Additionally, an outlier criteria (<5% or >95%) was applied to the racial/ethnic categories resulting in numerous districts being excluded from specific racial/ethnic categories. No districts were excluded from all racial/ethnic categories based on the outlier criteria.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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

Not Applicable

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

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

The State has revised the baseline for this indicator, using data from FFY 2016, and OSEP accepts that revision.

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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	2014
Target			100%	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%	99.57%

FFY	2015
Target	100%
Data	99.59%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
18,540	18,494	99.59%	100%	99.75%

Number of children included in (a), but not included in (b) [a-b]	46
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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.

Arkansas is substantially compliant with a rate of 99.75%, which is an increase of 0.16 percentage points from the 2015-16 rate of 99.59%.

In 2016-17, there were 18,540 children with parental consent to evaluate who were evaluated. The number of children evaluated within the State's 60-day timeline was 18,494 or 99.95%. Of the 18,494 children, 4,702 or 25.42% were determined not eligible, while 13,792 or 74.58% were determined eligible.

There were 46 children whose evaluations exceeded the 60-day timeline, a decrease from 73 children reported in the 2015-16 APR. A verification of the 26 LEAs which the 46 children represented revealed 37 (80.43%) were determined eligible and 9 (19.57%) were found not eligible. The number of days beyond the 60-day timeline varied from 3 to 148 days for students who were later found not eligible and 1 to 114 days for students found eligible.

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 December 21, 2017 using current year data from the statewide student management system, verification of the correction of noncompliance for the 26 LEAs yielded zero districts with 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 source of the data provided for this indicator?

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

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

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
73	73	0	0

FFY 2015 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 2015 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.

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

he State has verified, by reviewing the special education modules of the student management system, that each of the 13 LEAs with findings in FFY 2015 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 2017 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 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2016: (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 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

Required Actions

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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	2014
Target			100%	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%	98.70%

FFY	2015
Target	100%
Data	98.16%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

FFY 2016 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	190
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.	10
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	155
d. Number of children 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.	20
e. Number of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.	5
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 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. $[c/(a-b-d-e-f)] \times 100$	155	155	98.16%	100%	100%

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, or f	0
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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

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.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	4	0	0

FFY 2015 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 subgrantee noncompliant in FFY 2015 corrected their noncompliance within one year and continued to be in compliance with the Part C to B requirements in FFY 2016. 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 2015 corrected their noncompliance within one year and continued to be in compliance with the Part C to B requirements in FFY 2016. 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 2016 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 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2016: (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 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data						96.34%	96.19%	96.51%	89.07%	98.58%	98.87%

FFY	2015
Target	100%
Data	96.41%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target	100%	100%	100%

FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
257	260	96.41%	100%	98.85%

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 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 student's 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. Arkansas is participating in an intensive TA project through NTACT that involves ADE-SEU staff, Arkansas Transition Services, AR Rehabilitation Services, Career and Technical Education, and local district partners. Goals and activities are designed to improve secondary transition services, dropout, graduation and post school outcomes.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?

Yes No

Actions required in FFY 2015 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2015

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	2	0	0

FFY 2015 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 2 finding of noncompliance from FFY 2015 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. 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 13 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 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 13 IEPs determined to be out of compliance had been corrected within the one year timeline and the review of updated data verified 100% compliance.

OSEP Response

Because the State reported less than 100% compliance for FFY 2016, the State must report on the status of correction of noncompliance identified in FFY 2016 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2017 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2016: (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 2017 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 2016, although its FFY 2016 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2016.

Required Actions

**FFY 2016 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	2014
A	2009	Target ≥							13.00%	13.00%	13.15%	13.35%	13.84%
		Data						12.86%	14.54%	15.88%	18.42%	18.17%	24.64%
B	2009	Target ≥							49.00%	49.00%	49.15%	49.04%	49.53%
		Data						48.55%	49.52%	42.95%	43.88%	52.19%	51.66%
C	2009	Target ≥							60.00%	60.00%	60.15%	59.36%	60.14%
		Data						59.34%	61.05%	55.92%	58.13%	54.64%	63.03%

	FFY	2015
A	Target ≥	14.33%
	Data	11.80%
B	Target ≥	50.02%
	Data	24.11%
C	Target ≥	60.92%
	Data	51.26%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target A ≥	14.82%	15.31%	15.80%
Target B ≥	50.51%	51.00%	51.49%
Target C ≥	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 2016 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	519.00
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	93.00
2. Number of respondent youth who competitively employed within one year of leaving high school	137.00
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)	19.00
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).	21.00

	Number of respondent youth	Number of respondent youth who are no longer in	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
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FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

		secondary school and had IEPs in effect at the time they left school			
A. Enrolled in higher education (1)	93.00	519.00	11.80%	14.82%	17.92%
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	230.00	519.00	24.11%	50.51%	44.32%
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)	270.00	519.00	51.26%	61.70%	52.02%

Please select the reporting option your State is using:

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

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

Was a survey used? Yes

Is it a new or revised survey? No

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.

Are the response data representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school? No

Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

Arkansas conducts a dual collection, phone survey and administrative data mine. The administrative data mining included data from the Arkansas Department of Higher Education and Department of Workforce Services. Arkansas will continue to work with other state agencies to improve the data mining process. By expanding the number of agencies participating in the collection the representativeness should improve. The ADE has established data sharing agreements for the data collection with the following agencies: Arkansas Department of Human Services, Arkansas Department of Higher Education, Arkansas Department of Career Education, Arkansas Department of Corrections, Arkansas Department of Workforce Services, and the Arkansas Department of Community Corrections.

The State will continue to look at different data collection options as part of the ADE's strategic plan which includes goals around graduation and post-school outcomes.

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 2015-16. 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 revealed that responses are representative in racial/ethnic groups as well of the exit categories. However, in the disability category of intellectual disability the responses are under-represented and in the disability category of specific learning disability are over-represented. 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	Hispanic	Hawaiian Pacific Islander	White	Two or More
Target Leaver Totals	519	2	1	130	28	1	350	7
Response Totals	411	1	1	106	20	0	277	6

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Target Leaver Representation		0.39%	0.19%	25.05%	5.39%	0.19%	67.44%	1.35%
Respondent Representation		0.24%	0.24%	25.79%	4.87%	0.00%	67.40%	1.46%
Difference		-0.14%	0.05%	0.74%	-0.53%	-0.19%	-0.04	-0.11%

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

	Overall	Graduated with a Regular Diploma	Graduated with a Certificate	Dropped Out	Maximum Age
Target Leaver Totals	519	468	3	48	0
Response Totals	411	378	0	33	0
Target Leaver Representation		90.17%	0.58%	9.25%	0.00%
Respondent Representation		91.97%	0.00%	8.03%	0.00%
Difference		1.80%	-0.58%	-1.22%	0.00%

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	519	27	11	0	3	11	59	127	3	7	269	1	1
Response Totals	411	19	10	0	2	6	29	102	1	6	235	0	1
Target Leaver Representation		5.20%	2.12%	0.00%	0.58%	2.12%	11.37%	24.47%	0.58%	1.35%	51.83%	0.19%	0.19%
Respondent Representation		4.26%	2.43%	0.00%	0.49%	1.46%	7.06%	24.82%	0.24%	1.46%	57.18%	0.00%	0.24%
Difference		-0.58%	0.31%	0.00%	-0.09%	-0.66%	-4.31%	0.35%	-0.33%	0.11%	5.35%	-0.19%	0.05%

Actions required in FFY 2015 response

In the FFY 2016 SPP/APR, the State must report whether the FFY 2016 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 2015 OSEP response

Arkansas conducts a dual collection, phone survey and administrative data mine. The administrative data mining included data from the Arkansas Department of Higher Education and Department of Workforce Services. Arkansas will continue to work with other state agencies to improve the data mining process. By expanding the number of agencies participating in the collection the representativeness should improve. The ADE has established data

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sharing agreements for the data collection with the following agencies: Arkansas Department of Human Services, Arkansas Department of Higher Education, Arkansas Department of Career Education, Arkansas Department of Corrections, Arkansas Department of Workforce Services, and the Arkansas Department of Community Corrections.

The State will continue to look at different data collection options as part of the ADE's strategic plan which includes goals around graduation and post-school outcomes.

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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	2014
Target ≥			51.00%	52.00%	53.00%	54.00%	55.00%	55.00%	55.00%	56.96%	58.92%
Data		50.00%	100%	100%	87.50%	100%	76.67%	78.95%	80.00%	86.96%	3.45%

FFY	2015
Target ≥	60.88%
Data	2.70%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	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 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/1/2017	3.1(a) Number resolution sessions resolved through settlement agreements	n	null
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/1/2017	3.1 Number of resolution sessions	16	null

FFY 2016 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2015 Data*	FFY 2016 Target*	FFY 2016 Data
2	16	2.70%	62.84%	12.50%

Actions required in FFY 2015 response

none

OSEP Response

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**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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	2014
Target ≥			72.50%	73.00%	73.50%	74.00%	75.00%	75.00%	75.00%	73.60%	75.56%
Data		52.00%	80.00%	75.00%	91.66%	88.24%	100%	72.73%	83.33%	97.06%	100%

FFY	2015
Target ≥	77.52%
Data	92.31%

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

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	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 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	2.1.a.i Mediations agreements related to due process complaints	n	null
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	2.1.b.i Mediations agreements not related to due process complaints	n	null
SY 2016-17 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/1/2017	2.1 Mediations held	n	null

FFY 2016 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 2015 Data*	FFY 2016 Target*	FFY 2016 Data
0	3	3	92.31%	79.48%	100%

Actions required in FFY 2015 response

none

OSEP Response

The State reported fewer than ten mediations held in FFY 2016. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

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**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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: 2016

FFY	2013	2014	2015	2016
Target ≥			45.60%	47.20%
Data	45.65%	44.00%	45.60%	62.27%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	63.77%	66.27%

Key:

Explanation of Changes

See Attachment

Description of Measure

See Attachment for complete SSIP Phase III

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.

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.

FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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.

Phase III submissions should include:

- Data-based justifications for any changes in implementation activities.
- Data to support that the State is on the right path, if no adjustments are being proposed.
- Descriptions of how stakeholders have been involved, including in decision-making.

A. Summary of Phase 3

1. Theory of action or logic model for the SSIP, including the SiMR.
2. The coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies.
3. The specific evidence-based practices that have been implemented to date.
4. Brief overview of the year's evaluation activities, measures, and outcomes.
5. Highlights of changes to implementation and improvement strategies.

SEE ATTACHMENT FOR PHASE III

B. Progress in Implementing the SSIP

1. Description of the State's SSIP implementation progress: (a) Description of extent to which the State has carried out its planned activities with fidelity—what has been accomplished, what milestones have been met, and whether the intended timeline has been followed and (b) Intended outputs that have been accomplished as a result of the implementation activities.
2. Stakeholder involvement in SSIP implementation: (a) How stakeholders have been informed of the ongoing implementation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP.

C. Data on Implementation and Outcomes

1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan: (a) How evaluation measures align with the theory of action, (b) Data sources for each key measure, (c) Description of baseline data for key measures, (d) Data collection procedures and associated timelines, (e) [If applicable] Sampling procedures, (f) [If appropriate] Planned data comparisons, and (g) How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements
2. How the State has demonstrated progress and made modifications to the SSIP as necessary: (a) How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR, (b) Evidence of change to baseline data for key measures, (c) How data support changes that have been made to implementation and improvement strategies, (d) How data are informing next steps in the SSIP implementation, and (e) How data support planned modifications to intended outcomes (including the SiMR)—rationale or justification for the changes or how data support that the SSIP is on the right path
3. Stakeholder involvement in the SSIP evaluation: (a) How stakeholders have been informed of the ongoing evaluation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing evaluation of the SSIP

D. Data Quality Issues: Data limitations that affected reports of progress in implementing the SSIP and achieving the SiMR

1. Concern or limitations related to the quality or quantity of the data used to report progress or results
2. Implications for assessing progress or results
3. Plans for improving data quality

E. Progress Toward Achieving Intended Improvements

1. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up
2. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects
3. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SiMR
4. Measurable improvements in the SiMR in relation to targets

F. Plans for Next Year

1. Additional activities to be implemented next year, with timeline
2. Planned evaluation activities including data collection, measures, and expected outcomes
3. Anticipated barriers and steps to address those barriers
4. The State describes any needs for additional support and/or technical assistance

OSEP Response

Required Actions

**FFY 2016 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
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

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