

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2020**

Arkansas



PART B DUE February 1, 2022

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

Additional information related to data collection and reporting

In the 2020-2021 school year, Arkansas' educational system was comprised of 260 school districts and open enrollment charter schools, two state agencies (Arkansas School for the Blind and Arkansas School for the Deaf), 15 education cooperatives, and two state agencies not within the Arkansas Department of Education's Division of Elementary and Secondary (DESE) purview, for a total of 279 programs.

In the 2019-2020 school year, Arkansas' educational system was comprised of 261 school districts and open enrollment charter schools, two state agencies (Arkansas School for the Blind and Arkansas School for the Deaf), 15 education cooperatives, and two state agencies not within the Arkansas Division of Elementary and Secondary (DESE) purview, for a total of 280 programs.

Number of Districts in your State/Territory during reporting year

279

General Supervision System:

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

The DESE's Office of Special Education Unit (OSE) is composed of the following sections:

The Director's Office of the OSE 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 OSE is committed to improving educational results for students with disabilities through statewide leadership and support to educators, students, families, and other stakeholders. The OSE 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.

The Dispute Resolution Section (DRS) is responsible for managing the due process hearing system and the complaint investigation system, as outlined under Arkansas Special Education and Related Services: Procedural Requirements and Program Standards. 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 with parents and districts to resolve conflicts at the lowest possible level.

The Monitoring and Program Effectiveness (MPE) and Non-Traditional Programs sections monitor special education programs for compliance with state and federal regulations and provide technical assistance for program improvement. The 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.

The Curriculum and Assessment staff works with the other DESE units and LEAs to ensure that students identified as needing special education and related services have access to the general curriculum and are included in statewide and district-wide assessments.

The State Program Development Section of the OSE assists public agencies such as schools, institutions of higher education, state and private agencies, parents, and the general public in the development of programs and training to improve services for students with disabilities.

The State Personnel Development Grant (SPDG) works, in collaboration with other DESE Units, to restructure and implement Arkansas' Response to Intervention (RTI) model using evidence-based personnel development to implement a multi-tiered system of support for behavior and academics, with a focus on literacy.

The Funding and Finance Section 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 local education agencies in developing all grant applications and budgets pertaining to IDEA federal, state and local funds. Furthermore, the OSE has implemented a risk-based system of fiscal monitoring that utilizes a standard protocol to establish risk. Districts are monitored by the MPE section and Funding and Finance section simultaneously.

The Arkansas IDEA Data & Research Office provides data management, analysis, technical assistance, and research for the enhancement of the DESE's general supervision mandate. Working in partnership with OSE and other divisions within the agency, the Office ensures standardized data collection procedures for federal reporting, state and district level data analysis, and public dissemination of program effectiveness data, including the Annual Performance Report.

How the Components Function as a General Supervision System: The 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. Staff work collaboratively with other sections within the OSE as well as DESE in carrying out the MPE section's overall supervision of the provision of special education and related services. These partnerships allow the MPE Area Supervisors to identify monitoring and technical assistance needs, and assist LEAs in developing and implementing specialized staff in-service and personnel development.

The State Program Development Section partners with Curriculum and Assessment, Dispute Resolution, MPE, 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 OSE and other divisions, 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 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.

Collectively, the OSE works to correct noncompliance and improve performance. When an LEA/ESC or other public agency has 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 OSE 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 timelines for review, to gauge the effectiveness of their implementation of corrective actions. The OSE 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 OSE staff. Upon the receipt of all requested evidence cited in a CAP and verification by the OSE staff of full correction, the OSE will notify the public agency of its compliance status.

The correction of noncompliance, from a hearing decision or compliant, 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 OSE 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.

Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.

The State provides 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 on 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.

IDEA Data & Research provided professional development opportunities to LEAs focusing on data reporting, data use, and building data literacy capacity. Other 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 involved in a multi-year shift from a student-specific state support model to a capacity-building model. Much of the technical assistance work has focused on the principles of implementation and improvement science to enact sustainable evidence-based practices to meet the needs of students with disabilities.

An online referral system, Central Intake and Referral/Consultant Unified Intervention Team (CIRCUIT), continues to be 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. When student-specific requests are initiated, technical assistance efforts to support LEAs are delivered with an intentional focus on growing the capacity of the LEA to meet the needs of that student and future students with similar needs. 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 OSE. Special Education Consultant Teams that are deployed through CIRCUIT are inclusive of the following:

- Arkansas Transition Services (ATS): ATS serves all 75 counties in Arkansas in an effort to improve transition outcomes for students with disabilities. The mission of ATS 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 work of the BSS focuses on the development of district-level behavior teams trained in legally defensible Functional Behavior Assessments (FBA) and development of Behavior Intervention Plans (BIP). Regional training and onsite coaching is provided to LEAs through a multi-year project called BX3. In addition, behavior support consultants provide regional, district, school, and individual training and assistance. These services may include assistance with behavior plan development and programming, essential principles of behavior, behavior data collection, and essential behavior strategies.

- 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.

- Brain Injury (BI) Services: BI Services include consulting with LEAs on intervention strategies that assist in managing student behavior, enhancing academic achievement of low performing students, assessment and identification of students potentially in need of special education services, and the provision of staff development to school faculty and administrators regarding BI. Brain injury services focus on the integration of interdisciplinary supports needed for students with brain injuries.

- 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.

- Easterseals Outreach Program and Technology Services (ESOPTS): ESOPTS 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 providing curriculum, support, supplementary aides, and services for students with complex learning needs (significant and/or multiple developmental needs). ESOPTS also provides services for educational Autism Spectrum Disorder (ASD) identification and augmentative/alternative communication, psycho-educational assessments, assistive technology loan equipment, student-centered planning, and addressing specific needs of individual students or an entire classroom.

Two major ESOPTS projects are capacity-building projects. Project Prepare focuses on the development of district-level teams that identify and drive change around quality indicators for special education and related services. The Arkansas Assistive Technology Team Building Project incorporates principles of implementation science and distributed leadership to build district-wide assistive technology (AT) teams that install and sustain evidence-based practices for AT consideration, assessment, and implementation.

••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.

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.

The State provides professional development to LEAs around compliance and performance indicators through a variety of mechanisms based on established needs. Each section of the OSE and its funded consulting groups provide professional development around systemic implementation of high-leverage and evidence-based practices, specific issues, and program improvement in an effort to build capacity within each LEA.

The consultant teams include:

••IDEA Data & Research provided professional development opportunities to LEAs focusing on data reporting, data use, and building data literacy capacity.

••Arkansas Transition Services (ATS) serves all 75 counties in an effort to improve transition outcomes for students with disabilities. ATS staff provide technical assistance, training, and consultations to special education teachers and other relevant staff, as well as to various agency personnel.

••The State Personnel Development Grant works with districts and education service cooperatives to support Response to Intervention (RTI) implementation and maximize all students' literacy and behavioral outcomes, especially students with disabilities. The SPDG directly supports and builds upon the RTI Arkansas initiative, which is a multi-component, general education model designed to support students academically and behaviorally.

••The Arkansas Behavior Support Specialists (BSS) provide regional, district, school, and individual student training and support. 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 the least restrictive environment (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 Education Services for the Visually Impaired (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.

••Brain Injury (BI) 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 BI.

••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. Additionally, 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 pathologists using a written proposal process.

••Children and Youth with Sensory Impairments (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.

••Easterseals Outreach Program and Technology Services (ESOPTS) 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. ESOPTS 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. Professional development is offered in a variety of formats, including online and onsite.

••Educational Audiology Resources for Schools (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. The EARS program offers an online channel that LEAs may access for information on best practices for working with children with hearing loss.

••The OSE works collaboratively with educational interpreters, the districts who employ them, and the University of Arkansas at Little Rock's Interpreter Education Program. The OSE provides targeted technical assistance workshops for interpreters to assist them in reaching the qualification standard outlined in the Arkansas Standards for Educational Interpreters and Transliterators, 4th edition. The OSE supports educational interpreters working in

Arkansas public schools by providing opportunities for them to take the Educational Interpreter Performance Assessment at no cost in order to obtain the minimum required standards.

- University of Arkansas at Little Rock, Bowen School of Law Mediation Project has trained professional mediators to 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.

- The OSE continues to be involved in interagency collaborations to enhance the provision of special education services for children with disabilities.

- The OSE works closely with the DESE Student Assessment Unit and the DESE Curriculum and Instruction Unit to ensure all students have access to and progress in the general education curriculum with meaningful participation in statewide assessments.

- Medicaid in the Schools (MITS) services include training and technical assistance to support LEAs in tele-practice, electronic billing and program management, policy and program development, initiation/development of new revenue streams, and collection/management/and analysis of data.

Broad Stakeholder Input:

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

In Spring 2021, Arkansas began developing a plan of action to establish a representative broad stakeholder group from across the state to compliment the work of the Special Education Advisory Council. Invitations were sent to 46 individuals of which many have dual roles. Only one person declined the invitation. This select stakeholder group represented the five regions of the state, multiple race/ethnicities and included both males and females. Further the representation was comprised of 12 parents, 4 related service providers, 8 early childhood providers, 2 early childhood coordinators, 12 district special education supervisors, 7 general/special education teachers, 4 personnel from state agencies, and 4 superintendents/principals. This stakeholder group, as well as advisory members, DESE OSE staff and TA providers, participated in a series of webinars on indicator target setting and improvement activities. Each session was split into breakout rooms so the groups were small enough to encourage discussion.

Each virtual session was scheduled for 1.5 hours and began with an overview of the indicator(s) being discussed. Stakeholders were provided data sheets which included the historical data for the indicator(s) based on the new measurements. The data sheets also provided proposed target setting methodologies and the projected targets for each methodology. Stakeholders were asked to select the methodologies the State could apply. Each data set also had a set of questions to guide the discussion of baseline and target setting. The baseline guiding questions were: 1) What year do you think is appropriate for a baseline year? 2) What is the justification for selecting that year? Target setting guiding questions asked stakeholders to look at the different methodologies presented and tell us: 1) Which methodology do you believe provides a realistic projection? 2) Are there any methodologies that would not exceed the baseline year? 3) Is there a different methodology that you would like to see applied such as a flat rate? 4) Could we apply a methodology differently than presented? Such as adding .79 to the baseline for average difference and showing incremental increases over the years. 5) Other discussion(s) around the indicator.

The first virtual session focused on graduation and drop out. The participants were split into two breakout groups. Graduation was discussed and then the groups were brought back together for reporting out on their thoughts and discussions. Then the same process occurred for dropout. For each virtual stakeholder meeting the same process was followed. The second virtual session focused on assessment. The stakeholder group was split into two and four breakout sessions were conducted to cover all four sub indicators. The third virtual session had two breakout groups, one for school age indicators, 5, 8, and 14 and one for early childhood indicators 6, 7, and 8.

The State Special Education Advisory Council was a second group of stakeholders who were involved in providing target and improvement activities. The State Advisory meetings held in April, July, and October 2021, and January 2022 focused on setting new targets and discussion of improvement strategies. The Advisory Council representation includes: Parents (10), Adult Corrections, Advocates (2), AR Rehabilitation Services (2), Career & Technical Education (2), Center for Exceptional Families (PTI), Foster Care, Higher Education, Juvenile Corrections, LEA Special Education Supervisors, McKinney-Vento Administrator, Teachers (4), Private School, and Public Charter Schools. During these meetings, the council members and any public participants were provided updates on the previously held stakeholder input sessions, compliance indicators were discussed, dispute resolution indicators, and the SSIP. Additionally, information was provided on how the local APR profiles would be affected by the new measurements, especially Indicators 1 & 2. Advisory topics were: 1) April 2021: overview of the SPP/APR package measurement table. 2) July 2021: overview of stakeholder engagement meetings and input on baseline and target setting for Indicators 1, 2, 3, 4, 5, 6, and 17. 3) October 2021: discussed the effect of the new graduation and drop out measurements on the local APRs; Indicator 3: Assessment was presented with the 2021 assessment data; compliance indicators, and Indicator 17. 4) January 2022: presentation of the APR with the targets set for the next six years and any feedback which could lead to changes for the final submission.

Opportunities were also provided at four state conferences. The ADE Summit in June 2021 had two sessions. The first was on Indicators 1 and 2 while the second was on Indicator 6. Ten participants provided feedback and represented district administrators (2), special education administrators (7), early childhood coordinators (3), teachers (2) and parents (5). For each session participants were provided handouts with datasets and guiding questions. An overview of the data was presented and the questions discussed. Stakeholders wrote their comments on the handout and returned them at the end for compilation. The handout also had a few questions about demographics and group/organization affiliation(s).

The Arkansas School-Based Therapy Conference was held in September 2021 with 220 participants, and the Arkansas Collaborative Consultants Fall Convening was held in October 2021 with 84 participants. At both meetings, components of the Indicator 17: SSIP improvement strategies were discussed and feedback solicited on the messaging, inclusion of initiatives and overall direction of the SSIP. Feedback was provided on the SSIP Theory of Action, and as a result, Universal Design for Learning will be added as an initiative of focus within the coherent system of support.

The LEA Academy was held in October 2021. This conference is attended primarily by special education administrators and early childhood coordinators. One session at the LEA Academy focused on Indicator 3: Assessment. There were approximately 25 special education administrators in attendance and 15 provided feedback. The data presented included the 2020/21 statewide assessment results. Participants received a copy of the historical data, two methodologies for target setting, along with the guiding questions. They had the option to submit comments/feedback through a google form as well as returning the handout.

To gather more family input, a special stakeholder session was held with a group of parents organized by one of State's PTI centers, in December 2021. Although many families were invited to participate only three were available to attend. However, the information shared was also sent to the families who were unable to attend that day with instructions on how they could provide feedback. We provided an overview of previous stakeholder input results on those indicators with major changes and provided them the opportunity to provide additional feedback on the final targets and activities. Besides discussing Indicator 17 at each quarterly Advisory Council meeting, there was a separate Indicator 17 SSIP stakeholder input session with the school districts/buildings participating in the project in January 2022. This session focused on SSIP updates surrounding state initiatives, and the State-

identified Measurable Result (SiMR) targets through FFY2025.

The current state initiatives involved with inclusive practices and outlined in the SSIP theory of action are being scaled to include greater numbers of educators and administrators across Arkansas, and to build capacity for job-embedded coaching supports. As more educators are trained in how to implement major initiatives, it is anticipated that progress towards the targets outlined in the SPP/APR will be accelerated.

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

NO

Number of Parent Members:

31

Parent Members Engagement:

Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.

Beyond the Special Education Advisory Council, the broad stakeholder group from across the state, included 12 parent/family/caregiver representatives. These individuals comprised 26.66% of the total representation. Parent members of the broad stakeholder group included local and statewide advocacy members, school district personnel, related service providers, and advisory council members participated in a series of webinars on indicator target setting and improvement activities. Each webinar session was split into breakout rooms so the groups were small enough to encourage discussion. Parent representatives also participated in two face-to-face state conferences as well as a virtual conference of related service providers.

In partnership with The Center For Exceptional Families (TCFEF) an Arkansas PTI center), a statewide webinar was held to discuss the major changes to the SPP/APR. The session was facilitated by the director of TCFEF and the presenters were the state's data manager and SSIP coordinator. The discussion covered Indicators 1, 2, 3, 6, 17 and included the historical data with various target setting methodologies for new targets through FFY 2025. Participants were provided the results of previous stakeholder input sessions and agreed with the proposed target methodologies. Feedback from this parent specific session was that they appreciated how the state was taking COVID effects into account when selecting baseline year and future targets.

In all sessions, virtual and in-person, stakeholders were provided data sheets which included the historical data for the indicator(s) based on the new measurements. The data sheets also provided proposed target setting methodologies and the projected targets for each methodology. Stakeholders were not asked to set the targets, but to recommend methodologies the State could apply. Each data set also had a set of questions to guide the discussion of baseline and target setting. The baseline guiding questions were: 1) What year do you think is appropriate for a baseline year? 2) What is the justification for selecting that year? Target setting guiding questions asked stakeholders to look at the different methodologies presented and tell us: 1) Which methodology do you believe provides a realistic projection? 2) Are there any Methodologies that would not exceed the baseline year? 3) Is there a different methodology that you would like to see applied such as a flat rate? 4) Could we apply a methodology differently than presented? Such as adding .79 to the baseline for average difference and showing incremental increases over the years. 5) Other discussion(s) around the indicator.

Activities to Improve Outcomes for Children with Disabilities:

The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.

DESE-OSE engaged diverse groups of families through multiple activities intended to improve outcomes for students with disabilities.

Over the course of twelve weeks, from January through March of 2020, DESE partnered with the Office for Innovation in Education at the University of Arkansas to coordinate and conduct twenty-three digital groups and two one-on-one sessions using Zoom technology. Six hundred stakeholders supporting education were invited to participate in the digital stakeholder groups and over 150 individuals agreed to participate. While the majority of stakeholders were educators, some educators who are also parents of students with disabilities were represented in this forum. The focus groups sought stakeholder feedback on essential components needed to re-conceptualize the future of professional learning for educators in Arkansas, including the need to be purposeful with aligning family, which helped to also inform the process of SPP/APR.

In June of 2020, DESE-OSE partnered with The Center For Exceptional Families (TCFEF), the OSEP funded Parent Training and Information Center for Arkansas, to engage 15 diverse families through a structured interview process to seek feedback on principles that promote positive interactions between educators and families. Heterogeneity of representation was accomplished with 25% of families representing minority backgrounds, including representation from families whose primary language is not English. Different geographic areas across Arkansas were represented with a broad range of educational attainments and socioeconomic statuses. Feedback from the interviews was utilized to guide conversations during engagement opportunities around the SPP/APR, Indicator 17, and will be used for future training on High-Leverage Practices for Inclusive Classrooms.

Representatives from the DESE-OSE's technical assistance arm, known as the Arkansas Collaborative Consultants, were included in multiple stakeholder meetings regarding the SPP/APR. Each consultant group assists with the development and implementation of general, targeted and intensive supports for educators and parents through activities that include websites with parent resources containing the latest research-based information. All technical assistant groups have intentionally embedded High Leverage Practices, including HLP 3 (Collaborating with Families to Support Student Learning and Secure Needed Services) into their professional learning opportunities.

Soliciting Public Input:

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

The mechanism was through the establishment of a core stakeholder group, state advisory council meetings, statewide conferences, PTI lead webinar specifically for parents, and in-person meetings and webinar specific to SSIP schools. Other than the two state conferences, most sessions were held virtually. Invitations were sent out in early March 2021 and the first sessions began in April with the State Advisory Council. Sessions in 2021 were held in April, May, June, July, August, October and January 2022.

Data sheets were provided to participants for virtual and on-site meetings. Notetakers were in each breakout room capturing the discussion and feedback. On-site the feedback form handed out to participants and returned to the presenter to compile the feedback. In addition, some meetings included a google form which would be filled out during the session or after. More information about the stakeholder sessions is provided under the Broad Stakeholder Input section.

During the meetings participants conducted an analysis of year to year changes and the different methodologies which could be applied. There were discussions about current and future state initiatives and how those initiatives could effect the data and student outcomes. One example of the discussions is the implementation of the alternate pathway to graduation for students who participate in the alternate assessment in high school. The first cohort of students eligible to graduate under the pathway standards will occur in the 2022-23 school year. This initiative, while positive for the most

significantly cognitively impaired students, it does count against the State's graduation percentage for Indicator 1. Another Initiative stakeholders discussed was the State's implementation of RISE and Science of Reading which will not only have a positive effect on student outcomes but also the APR indicator 3.

Additional opportunities for core stakeholder input and discussions on the State's progress will occur quarterly at the Advisory Council meetings, but also on the monthly LEA calls and during various conferences such as the ADE Summit and the Special Education LEA Academy.

Making Results Available to the Public:

The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.

A summary of each stakeholder meeting as well as participation representation and feedback will be posted on the special education public reporting web page by March 31, 2022.

The website is: <https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting>

Reporting to the Public

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

<https://sites.ed.gov/idea/spp-apr-letters>

<https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting>

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

The State's IDEA Part B determination for both 2021 and 2022 is Needs Assistance. In the State's 2022 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

1 - Indicator Data

Historical Data¹

Baseline Year	Baseline Data
2018	87.56%

FFY	2015	2016	2017	2018	2019
Target >=	85.00%	85.00%	85.10%	85.91%	86.72%
Data	81.89%	84.29%	83.80%	84.61%	82.6% ²

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	88.00%	88.00%	88.00%	88.00%	88.00%	88.00%

Targets: Description of Stakeholder Input

Arkansas selected the 2017-18 618 exiting data for the baseline year. since this indicator uses lag data the baseline year represents the FFY in which it would have been reported as part of the APR, FFY 2018.

Through various stakeholder input sessions, the stakeholders wanted an average of the three years prior to 2019-20 because of the effects from the pandemic. School year 2017-18 best represented the three year average. Discussions were held around using a standard deviation, moving average, annual percentage point change or selecting a flat rate similar to what the state had under NCLB. The final decision was to set a flat rate of 88% as the target for all years.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,319
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	59

¹ Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator.

² Percentage blurred due to privacy protection

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	9
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	266

FFY 2020 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3,319	3,653	82.6% ³	88.00%	90.86%	Met target	N/A

Graduation Conditions

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

Students graduating from an Arkansas Public School or Public Charter School must meet or exceed the following state minimum 22 graduation credit requirements as adopted by the Arkansas State Board of Education.

English Language Arts - 4 credits

** English 9 -12

Mathematics - 4 credits

** Algebra I; Geometry; ADE Approved Mathematics; ADE Approved Mathematics or Computer Science Flex

Science - 3 credits

** ADE approved biology; ADE approved physical science; ADE approved third science or Computer Science Flex

Social Studies - 3 credits

**US History; World History; Civics; Economics and Personal Finance

Oral Communication - 1/2 credit

Physical Education - 1/2 credit

Health & Safety - 1/2 credit

Fine Arts - 1/2 credit

Career Focus or Additional Content – 6 credits

Additional Graduation Requirements

** Students must complete a digital course for credit – A.C.A. § 6-16-1406

** Students must earn a credit in a course that includes personal & family finance in grades 9-12 – A.C.A. § 6-16-135

** Students must pass the Arkansas Civics' Exam – A.C.A. § 6-16-149

** Students must complete hands-on CPR training – A.C.A. § 6-16-143

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

NO

Provide additional information about this indicator (optional)

COVID had a direct effect on the indicator since the data is from the 2019/20 school year. In Arkansas, school buildings were closed in late March 2020 and instruction changed to virtual learning. However, most districts were not prepared for the change because they had no virtual instruction capability. The state took steps to ensure students had access to internet, but some rural areas still struggled with broad internet access and the library systems and community businesses became the hubs for families and students to access the internet. Some locations could only provide access in their parking lots because the businesses (such as restaurants) were closed to inside customers.

Many schools based end of year grades on March 2020 and special education students who may have returned for a 5th year of high school decided to graduate based on credits and forego additional supports that may have been in their IEP. Arkansas fully re-opened schools in August 2020. Districts submitted plans which layout their process for mitigating the pandemic and the switching to virtual when needed. Most districts provided a virtual, blended, and on-site option for families.

1 - Prior FFY Required Actions

None

1 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

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

³ Percentage blurred due to privacy protection

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

Measurement

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

Instructions

Sampling is not allowed.

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

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

OPTION 1:

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

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

OPTION 2:

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

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

Options 1 and 2:

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

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

2 - Indicator Data

Historical Data⁴

Baseline Year	Baseline Data
2018	10.69%

FFY	2015	2016	2017	2018	2019
Target <=	2.54%	2.29%	2.14%	1.98%	1.82%
Data	1.94%	1.60%	1.88%	1.62%	1.65%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%

Targets: Description of Stakeholder Input

Arkansas selected the 2017-18 618 exiting data for the baseline year. Since this indicator uses lag data the baseline year represents the FFY in which it would have been reported as part of the APR, FFY 2018.

Through various stakeholder input sessions, the stakeholders wanted to align the drop out baseline year with graduation. Target setting discussions were held around using a standard deviation, moving average, annual percentage point change or selecting a flat rate. The final decision was to set a

⁴ Prior to the FFY 2020 submission, the State used a different data source to report data under this indicator.

flat rate of 10% as the target for all years. Ten percent is the average rate for the past few years prior to the pandemic. In addition, by setting the drop out targets to 10% and the graduation target to 88%, this allows Arkansas to account for the future alternate pathway graduates in the remaining 2% along with those students reaching maximum age and graduating with a certificate. The first cohort of pathway graduates will occur in 2022-23 school year.

Please indicate the reporting option used on this indicator

Option 1

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,319
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	59
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	9
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	266

FFY 2020 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
266	3,653	1.65%	10.00%	7.28%	Met target	N/A

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

Students are considered a drop out if the district has no documentation (request for records) indicating that the student enrolled in another Arkansas school district, moved to another state or out of country, or enrolled in a private school. A student may also be considered a drop out if they are absent for more than ten school days without notice. If documentation is received, such as a request for records, the withdrawal code can be updated in the student management system. Students who leave prior to graduation to pursue the General Educational Development test leading to a General Equivalency Diploma (GED), are also considered drop outs.

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

NO

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

Provide additional information about this indicator (optional)

Arkansas changed from option 2 to option 1 and selected the 2017-18 618 exiting data for the baseline year.

COVID had a direct effect on the indicator since school buildings closed in March 2020 and instruction changed to virtual learning. Since many districts based end of year grades on students status in March 2020 there was less of an opportunity for students to dropout.

2 - Prior FFY Required Actions

None

2 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	97.85%
Reading	B	Grade 8	2020	95.28%
Reading	C	Grade HS	2020	93.00%
Math	A	Grade 4	2020	98.04%
Math	B	Grade 8	2020	95.75%
Math	C	Grade HS	2020	93.85%

Targets

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

Targets: Description of Stakeholder Input

During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to maintain the 95% participation requirement of ESEA for all grade levels and subject matters across the years of the SPP. The baseline is most recent assessment data, school year 2020-21.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

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

Date:

03/30/2022

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	5,403	5,087	9,282
b. Children with IEPs in regular assessment with no accommodations	4,970	4,539	8,043
c. Children with IEPs in regular assessment with accommodations	3	8	27
d. Children with IEPs in alternate assessment against alternate standards	314	300	562

Data Source:

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

Date:

03/30/2022

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	5,403	5,086	9,284
b. Children with IEPs in regular assessment with no accommodations	4,975	4,539	8,070
c. Children with IEPs in regular assessment with accommodations	9	32	84
d. Children with IEPs in alternate assessment against alternate standards	313	299	559

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

FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	5,287	5,403		95.00%	97.85%	N/A	N/A
B	Grade 8	4,847	5,087		95.00%	95.28%	N/A	N/A
C	Grade HS	8,632	9,282		95.00%	93.00%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	5,297	5,403		95.00%	98.04%	N/A	N/A
B	Grade 8	4,870	5,086		95.00%	95.75%	N/A	N/A
C	Grade HS	8,713	9,284		95.00%	93.85%	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

Arkansas's publicly available assessment data can be found at <https://myschoolinfo.arkansas.gov/>
<https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting> (scroll to bottom of page)

Provide additional information about this indicator (optional)

A new baseline was established for this indicator due to the changes in the APR measurement. Additionally, Arkansas test students in both grades 9 and 10; therefore, the HS numbers appear higher than expected since it represents both grade levels.

Arkansas's online testing platform provide ALL students with accommodation choices. Therefore, the accommodations specific to special education beyond the ALL accommodations has resulted with fewer number of SWD having a personal need profiles indicating specific special education accommodations.

For the 2020-21 school year Arkansas schools were open and using multiple instructional methods. Statewide, Arkansas met the 95% participation requirement of ESSA. Although some grade groups may have been lower, there is no evidence that COVID directly had an effect on Indicator 3A.

3A - Prior FFY Required Actions

None

3A - OSEP Response

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

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

3A - Required Actions

Indicator 3B: Proficiency for Children with IEPs (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	*1
Reading	B	Grade 8	2020	*1
Reading	C	Grade HS	2020	*1
Math	A	Grade 4	2020	*1
Math	B	Grade 8	2020	*1
Math	C	Grade HS	2020	*1

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	*1	6.91%	7.13%	7.36%	7.59%	7.81%
Reading	B >=	Grade 8	*1	4.73%	5.01%	5.27%	5.55%	5.83%
Reading	C >=	Grade HS	*1	3.71%	3.85%	3.99%	4.14%	4.29%
Math	A >=	Grade 4	*1	14.57%	14.90%	15.24%	15.57%	15.91%
Math	B >=	Grade 8	*1	3.83%	4.11%	4.40%	4.69%	4.98%
Math	C >=	Grade HS	*1	2.71%	2.83%	2.96%	3.08%	3.21%

¹ Data suppressed due to privacy protection

Targets: Description of Stakeholder Input

During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to establish the baseline using the most recent assessment data, school year 2020-21. Additionally, stakeholder feedback.

recommended increasing the targets for each grade and subject by one standard deviation by FFY 2025. Standard deviations were calculated for each grade and subject using current and historical data. The standard deviation(s) were proportionately applied to establish the year to year increases from baseline for each grade level and subject matter.

FFY 2020 Data Disaggregation from EDFacts**Data Source:**

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

Date:

03/03/2022

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	4,973	4,547	8,070
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	332	203	287
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	*1	*1	*1

Data Source:

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

Date:

03/03/2022

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	4,984	4,571	8,154
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	709	162	209
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	*1	*1	*1

FFY 2020 SPP/APR Data: Reading Assessment

¹ Data suppressed due to privacy protection

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	*1	4,973		*1	*1	N/A	N/A
B	Grade 8	*1	4,547		*1	*1	N/A	N/A
C	Grade HS	*1	8,070		*1	*1	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	*1	4,984		*1	*1	N/A	N/A
B	Grade 8	*1	4,571		*1	*1	N/A	N/A
C	Grade HS	*1	8,154		*1	*1	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

Arkansas's publicly available assessment data can be found at <https://myschoolinfo.arkansas.gov/> and <https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting>

Provide additional information about this indicator (optional)

A new baseline was established for this indicator due to the changes in the APR measurement. Additionally, Arkansas test students in both grades 9 and 10; therefore, the HS numbers appear higher than expected since it represents both grade levels.

Arkansas's online testing platform provide ALL students with accessibility features; therefore, the accommodations specific to special education beyond the ALL accessibility features has resulted with fewer number of SWD having a personal need profiles indicating specific special education accommodations. This is different than how the state has received the accommodation data in the past from the testing company.

Arkansas saw a decline in proficiency rates for all students not just those with disabilities. For the 2020-21 school year Arkansas schools were open and using multiple instructional methods. The pandemic had a direct effect on instruction and learning with approximately 2/3 of students with disabilities receiving all or some portion of their education virtually.

¹ Data suppressed due to privacy protection

3B - Prior FFY Required Actions

None

3B - OSEP Response

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

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

3B - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	30.57%
Reading	B	Grade 8	2020	15.00%
Reading	C	Grade HS	2020	11.21%
Math	A	Grade 4	2020	11.50%
Math	B	Grade 8	2020	12.04%
Math	C	Grade HS	2020	15.21%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	30.57%	32.66%	34.74%	36.83%	38.91%	40.99%
Reading	B >=	Grade 8	15.00%	17.87%	19.96%	22.05%	24.13%	26.22%
Reading	C >=	Grade HS	11.21%	16.35%	18.43%	20.52%	22.60%	24.69%
Math	A >=	Grade 4	11.50%	14.92%	18.35%	21.77%	25.20%	28.62%
Math	B >=	Grade 8	12.04%	16.30%	20.56%	24.82%	29.08%	33.33%
Math	C >=	Grade HS	15.21%	19.22%	23.24%	27.25%	31.26%	35.28%

Targets: Description of Stakeholder Input

During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to establish the baseline using the most recent assessment data, school year 2020-21. Additionally, stakeholder feedback recommended increasing the targets for each grade level and subject matter using a full or partial standard deviation. Standard deviations were calculated for each grade and subject using current and historical data. Based on the historical and current data, math targets were set to increase by 1/3 of a standard deviation by FFY 2025 for all grades. For reading language arts, fourth grade targets are set to increase by a full standard deviation by FFY 2025; eighth grade will increase by 1/2 of a standard deviation, and high school will increase by 1/4 of a standard deviation. All interim year targets were proportionately increased for grade level and subject matter, accordingly.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

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

Date:

03/03/2022

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	314	300	562
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	96	45	63

Data Source:

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

Date:

03/03/2022

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	313	299	559
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	36	36	85

FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	96	314		30.57%	30.57%	N/A	N/A
B	Grade 8	45	300		15.00%	15.00%	N/A	N/A
C	Grade HS	63	562		11.21%	11.21%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	36	313		11.50%	11.50%	N/A	N/A
B	Grade 8	36	299		12.04%	12.04%	N/A	N/A
C	Grade HS	85	559		15.21%	15.21%	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

Arkansas's publicly available assessment data can be found at <https://myschoolinfo.arkansas.gov/> and <https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting>

Provide additional information about this indicator (optional)

A new baseline was established for this indicator due to the changes in the APR measurement. Additionally, Arkansas test students in both grades 9 and 10; therefore, the HS numbers appear higher than expected since it represents both grade levels.

Arkansas's online testing platform provide ALL students with accessibility features; therefore, the accommodations specific to special education beyond the ALL accessibility features has resulted with fewer number of SWD having a personal need profiles indicating specific special education accommodations. This is different than how the state has received the accommodation data in the past from the testing company.

Arkansas saw a decline in proficiency rates for all students not just those with disabilities. For the 2020-21 school year Arkansas schools were open and using multiple instructional methods. The pandemic had a direct effect on instruction and learning with approximately 2/3 of students with disabilities receiving all or some portion of their education virtually.

3C - Prior FFY Required Actions

None

3C - OSEP Response

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

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

3C - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2018	35.74
Reading	B	Grade 8	2018	43.33
Reading	C	Grade HS	2018	38.14
Math	A	Grade 4	2018	34.34
Math	B	Grade 8	2018	41.47
Math	C	Grade HS	2018	28.71

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	35.24	34.74	34.24	33.74	33.24	32.74
Reading	B <=	Grade 8	42.75	42.20	41.65	41.10	40.55	40.00
Reading	C <=	Grade HS	37.47	36.80	36.16	35.16	34.79	34.12
Math	A <=	Grade 4	33.83	33.32	32.81	32.30	31.79	31.28
Math	B <=	Grade 8	40.12	38.77	37.42	36.07	34.72	33.37
Math	C <=	Grade HS	28.24	27.78	27.31	26.84	26.38	25.91

Targets: Description of Stakeholder Input

In preparation of the stakeholder sessions addressing assessment, the student level assessment datasets which are the source files for the EDFacts submissions, were analyzed using the new gap measurement requirement in accordance with the measurement table. The data was compiled for each year for which the statewide general assessment was ACT ASPIRE. During the stakeholder virtual and in person meetings on assessment, stakeholders reviewed gap data for prior assessment administrations and agreed to establish the baseline using school year 2018-19 pre-COVID assessment data. They believed the pre-COVID data was more of an accurate representation of the GAP than the 2020-21 assessment results. Additionally, stakeholders recommended decreasing the targets for each grade level and subject matter using a full standard deviation. Standard deviations were calculated for

each grade and subject using current and historical data. The targets are to decrease by one standard deviation by FFY 2025. The standard deviation is proportionately applied for the interim year targets.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

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

Date:

03/03/2022

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	34,760	37,536	68,812
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	4,973	4,547	8,070
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	12,595	16,185	25,822
d. All students in regular assessment with accommodations scored at or above proficient against grade level	*1	*1	*1
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	332	203	287
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	*1	*1	*1

Data Source:

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

Date:

03/03/2022

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	34,802	37,659	69,186
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	4,984	4,571	8,154
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	14,986	13,638	16,778
d. All students in regular assessment with accommodations scored at or above proficient against grade level	*1	*1	*1
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	709	162	209

¹ Data suppressed due to privacy protection

f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	*1	*1	*1
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FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	*1	*1		35.24	29.56	Met target	N/A
B	Grade 8	*1	*1		42.75	38.65	Met target	N/A
C	Grade HS	*1	*1		37.47	33.97	Met target	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	*1	*1		33.83	28.84	Met target	N/A
B	Grade 8	*1	*1		40.12	32.67	Met target	N/A
C	Grade HS	*1	*1		28.24	21.68	Met target	N/A

Provide additional information about this indicator (optional)

A new baseline was established for this indicator due to the changes in the APR measurement. Additionally, Arkansas test students in both 9 and 10 grade; therefore, the HS numbers appear higher than expected since it represents both grade levels.

Arkansas's online testing platform provide ALL students with accessibility features; therefore, the accommodations specific to special education beyond the ALL accessibility features has resulted with fewer number of SWD having a personal need profiles indicating specific special education accommodations. This is different than how the state has received the accommodation data in the past from the testing company.

Arkansas saw a decline in proficiency rates for all students not just those with disabilities. For the 2020-21 school year Arkansas schools were open and using multiple instructional methods. The pandemic had a direct effect on instruction and learning with approximately 2/3 of students with disabilities receiving all or some portion of their education virtually. The 2020-21 assessment data saw a narrowing of the gap. It is believed that this is an artificial decrease created by all students doing poorer on the statewide assessment due to the pandemic affecting instruction and learning.

Arkansas's publicly available assessment data can be found at <https://myschoolinfo.arkansas.gov/> and <https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting>

3D - Prior FFY Required Actions

None

¹ Data suppressed due to privacy protection

3D - OSEP Response

The State has established the baseline for this indicator, using data from FFY 2018, and OSEP accepts that revision.

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

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

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

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

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

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

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

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

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

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

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2016	30.14%

FFY	2015	2016	2017	2018	2019
Target <=	5.11%	30.14%	30.00%	29.50%	29.50%
Data	7.00%	30.14%	NVR	30.51%	29.51%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	29.80%	29.50%	29.20%	28.90%	28.60%	28.30%

Targets: Description of Stakeholder Input

The measurement of the indicator was discussed with stakeholders and they agreed to keep the current methodology and criteria for identifying districts as having a significant discrepancy in discipline. With the 2019-20 and 2020-21 discipline data being highly affected by the pandemic, the decision was made with stakeholder feedback to decrease the targets annually by 0.3 percentage points. There is no change to the baseline year.

FFY 2020 SPP/APR Data

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

YES

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

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Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2	19	29.51%	29.80%	10.53%	Met target	No Slippage

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

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

State's definition of "significant discrepancy" and methodology

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-OSE 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. Arkansas's minimum cell size is five (5) and districts with fewer than five students with greater than 10 days of suspension/expulsion are excluded.

The State's special education benchmark for suspension/expulsion (s/e) rate is a three-year average difference between district rates for general education students as compared to children with disabilities greater than 10 days out-of-school suspension/expulsion. The state's three-year average difference is 1.36 percentage points.

Districts are identified as having a significant difference in special education discipline for the specific year if the special education rate is 1.36 percentage points higher than the rate for general education students. The formula is presented below.

Formula: Suspension/expulsion rate for children with disabilities – Suspension/expulsion rate for general education students = Difference between Special Education & General Education students.

Provide additional information about this indicator (optional)

This indicator was highly affected by the pandemic due to schools going virtual in mid-March of 2020 reducing the number of disciplinary records from 35,000 in the previous year to 25,000. The 2020-21 data also has a significant drop in disciplinary records with more than 1/2 of the special education students in Arkansas having received their education virtually.

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

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

An LEA self-assessment tool was used for the review of policies, procedures, and practices. The self-assessment tool required a team approach and review of student level data for completion. The self-assessment tool can be accessed at <https://dese.ade.arkansas.gov/Offices/special-education/monitoring-and-program-effectiveness/monitoring-procedures>. Within the self-assessment, questions range from parent notification of removal and timeline for manifestation meetings to functional behavioral assessments and behavioral intervention plans.

Both LEAs flagged submitted their self-assessments. The staff of the Special Education MPE section reviewed the completed self-assessments and it was determined that zero districts had inappropriate policies, procedures, and practices.

If an LEA fails to comply with any requests, the State 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 not identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

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

Correction of Findings of Noncompliance Identified in FFY 2019

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

FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

As denoted above in the data table, one district failed to correct the noncompliance identified in FFY 2019

The district did not complete the requirements in the CAP within the designated time has entered into the status of long-standing non-compliance. The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the CAP, and other data to determine if additional requirements related to VI-B budgets will be enforced.

Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district will provide a copy of the special education bi-monthly leadership meeting agendas. The district must develop a Special Education Procedure and Process manual with specific review deadlines established.

The Office of Coordinated Support and Service (OCSS) provides assistance to any school district for which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

4A - Prior FFY Required Actions

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

Response to actions required in FFY 2019 SPP/APR

Only one district has findings in FFY 2019 and the district did not correct the noncompliance within a year.

The district did not complete the requirements in the CAP within the designated time and has entered into the status of long-standing non-compliance. The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the CAP, and other data to determine if additional requirements related to VI-B budgets will be enforced.

Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district will provide a copy of the special education bi-monthly leadership meeting agendas. The district must develop a Special Education Procedure and Process manual with specific review deadlines established.

The Office of Coordinated Support and Service (OCSS) provides assistance to any school district for which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.

4A - OSEP Response

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

4A - Required Actions

The State reported that noncompliance identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was not corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2021 SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	0.00%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	NVR	0.38%	0.38%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 SPP/APR Data

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

YES

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

21

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1	0	259	0.38%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

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

In 2019-2020, 19 programs were excluded because they have no comparative general education population and two districts were excluded because their child count was less than 40.

A number of districts were excluded for a particular race/ethnicity because the child count had less than 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 4.00 (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 of discipline policies, procedures, and practices

Provide additional information about this indicator (optional)

Indicator 4B uses data from the 2019-2020 school year and the COVID impact on the last two months of the school year resulted in approximately 10,000 fewer special education disciplinary records. Arkansas school buildings were open during the 2020-21 school year and notification of required actions occurred as usual.

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

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

Using the self-assessment tool, this past year Arkansas had zero districts identified as having inappropriate policies, procedures, and practices related to race within disciplinary actions. The self-assessment tool required a team approach and review of student level data for completion.

The one LEA which the State identified in 2019-20 as having a Significant Discrepancy by Race/Ethnicity, completed a self-assessment of policies, procedures, and practices related to disciplinary actions. The State reviewed the LEA's self-assessment procedural safeguards related to discipline, functional behavior assessments, positive behavioral supports, and intervention planning as well as staff training. When necessary, the LEA was contacted for clarification and directed to resubmit. The State verified the LEA's self-assessment through desk audits and 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.

The Disproportionality 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>

If an LEA fails to comply with any requests, the State 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 not identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

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

Correction of Findings of Noncompliance Identified in FFY 2019

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

FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

There was one district found to have non-compliance in FFY 2019 and they did not correct their non-compliance within one-year.

The district did not complete the requirements in the CAP within the designated time has entered into the status of long-standing non-compliance. The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the CAP, and other data to determine if additional requirements related to VI-B budgets will be enforced.

Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district will provide a copy of the special education bi-monthly leadership meeting agendas. The district must develop a Special Education Procedure and Process manual with specific review deadlines established.

The Office of Coordinated Support and Service (OCSS) is to provide assistance to any school district for which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

4B - Prior FFY Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. The State must demonstrate, in the FFY 2020 SPP/APR, that the districts identified with noncompliance in FFY 2019 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 SPP/APR

There was one district found to have non-compliance in FFY 2019 and they did not correct their non-compliance within one-year.

The district did not complete the requirements in the CAP within the designated time has entered into the status of long-standing non-compliance. The DESE-OSE issued a letter to the district informing them of the status and outlining next required corrective actions, sanctions, or enforcement actions. The actions included a timeline for check-in and completion. DESE-OSE reviews the reasons for the non-compliance, the overall status and progress on the CAP, and other data to determine if additional requirements related to VI-B budgets will be enforced.

Required actions for the district included submitting: the district MDR protocol, a copy of the training on the MDR protocol for DESE-OSE approval prior to training all district staff, a copy of the Behavior Intervention training for prior approval before training all district staff; and a copy of PBIS training for prior approval before training all district staff. The district is required to participate in monthly status update calls with DESE and the universal support LEA monthly calls from the DESE-OSE. The district will provide a copy of the special education bi-monthly leadership meeting agendas. The district must develop a Special Education Procedure and Process manual with specific review deadlines established.

The Office of Coordinated Support and Service (OCSS) is to provide assistance to any school district for which the Division of Elementary and Secondary Education (DESE) has assumed administrative authority under the laws of the State of Arkansas, one that has been classified by the State Board of Education as a school district in Academic, Fiscal, or Facilities Distress, or a district identified for level 4 or 5 support as noted in Act 930 of 2017. The district in long-standing non-compliance has support from the OCSS team, which includes a Special Education Leadership Development Coach and a State Behavioral Coach. OCSS is included in the monthly check-in support calls with the district and offers consultation regarding required PD and manual development.

4B - OSEP Response

4B- Required Actions

The State reported that noncompliance identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. §300.170(b) was not corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2021SPP/APR, that it has verified that each district with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2021SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A	2019	Target >=	57.89%	59.85%	61.81%	63.77%	56.94%
A	56.94%	Data	52.68%	53.08%	53.34%	54.32%	56.94%
B	2019	Target <=	13.03%	12.64%	12.16%	12.00%	12.18%
B	12.18%	Data	13.55%	13.40%	13.15%	12.72%	12.18%
C	2019	Target <=	2.49%	2.46%	2.43%	2.40%	2.01%
C	2.01%	Data	2.35%	2.30%	2.14%	2.05%	2.01%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	57.32%	57.70%	58.07%	58.45%	58.82%	59.20%
Target B <=	12.08%	11.98%	11.88%	11.78%	11.68%	11.58%
Target C <=	1.99%	1.99%	1.99%	1.99%	1.99%	1.99%

Targets: Description of Stakeholder Input

During the stakeholder virtual and in person meetings on school age educational environment stakeholders were informed that the baseline year was already established in the prior SPP/APR when we changed the data set. For the FFY 2020-2025 targets they recommended setting the targets for 5A to increase and 5B to decrease by one standard deviation by FFY 2025 and set 5C at a flat rate of 1.99%.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	Total number of children with IEPs aged 5 (kindergarten) through 21	66,544
SY 2020-21 Child Count/Educational Environment	07/07/2021	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	39,151

Source	Date	Description	Data
Data Groups (EDFacts file spec FS002; Data group 74)			
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	7,762
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	459
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	561
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	256

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

NO

FFY 2020 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	39,151	66,544	56.94%	57.32%	58.83%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	7,762	66,544	12.18%	12.08%	11.66%	Met target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	1,276	66,544	2.01%	1.99%	1.92%	Met target	No Slippage

Provide additional information about this indicator (optional)

Approximately 2/3 of special education students attended classes virtually. More students were enrolled in the general education virtual classes instead of the pull-out special education classes. For many students the virtual classroom provided a more inclusive setting with their non-disabled peers instead of being pulled-out of the general curriculum course for special education services. Therefore, with more students receiving educational instruction and services virtually due to the pandemic the number of students counted in 5A has increased resulting in part a decline in 5B and 5C.

Additionally, Arkansas has an inclusive education initiative being implemented across the state which should increase the rate for Indicator 5A and increase student academic outcomes.

5 - Prior FFY Required Actions

None

5 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data – 6A, 6B

Part	FFY	2015	2016	2017	2018	2019
A	Target >=	32.97%	33.95%	34.93%	35.94%	20.74%
A	Data	25.76%	26.78%	28.17%	29.04%	20.74%
B	Target <=	30.30%	29.83%	28.61%	26.65%	20.21%
B	Data	31.57%	29.89%	27.27%	23.74%	20.21%

Targets: Description of Stakeholder Input

During the stakeholder virtual and in person meetings on preschool educational environment stakeholders were informed that the baseline year was already established in the prior SPP/APR for 6A and 6B when we changed the data set. The stakeholders agreed on using the FFY2020 data for the 6C baseline. Additional, discussions resulted in selecting a full or partial standard deviation to establish the FFY 2020-2025 targets. Indicator 6A and 6C will improve by a one standard deviation by FFY 2025 and 6B will improve by 1/2 of a standard deviation.

Targets

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

Inclusive Targets

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

Target Range not used

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

Part	Baseline Year	Baseline Data
A	2019	20.74%
B	2019	20.21%
C	2020	1.08%

Inclusive Targets – 6A, 6B

FFY	2020	2021	2022	2023	2024	2025
Target A >=	21.44%	22.13%	22.83%	23.53%	24.22%	24.92%
Target B <=	19.73%	19.25%	18.77%	18.29%	17.81%	17.31%

Inclusive Targets – 6C

FFY	2020	2021	2022	2023	2024	2025
Target C <=	1.08%	1.04%	1.00%	0.96%	0.92%	0.88%

Prepopulated Data

Data Source:

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

Date:

07/07/2021

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	2,263	4,505	1,955	8,723
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	412	874	351	1,637
b1. Number of children attending separate special education class	51	60	33	144
b2. Number of children attending separate school	567	832	343	1,742
b3. Number of children attending residential facility	2	4	2	8
c1. Number of children receiving special education and related services in the home	20	56	18	94

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

NO

FFY 2020 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	1,637	8,723	20.74%	21.44%	18.77%	Did not meet target	Slippage
B. Separate special education class, separate school or residential facility	1,894	8,723	20.21%	19.73%	21.71%	Did not meet target	Slippage

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C. Home	94	8,723		1.08%	1.08%	N/A	N/A

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

Arkansas saw a decrease in the number of children being served in a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program - primarily due to the pandemic. Many families were working from home and did not send their children to the preschool/daycares in which they were previously enrolled. In some instances, families elected to be served in community programs that offered virtual preschool options – limiting access to non-disabled peers. Other families elected to not enroll in a regular preschool program at all. This is reflected in the in number of children being served at home. Arkansas saw a 400% increase in this category.

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

Arkansas saw an increase in the number of children being served in separate special education class, separate school or residential facility. With many daycares/preschools reducing the number of children being served due to the pandemic, families with children who are Medicaid eligible and could qualify for habilitation services under the Arkansas Department of Human Services, enrolled in separate schools such as the Early Intervention Day Treatment (EIDT) centers.

Provide additional information about this indicator (optional)

The Indicator took a direct hit from the pandemic as the child count dropped by more than 1200 children. In the initial stages of the pandemic the State offered preschools and day cares extra funds to stay open. However, with many parents working from home, parents of two-year old children delayed the referral and placement for special education services. Other parents revoked consent and kept children at home without services.

6 - Prior FFY Required Actions

None

6 - OSEP Response

The State has established the baseline for indicator 6c, using data from FFY 2020, and OSEP accepts that revision.

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

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

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A1	2008	Target >=	90.12%	90.60%	91.08%	91.56%	91.56%
A1	89.56%	Data	84.99%	85.13%	84.39%	87.89%	88.70%
A2	2008	Target >=	67.28%	67.76%	68.24%	68.72%	68.72%

A2	68.61%	Data	59.76%	56.66%	57.89%	57.92%	63.66%
B1	2008	Target >=	90.64%	91.42%	91.90%	92.38%	92.38%
B1	89.64%	Data	86.39%	85.26%	85.98%	89.49%	89.53%
B2	2008	Target >=	57.19%	58.17%	59.64%	61.11%	61.11%
B2	59.74%	Data	49.22%	45.67%	45.68%	45.15%	48.27%
C1	2008	Target >=	90.21%	91.17%	91.65%	92.13%	92.13%
C1	91.68%	Data	85.73%	85.93%	86.59%	90.63%	90.68%
C2	2008	Target >=	73.99%	75.46%	76.93%	78.00%	78.40%
C2	77.81%	Data	69.62%	65.54%	64.97%	65.22%	70.18%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A1 >=	89.16%	89.64%	90.12%	90.60%	91.08%	91.56%
Target A2 >=	66.32%	66.80%	67.28%	67.76%	68.24%	68.72%
Target B1 >=	89.98%	90.46%	90.64%	91.42%	91.90%	92.38%
Target B2 >=	57.17%	56.21%	57.19%	58.17%	59.64%	61.11%
Target C1 >=	90.71%	89.73%	90.21%	91.17%	91.65%	92.13%
Target C2 >=	75.95%	94.97%	93.99%	75.46%	76.93%	78.00%

Targets: Description of Stakeholder Input

At the various stakeholder meeting discussing Indicator 7: EC Outcomes, participants noticed that the targets have rarely been met. As the different methodologies for setting targets were presented, stakeholders kept going back to the fact that previous targets were not being met. The baseline is 2008 and the data annually has only tends to fluctuate within a few percentage points. Taking the discussion into account, the final decision was to carry the targets from the previous SPP into this six year SPP.

FFY 2020 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

4,676

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

Outcome A Progress Category	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	23	0.49%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	423	9.05%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,304	27.89%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,767	37.79%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,159	24.79%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age	3,071	3,517	88.70%	89.16%	87.32%	Did not meet target	Slippage

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>							
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,926	4,676	63.66%	66.32%	62.57%	Did not meet target	Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	30	0.64%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	489	10.46%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,916	40.98%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,882	40.25%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	359	7.68%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	3,798	4,317	89.53%	89.98%	87.98%	Did not meet target	Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,241	4,676	48.27%	57.17%	47.93%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	20	0.43%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	353	7.55%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,026	21.94%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,945	41.60%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,332	28.49%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	2,971	3,344	90.68%	90.71%	88.85%	Did not meet target	Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	3,277	4,676	70.18%	75.95%	70.08%	Did not meet target	No Slippage

Part	Reasons for slippage, if applicable
A1	The pandemic has had a direct impact on this indicator. More parents than in any time of the EC services, revoked service rights or elected to be served at home with limited access to social interaction. The pandemic has limited staff access to children. Many more children were receiving services virtually and daycares/preschools were limiting access to facilities by outside personnel. This is reflected in learning losses.
A2	The pandemic has had a direct impact on this indicator. More parents than in any time of the EC services, revoked service rights or elected to be served at home with limited access to social interaction. The pandemic has limited staff access to children. Many more children were receiving services virtually and daycares/preschools were limiting access to facilities by outside personnel. This is reflected in learning losses.
B1	The pandemic has had a direct impact on this indicator. More parents than in any time of the EC services, revoked service rights or elected to be served at home with limited access to social interaction. The pandemic has limited staff access to children. Many more children were receiving services virtually and daycares/preschools were limiting access to facilities by outside personnel. This is reflected in learning losses.
C1	The pandemic has had a direct impact on this indicator. More parents than in any time of the EC services, revoked service rights or elected to be served at home with limited access to social interaction. The pandemic has limited staff access to children. Many more children were receiving services virtually and daycares/preschools were limiting access to facilities by outside personnel. This is reflected in learning losses.

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The data collection is based on a census of all children with IEPs who had both entry and exit COS scores and exited early childhood special education because they no longer required services, were kindergarten eligible, or the parents withdrew consent for services, and the children 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 2016-2017 school year, the COS was integrated into the IEP process and was fully implemented in the 2017-2018 school year.

The data set is submitted to the State each June and LEAs have the opportunity to review and verify the data each September prior to its use in federal reporting.

Provide additional information about this indicator (optional)

While COVID affected completing some exit scores, all early childhood programs were able to complete the process in-person or via remote conferencing and finalized all data for the initial submission or during the review period to meet reporting requirements.

7 - Prior FFY Required Actions

None

7 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

During the stakeholder sessions, Indicator 8 Family Involvement data was shared with both school age and early childhood participants. Both groups recognized that Arkansas rarely reaches the established targets. Through their review of the historical data trends and proposed target setting methodologies and applied results, there was no clear conclusion as to which methodology would be best. In presenting the stakeholder meeting results to the state advisory council, the question was brought up about applying the targets from the previous SPP to this iteration since the state rarely met them. In the end, the decision was to bring forward the previous SPP targets.

Historical Data

Group	Baseline	FFY	2015	2016	2017	2018	2019
Preschool	2005	Target >=	91.90%	92.88%	93.86%	94.84%	94.84%
Preschool	82.92%	Data	91.18%	92.32%	92.26%	93.83%	91.12%
School age	2005	Target >=	95.01%	95.49%	95.97%	96.45%	96.45%

School age	95.35%	Data	93.45%	93.18%	95.45%	95.82%	96.52%
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Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	89.94%	90.92%	91.90%	92.88%	93.86%	94.84%
Target B >=	94.05%	94.53%	95.01%	95.49%	95.97%	96.45%

FFY 2020 SPP/APR Data: Preschool Children Reported Separately

Group	Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
Preschool	2,683	2,963	91.12%	89.94%	90.55%	Met target	No Slippage
School age	15,061	15,651	96.52%	94.05%	96.23%	Met target	No Slippage

The number of parents to whom the surveys were distributed.

75,000

Percentage of respondent parents

24.82%

Response Rate

FFY	2019	2020
Response Rate	23.09%	24.82%

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

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 DESE-OSE 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.

Most LEAs offer the survey to families at Annual Review meetings. Since most meetings were being conducted virtually, due to COVID, IDEA Data & Research provided documents LEAs could share with families on how to complete the survey online. The instructions were available in English and Spanish, the same as the surveys.

The DESE-OSE monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2022. Further, the DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunity to participate in the family survey.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

While the response rate increased from the previous year, Arkansas will continue to work with 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 DESE-OSE 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.

Most LEAs offer the survey to families at Annual Review meetings. Annual review meetings were conducted in-person and virtually this past-year. Based on our analysis of the responses, if a non-response bias exists it appears to be linked to holding virtual IEP meetings. Providing families the information to login to the survey and completing it at their convenience is not the same as being face-to-face and completing the survey while attending the meeting. IDEA Data & Research provided documents LEAs could share with families on how to complete the survey online. The instructions were available in English and Spanish, the same as the surveys.

The DESE-OSE monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2022. Further, the DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunity to participate in the family survey.

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

The number of responding parents/guardians increased in 2020-2021 for school age and early childhood programs.

Using a +/- 3% as the criteria to identify over- or under-representativeness, families of CWD in early childhood programs are representative in all disability categories by race except developmental delay (-9.41) were families of white children were underrepresented. Early childhood responses were also underrepresented in the racial/ethnic group of white at -3.56. Additionally, 4.42% of respondents did not indicate the child's race and/or disability.

Families of CWD in school age programs are significantly under-represented in Black (-3.08) and Hispanic(-5.13). It should be noted that 14.17% of respondents failed to indicate the child's racial/ethnic and/or disability group. Even with improved representativeness there is a need for continual training on the preparation, collection, and submission of the family surveys.

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

NO

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

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 DESE-OSE 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.

Most LEAs offer the survey to families at Annual Review meetings. Since most meetings were being conducted virtually, due to COVID, IDEA Data & Research provided documents LEAs could share with families on how to complete the survey online. The instructions were available in English and Spanish, the same as the surveys.

The DESE-OSE monthly technical assistance calls with LEAs will include the family surveys as a topic in the Spring of 2022. Further, the DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunity to participate in the family survey.

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

Arkansas reviews representativeness by race and disability category for both school age and early childhood. The survey responses are compared to the child count demographics for the given year. When the difference is +/- 3.00 percentage points that category is considered under- or over-represented.

Sampling Question	Yes / No
Was sampling used?	NO

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

Provide additional information about this indicator (optional)

COVID affected this Indicator due to limited access to students and families. Most LEAs offer the survey to families at Annual Review meetings. Since most meetings were being conducted virtually due to COVID, IDEA Data & Research provided documents LEAs could share with families on how to complete the survey online. The instructions were available in English and Spanish, the same as the surveys.

8 - Prior FFY Required Actions

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

Response to actions required in FFY 2019 SPP/APR

Arkansas will continue to train LEAs on the preparation, collection, submission and the importance of indicating the race and disability on 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 DESE-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

8 - OSEP Response

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

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

8 - Required Actions

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

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	0.00%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 SPP/APR Data

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

YES

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

19

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
5	0	260	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

The calculation is a single year event (one-year of data) utilizing a risk ratio and alternate risk ratio methodology with a minimum cell size of 5, n size of 15, and a risk ratio threshold of greater than 3.00. Alternate risk ratio is calculated if the comparison group does not meet the minimum cell or n size.

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.

Using the self-assessment tool, this past year Arkansas had zero districts identified as having inappropriate policies, procedures, and practices related to race in the area of identification. The self-assessment tool required a team approach and review of student level data for completion.

Each of the 5 LEAs which the State identified in 2020-2021 as having a disproportionate representation in the area of identification, completed a self-assessment of policies, procedures, and practices related to child find/evaluation/reevaluation/eligibility determination. The State reviewed LEAs' self-assessments related to child find/evaluation/reevaluation/eligibility determination. 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. When necessary, districts were contacted for clarification and directed to resubmit.

The review of policies, procedures, and practices resulted in zero findings of noncompliance.

The Disproportionality 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>.

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

Provide additional information about this indicator (optional)

COVID had no affect on this indicator.

Correction of Findings of Noncompliance Identified in FFY 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State reported its baseline for this indicator using data from FFY 2016; however, OSEP cannot accept this baseline because of revisions to the Measurement Table. Specifically, with the FFY 2020 APR submission, all States are now required to provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories. Therefore, the State must revise its baseline using FFY 2020 data.

9 - Required Actions

The State must revise its baseline using FFY 2020 data in the FFY 2021 SPP/APR.

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	0.00%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 SPP/APR Data

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

YES

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

19

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
23	0	260	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

The calculation is a single year event (one-year of data) utilizing a risk ratio or alternate risk ratio methodology with a minimum cell size of 5, n size of 15, and a risk ratio threshold of greater than 3.00. Alternate risk ratio is calculated if the comparison group does not meet the minimum cell or n size.

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.

Using the self-assessment tool, this past year Arkansas had zero districts identified as having inappropriate policies, procedures, and practices related to race in the area of identification. The self-assessment tool required a team approach and review of student level data for completion.

Each of the 23 LEAs that the State identified in 2020-2021 as having a disproportionate representation in the area of identification completed a self-assessment of policies, procedures, and practices related to child find/evaluation/reevaluation/eligibility determination. The State reviewed LEAs' self-assessments related to child find/evaluation/reevaluation/eligibility determination. 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. When necessary, districts were contacted for clarification and directed to resubmit.

The review of policies, procedures, and practices resulted in zero findings of noncompliance.

The Disproportionality 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>

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

Provide additional information about this indicator (optional)

COVID had no effect on this indicator.

Correction of Findings of Noncompliance Identified in FFY 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

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

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State reported its baseline for this indicator using data from FFY 2016; however, OSEP cannot accept this baseline because of revisions to the Measurement Table. Specifically, with the FFY 2020 APR submission, all States are now required to provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories. Therefore, the State must revise its baseline using FFY 2020 data.

10 - Required Actions

The State must revise its baseline using FFY 2020 data in the FFY 2021 SPP/APR.

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

- a. # of children for whom parental consent to evaluate was received.
 - b. # of children whose evaluations were completed within 60 days (or State-established timeline).
- Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

Instructions

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

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

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

Targets must be 100%.

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

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

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	91.91%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.59%	99.75%	99.54%	99.75%	99.71%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
15,933	15,830	99.71%	100%	99.35%	Did not meet target	No Slippage

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

103

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.

The 103 children whose evaluations exceeded the state established timeline are represented by 33 LEAs . The number of days beyond the 60 day timeline varied between 1 - 78 days. Seventy-eight (78) of the 103 children were found to be eligible and 19 were found not eligible. The remaining six (6) children either had eligibility pending at the time of the data collection or the families refused services.

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 DESE-OSE 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.

Indicate the evaluation timeline used:

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

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

State database that includes data for the entire reporting year

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

There are two different data collection systems for special education. First, there is the Arkansas Division of Elementary and Secondary 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.

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

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

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

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

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

*Special education placement inconsistent (record indicates the student was not placed yet the completion reason is "SP" or record indicates student was placed yet the completion reason is "NE")

*Referral process incomplete

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

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

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

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

Provide additional information about this indicator (optional)

Although COVID has had its effect on special education referrals, the effect is not reflected in the indicator data. Arkansas allows for the extension of timelines beyond the 60 days when it is at the family request or the family does not make the child available.

Arkansas continues to see a decline in referrals as a result of the pandemic. Although Arkansas students were in school during the 2020/21 school year, many were attending virtually resulting in families declining to participate the referral process. In 2018/19, Arkansas had 20,253 referrals which declined to 18,129 in 2019/20 as the pandemic took hold and further declined in 2020/21 with a count of 17,575.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
17	17	0	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

The DESE-OSE in conjunction with the IDEA Data & Research Office verified that each of the 17 LEAs with findings in FFY 2019 are correctly implementing the specific regulatory requirements by reviewing current year referrals in the student management system, which is updated data. The review revealed that each of the 17 LEA is 100% compliant and is correctly implementing the regulatory requirements. 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 noncompliance.

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

The State has verified, by reviewing the student level data in the special education modules of the student management system, that each of the 17 LEAs with findings in FFY 2019 is correctly implementing the specific regulatory requirements. 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 SMS special education modules to verify that students whose evaluation timelines exceeded 60 days were evaluated, had eligibility determined, and had an IEP developed when found to be eligible.

The State has verified through the student management system that 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 IDEA Data & Research staff reviewed records in December 2021 via the student management system and found no further noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

11 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2019 SPP/APR

The State has verified, by reviewing the special education modules of the student management system, that each of the 17 LEAs with findings in FFY 2019 is correctly implementing the specific regulatory requirements.

The State has verified through the student management system that 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 IDEA Data & Research staff reviewed records in December 2021 via the student management system and found no further noncompliance.

11 - OSEP Response

11 - Required Actions

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

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

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

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

Targets must be 100%.

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

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

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

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	75.91%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	98.16%	100.00%	100.00%	95.24%	100.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	88
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	10

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	49
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	29
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	0
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	49	49	100.00%	100%	100.00%	Met target	No Slippage

Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f
0

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

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

Data Collection: Arkansas has a single student management system utilized by all school districts, charter schools, and educational cooperatives.

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. Preparation for data transfer from the SIS warehouse to special education includes the data and reporting office in DESE's Research and Technology Division forwarding the data files to the DESE's Office of Special Education 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:

* 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 State Director of Special Education for further action.

Provide additional information about this indicator (optional)

It is believed that COVID directly impacted the number of referrals received in the 2020-21 school year. The total received was lower than previous years and more families refused to participate in the referral process.

Correction of Findings of Noncompliance Identified in FFY 2019

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

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

12 - Prior FFY Required Actions

None

12 - OSEP Response

12 - Required Actions

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

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

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	96.34%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	96.41%	98.85%	NVR	80.54%	71.26%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
210	249	71.26%	100%	84.34%	Did not meet target	No Slippage

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

State monitoring

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

As part of Arkansas' monitoring and general supervision system, the MPE Section has oversight of special education programs in the State's public schools and co-ops. The MPE Section, in conjunction with the 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 post-secondary 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 on-site and LEA self-monitoring, 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 students' IEP aged 16-21. The data is collected via an electronic monitoring form completed by the SEA staff and/or LEA staff. In conjunction with IDEA Data & Research, the Indicator 13 checklist aligned data elements are then reviewed and counts are compiled for the indicator.

Indicator 13 data are reported at the initial compliance level prior to the opportunity to correct. Therefore, in applying the two prong requirement of OSEP Memo 09-02, if an IEP is found to be non-compliant and correction does not occur prior to issuing a letter of findings, the district is cited for noncompliance and must submit a corrective action plan (CAP) to the DESE-OSE.

Arkansas is participating in an intensive TA project through National Technical Assistance Center on Transition (NTACT) that involves DESE-OSE staff, Arkansas Transition Services, Arkansas Rehabilitation Services, Career and Technical Education, and local district partners. Goals and activities are designed to improve secondary transition services, drop out, graduation and post school outcomes.

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

Provide additional information about this indicator (optional)

There was no COVID Impact.

Correction of Findings of Noncompliance Identified in FFY 2019

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

FFY 2019 Findings of Noncompliance Verified as Corrected

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

The State verified that the two findings of noncompliance from FFY 2019 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 DESE-OSE MPE Section 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 MPE staff verified the LEA was correctly implementing the regulatory requirements through the review of additional student records during on-site or virtual 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 student 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 DESE-OSE MPE Section 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 MPE 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 student IEPs determined to be out of compliance had been corrected within the one year timeline and the review of updated data verified 100% compliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

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

13 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2019 SPP/APR

The DESE-OSE MPE Section 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 MPE 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 student IEPs determined to be out of compliance had been corrected within the one year timeline and the review of updated data verified 100% compliance.

13 - OSEP Response

13 - Required Actions

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

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

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

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

I. Definitions

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

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

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

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

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

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

II. Data Reporting

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

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

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

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

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

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

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

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

III. Reporting on the Measures/Indicators

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

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

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

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

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

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

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

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2009	Target >=	14.33%	14.82%	15.31%	15.80%	15.80%
A	12.86%	Data	11.80%	17.92%	10.53%	11.78%	10.90%
B	2009	Target >=	50.02%	50.51%	51.00%	51.49%	51.49%
B	48.55%	Data	24.11%	44.32%	50.19%	25.93%	41.97%
C	2009	Target >=	60.92%	61.70%	62.48%	63.26%	63.26%
C	59.34%	Data	51.26%	52.02%	54.89%	51.35%	48.45%

FFY 2020 Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	13.06%	13.26%	13.46%	13.66%	13.86%	14.06%
Target B >=	49.21%	49.87%	50.53%	51.19%	51.85%	52.51%
Target C >=	59.89%	60.44%	60.99%	61.54%	62.09%	62.64%

Targets: Description of Stakeholder Input

This Indicator was discussed with stakeholders at the May 25, 2022 meeting. Stakeholders reviewed historical data and various target setting methodologies. Based on stakeholder input, Indicator 14A & 14B would utilize the average annual difference to establish the new targets and Indicator 14C targets would be established using ½ of the average annual difference.

FFY 2020 SPP/APR Data

Total number of targeted youth in the sample or census	619
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	512
Response Rate	82.71%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	81
2. Number of respondent youth who competitively employed within one year of leaving high school	247
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)	17
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).	5

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Enrolled in higher education (1)	81	512	10.90%	13.06%	15.82%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	328	512	41.97%	49.21%	64.06%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	350	512	48.45%	59.89%	68.36%	Met target	No Slippage

Please select the reporting option your State is using:

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

Response Rate

FFY	2019	2020
Response Rate	78.79%	82.71%

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

Arkansas conducts a dual data collection, phone survey and administrative data mine. The administrative data mining includes data from the Arkansas Division of Higher Education, the Division of Workforce Services, Arkansas Rehabilitation Services, and Adult Education. Arkansas will continue to work with other state agencies to improve the data mining process. Arkansas is also exploring having LEAs collect data directly.

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

Based on the 618 exiting data, the PSO data set is compiled. The dual data collection allows us to locate more students than a phone or mail survey alone. This also, helps in addressing non-response bias. Although the data are representative by race, exiting reason, and disability, there is still a need

to ensure students who were identified as having an intellectual disability and those who dropped out of school are represented in the responses. These two categories historically have the lowest response rate.

Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

A ± of 3.00 percentage points is used to determine demographic over- or under-representation. Arkansas analyzes the PSO data for representativeness in the areas of race/ethnicity, disability category, and exit reason. The collected data for FFY 2020 is representative.

Arkansas conducts a dual data collection, phone survey and administrative data mine. The administrative data mining includes data from the Arkansas Division of Higher Education, the Division of Workforce Services, Arkansas Rehabilitation Services, and Adult Education. 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 DESE has established data sharing agreements for the data collection with the agencies mentioned above. The DESE will continue exploring other agencies which could provide data for this indicator.

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

YES

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

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

A ± of 3.00 percentage points is used to determine demographic over- or under-representation. Arkansas analyzes the PSO data for representativeness in the areas of race/ethnicity, disability category, and exit reason. The collected data for FFY 2020 is representative.

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

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

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 available at https://arksped.ade.arkansas.gov/documents/data_n_research/PublicReporting/ARindicator14samplingplanfor2019-2025.pdf

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.

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

None

14 - OSEP Response

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

The State submitted its sampling plan for this indicator with its FFY 2020 SPP/APR. OSEP will follow up with the State under separate cover regarding the submission.

14 - Required Actions

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

15 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1 Number of resolution sessions	17
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1(a) Number resolution sessions resolved through settlement agreements	10

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

NO

Targets: Description of Stakeholder Input

Stakeholders were presented with various methodologies that could be applied to setting targets for Indicator 15. Actual data for this indicator fluctuates widely from year to year. After the discussions, it was decided to repeat the targets from the previous SPP.

Historical Data

Baseline Year	Baseline Data
2005	50.00%

FFY	2015	2016	2017	2018	2019
Target >=	60.88%	62.84%	64.80%	66.76%	66.76%
Data	2.70%	12.50%	55.56%	78.26%	93.33%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	56.96%	58.92%	60.88%	62.84%	64.80%	66.76%

FFY 2020 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
10	17	93.33%	56.96%	58.82%	Met target	No Slippage

Provide additional information about this indicator (optional)

There was no COVID impact

15 - Prior FFY Required Actions

None

15 - OSEP Response

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

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	15
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	0
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	15

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

NO

Targets: Description of Stakeholder Input

Stakeholders were presented the data and various methods which could be applied to setting targets for Indicator 16. After reviewing the data sets, stakeholders agreed that with the uncertainty of the data from year to year, especially in relation to the pandemic that a flat rate would be the best targets through FFY 2025.

Historical Data

Baseline Year	Baseline Data
2005	52.00%

FFY	2015	2016	2017	2018	2019
Target >=	77.52%	79.48%	81.44%	83.40%	83.40%
Data	92.31%	100.00%	93.55%	100.00%	100.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	75.00%	75.00%	75.00%	75.00%	75.00%	75.00%

FFY 2020 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	15	15	100.00%	75.00%	100.00%	Met target	No Slippage

Provide additional information about this indicator (optional)

There was no COVID impact

16 - Prior FFY Required Actions

None

16 - OSEP Response

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

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

17 - Indicator Data

Section A: Data Analysis

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

The State-identified Measurable Result (SiMR) is the percent of students with disabilities (SWD) in grades 3-5, from the targeted schools, whose value-added score (VAS) in reading is moderate or high for the same subject and grade level in the state.

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

NO

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

NO

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

YES

Please provide a description of the changes and updates to the theory of action.

The State's theory of action has been revised to reflect updates to the strands of action. Strand one, Collaboration, has been updated from "create" to "expand" a system of support aligned with other DESE Units and differentiated based on student needs to reflect the evolution of Phase III of the SSIP with scaling and capacity building.

Two updates were made to strand two which is Professional Development/Technical Assistance and Dissemination. The changes include the addition of Universal Design for Learning (UDL) and a shift from "professional development" to "professional learning". Through stakeholder feedback around professional learning, educators requested additional support on strategies and practices to work with students with disabilities. To address this need, UDL was added to strand two in the State's theory of action so that Arkansas' system produces educators that are more efficacious in designing and implementing inclusive classroom practices. Stakeholder feedback regarding the SSIP Theory of Action revealed that educators prefer access to ongoing and job-embedded learning opportunities, with access to peer coaches. The updated language to strand two marks a shift towards a nested professional learning system and away from a traditional "sit and get" model of professional development. Additionally, the changes emphasize that Arkansas' professional learning system is designed to intentionally support all learners.

Please provide a link to the current theory of action.

<https://arksped.ade.arkansas.gov/documents/ssip/SSIP-SPDG-OSE-TOA.pdf>

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

NO

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

The Arkansas SSIP has been modified and expanded to include schools that are implementing the Professional Learning Communities Inclusive Practices Project. This project has an intentional focus on inclusive practices, ensuring that students who are IEP eligible as well as other groups of struggling learners have meaningful access to core instruction and established systems of intervention. This initiative aligns very well with ongoing work of Professional Learning Communities in Arkansas, and the SSIP focus on RTI. The project focuses on facilitating collaboration and data-driven decision making between general and special educators with purposeful inclusive principal leadership. Participating schools in this work are now included in the SiMR data set regarding student growth. Including the important variables of collaboration and leadership in developing, implementing, and sustaining robust RTI systems make this initiative an important component of the SSIP moving forward.

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2016	59.53%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target>= =	60.66%	61.50%	62.33%	63.16%	63.37%	64.50%

FFY 2020 SPP/APR Data

Number of SWD with a high or moderate VAS in reading at participating schools and grade levels.	Number of SWD with a VAS in reading at participating schools and grade levels.	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
533	828		60.66%	64.37%	Met target	N/A

Provide the data source for the FFY 2020 data.

The data is the RLA value added score based on the State's approved ESSA plan. Upon the receipt of the data file from the Office of Innovation for Education (OIE) at the University of Arkansas (state contractor for accountability), student level records are filtered based on the participating school buildings. Only students with value added scores (VAS) for RLA are included.

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

The data is the RLA value added score based on the State's approved ESSA plan.

In the first step, a longitudinal individual growth model is used to produce a predicted score for each student. The individual growth model uses as many years of prior scores for each student to maximize the precision of the prediction (best estimate) and accounts for students having different starting points (random intercepts). In the value-added model, each student's prior score history acts as the control/conditioning factor for the expectation of growth for the individual student. In the second step, the student's predicted score is subtracted from his or her actual score to generate the student's value-added score (actual – predicted = value-added score). The magnitude of value-added scores indicates the degree to which students did not meet, met, or exceed expected growth in performance. Student value-added scores are averaged for each school. School value-added scores indicate, on average, the extent to which students in the school grew compared to how much they were expected to grow, based on how the students had achieved in the past. The school value-added scores answer the question, "On average, did students in this school meet, exceed, or not meet expected growth?" (Arkansas ESSA Plan p. 45) While the school average tells us about the building, it does not tell us about how the individual student is doing compared to their peers. Therefore, to look at an individual student's growth in relation to their peers, the Office of Innovation for Education (OIE) at the University of Arkansas (state contractor for accountability) ranked the value-added scores of all students and categorized them into low, moderate, or high based on the percentile rank of students' growth scores, or residuals. This is commonly Percentile Rank of the Residual (PRR). An explanation of each category is as follows:

- Low indicates that a student's VAS, based on the PRR, was in the bottom 25% of all student VAS for same subject and grade level in the state
- Moderate indicates that a student's VAS, based on the PRR, was between 25% and 75% of all student VAS for the same subject and grade level in the state
- High indicates that a student's VAS, based on the PRR, was in the top 25% of all student VAS for the same subject and grade level in the state

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

NO

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

<https://arksped.ade.arkansas.gov/documents/ssip/Arkansas-SSIP-Evaluation-Plan-Infrastructure-Tool.pdf>

Is the State's evaluation plan new or revised since the previous submission? (yes/no)

NO

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

Strategy One: Expand a system of support that is aligned with other DESE Units and is differentiated based on LEAs' needs as evidenced by data. This phase of the SSIP focused on expanding a coordinated system of support that provides the necessary organizational and teaming structures for the way in which LEA services and supports are identified, managed, and differentiated at the state-level. This strategy is reflected in DESE's Theory of Action. Through intentional alignment and infrastructure expansion, the DESE is more effective in leveraging resources that will improve services for all students (including students with disabilities) and in increasing the reach and impact of the work with LEAs. The State Performance Management Team is directly involved with agency leaders in all initiatives reflected in the theory of action, including High Reliability Schools (HRS), Professional Learning Communities (PLC), High-Leverage Practices (HLPs) for Inclusive Classrooms, Inclusive Principal Leadership, Reading Initiative for Student Excellence (R.I.S.E.), Response to Intervention (RTI) and the Strategic Instructional Model (SIM™). The SSIP Theory of Action reflects Arkansas' commitment to ensuring that all students have access to highly reliable schools that are safe, supportive, collaborative and that provide a guaranteed and viable curriculum with effective teaching in every classroom (High Reliability Schools). Through a multi-tiered system of support (RTI Arkansas) general and

special educators build collective efficacy via team-based and action-oriented coaching, modeling and support with intentional focus on four critical questions: 1) What is it we expect students to learn? 2) How will we know when they have learned it? 3) How will we respond when they don't learn? 4) How will we respond when they already know it? (PLC at Work™ and Inclusive Practices PLC Project). RTI is directly aligned to critical question number three. The system of support in Arkansas is dependent upon administrators who advance inclusive leadership and practices (Advancing Inclusive Principal Leadership). The Arkansas SSIP includes knowledge and implementation of high-leverage and other evidence-based practices that promote inclusive classrooms to facilitate novice and experienced educators' self and collective efficacy to meet the needs of diverse learners (R.I.S.E., HLPs and SIM™). The focus on alignment and expansion of these initiatives in the SSIP reflects a continuous evolution towards a single, coherent and collaborative system where students with disabilities are considered general education students first. This system coalesces around DESE's mission to promote inclusive practices.

Strategy Two: In collaboration with other DESE Units, expand Arkansas' Response-to-Intervention (RTI) and inclusive practices model including UDL and using evidence-based personnel development to implement a multi-tiered system of supports for behavior and academics, with a focus on literacy. This strategy has evolved to focus on RTI, UDL and inclusionary practices and is being implemented and supported in SSIP targeted districts by the State through the State Personnel Development Grant (SPDG), with intentional alignment to R.I.S.E., Inclusive Principal Leadership, and the PLC Inclusive Practices initiatives. The SPDG is focused on the following goals:

- Promote statewide RTI resources and tools in the areas of behavior and literacy
- Increase the capacity of regional and LEA teams to deliver high quality RTI professional development
- Use competency-based learning to empower teachers and other personnel to have choice in professional learning to meet individual needs
- Improve literacy and behavior outcomes for all students, especially students with disabilities

The most recent State Personnel Development Grant, awarded in the fall of 2020, is bridging the work of the previous SPDG, to embed competency-based professional learning (PL) to empower teachers and other personnel to have choice in professional learning to meet their individual needs. This PL will increase the knowledge, skill, and implementation of UDL and high-leverage practices for general and special educators to support all students, especially students with disabilities. The RTI Framework provides the model to organize and assess LEAs' literacy and behavior/SEL services and supports through the lens of multi-tiered systems of support (MTSS). With the increased emphasis around inclusive practices and access to quality core instruction for all students, UDL principles are key to improving teacher efficacy for meeting the needs of diverse learners. Cross-collaborative work within DESE has been explored to address job-embedded PL leading to the acquisition of micro-credentials in UDL, RTI and HLPs.

The purposeful selection of these strategies aligns well with the extant evidence base, and with DESE's mission and vision to lead the nation in student-focused learning.

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

Relative to strategy one, the State Performance Management Team (SPMT) met monthly to improve the LEA system of support. This strategy, collaboration, involves multiple overlapping agency systems, including governance, data, accountability/monitoring, and quality standards. Representatives from the SPMT participated in NCSI's Cross-State Learning Collaboratives focused on scaling evidence-based practices (EBPs) and low-performing school systems (LPSS) with a focus on students with disabilities. To measure change across multiple agency initiatives in the SSIP, Arkansas continued to utilize the SSIP Infrastructure Development Planning and Progress Management Tool: Using Implementation Drivers and Stages of Implementation. Consideration of all initiatives reflected in the SSIP Theory of Action for this improvement strategy resulted in ratings that remained stable. On a scale of 1 to 5 (1 = pre-exploration and 5 = full implementation) Arkansas SSIP Infrastructure Tool ratings revealed the following implementation scores: Competency drivers of training (4.5) and coaching (4.0), Organizational drivers in facilitative administration (4.5) and systems intervention (4.5). Overall performance assessment of the Arkansas system coherence also remained stable at (4.5) as did the technical & adaptive leadership drivers (4.0). Multiple initiatives are included in the SSIP and some initiatives are more developed with regard to stages of implementation. Ratings reflect the intentional focus on coherence among multiple initiatives at multiple stages of implementation. The SPMT continued interdepartmental collaboration and coordination through regular involvement and initiative alignment presentations at DESE Learning Services Unit Leaders' Meetings, and Quarterly Content Specialists Meetings at each regional cooperative and with The Center for Exceptional Families (TCFEF), Arkansas' PTI Center. By focusing on strand one, DESE is increasingly modeling for LEAs the collaborative accountability and decision making that is needed to meet the needs of all learners. This strand assists with facilitating information exchange and reducing the organizational silos that can be obstacles to sustainable systemic change. A coherent message of how multiple initiatives work together in the system to serve all students promotes uniformity of messaging and prioritization of needs. Increasing collaboration and coherence is expected to narrow the focus on what matters most and positively impact the SiMR. This strategy was expanded to include Inclusive Practices PLC Project schools during this reporting cycle, and future scaling of this initiative is expected in subsequent cycles.

Relative to strategy two, statewide RTI implementation supports relate to the professional development and technical assistance system. During this reporting cycle, the State Implementation Team reviewed RTI data from districts receiving RTI support and continued to meet with the RTI State advisory to gain stakeholder feedback on RTI implementation strengths and barriers. Complete RTI modules and facilitator guides for academics and behavior have now been accessible on the DESE website for over a year for statewide educator use. The academic modules are aligned with R.I.S.E., the statewide initiative to implement the science of reading, and with High Reliability Schools. This alignment promotes equity in access to high quality professional learning, and sustainability of the ongoing initiative for inclusive practices. The behavior modules promote implementation of Positive Behavioral Interventions and Supports and this work is directly aligned to the work of the Arkansas Behavior Support Specialists and their work to install sustainable systems for behavior. Module overviews were provided to all Arkansas Regional Education Cooperatives to ensure equity of educator access to these materials, and RTI discussions were held at inclusive practices trainings at every educational service cooperative. The website for the SPDG work around RTI was revised to highlight the academic and behavior modules, and these supports continue to help guide broader agency discussions around multi-tiered systems of support. The SPDG serves as the implementation team for strategy two of the SSIP, and systemic improvements are measured through the SISEP State Capacity Assessment (SCA) tool. Due to reframing RTI alongside a broader focus on inclusive practices and UDL, scores for this SCA are not directly comparable to the previous year's SCA results. State Capacity Assessment results from the spring of 2021 were as follows: Leadership (33%), Infrastructure and Resources (58%), Communication and Engagement (50%), and SCA Total Score (46%). Percentages represent the number of SCA items in place and will serve as the baseline for future SCA administrations with the expanded focus of DESE and SPDG on UDL, and inclusive practices including RTI. It is expected that by implementing RTI for academics and behavior with fidelity, that the SiMR will improve as students with disabilities receive the necessary interventions, while also receiving access to quality core instruction in their least restrictive environments.

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

NO

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

Arkansas plans to continuously improve upon the two infrastructure strategies by utilizing supports from agency initiatives to expand a statewide culture of inclusive practices.

Relative to strategy one, intensified efforts to facilitate initiative collaboration between high-leverage and evidence-based practices, inclusive principal leadership, and the Strategic Instructional Model outlined in the SSIP Theory of Action will be a focus.

Inclusive Practices Professional Learning Communities Project:

While mentioned as a exploration activity in the previous reporting of the SSIP, initial pilot implementation of the Inclusive Practices PLC Project occurred during this current reporting cycle. The DESE and Solution Tree will continue a partnership to expand the Professional Learning Communities (PLC) at Work® process within select SSIP schools. This PLC improvement strategy focuses on building a culture of shared responsibility and collective teacher efficacy between general and special educators to maximize learning for all students. Through collaborative PLC efforts between general and special educators, it is expected that school and district LRE percentages will improve. With greater access to quality core instruction, students will experience moderate to high growth in literacy as measured by the statewide assessment.

High Leverage Practices:

Survey data acquired during this phase of the SSIP revealed improvement in year-to-year comparisons for Arkansas novice special educators' self-efficacy with applying high-leverage practices (HLPs) in their everyday work. In FY 19, only 22% of novice special educators indicated that they felt confident applying HLPs in their everyday work. Contrastively, FY20 survey data indicated an increase in special educators' self efficacy with 35% indicating confidence in the application of HLPs. In FY19, 49% of survey respondents indicated low or no confidence applying HLPs. In FY20, only 28% of respondents indicated low or no confidence with HLP application. As next steps, the SSIP will continue to leverage agency infrastructure and supports to increase state-level capacity and knowledge of HLPs, with a focus on agency unit leaders, regional content specialists, agency technical assistance providers, IHEs and the state's parent training center. The SSIP will also continue to intentionally collaborate with DESE Educator Effectiveness and IHEs around efforts to mentor all novice general and special educators with HLPs, and to align this work with the Arkansas Special Education Resource Academy, a DESE partnership with IHEs to increase the number of special educators in Arkansas. It is expected that the scaling of work around HLPs will better equip general and special educators to be more confident in knowledge and skills of working with diverse learners, and that improved self-efficacy will encourage more novice teachers to remain in the profession. Additionally, the SSIP will partner with The Center for Exceptional Families to highlight how families can engage with teachers and how teachers can engage with families to improve outcomes for students with disabilities.

Advancing Inclusive Principal Leadership:

Arkansas recognizes that administrators play an important role in guaranteeing that students and teachers have access to necessary supports. DESE has been directly supported by CCSSO's Advancing Inclusive Principal Leadership (AIPL) initiative, and the SSIP SiMR will continue to be the overarching goal for this AIPL work. An integral component of AIPL has been related to embedding HLPs into statewide professional learning for principals and school leadership teams. DESE and the work of the SSIP will partner with the Arkansas Association of Educational Administrators (AAEA) to provide inclusive practices trainings for principals involved in the AAEA Beginning Administrators Academy. In addition, DESE plans to invest in inclusive principal leadership through the expansion of the Inclusive Practices PLC Project. Promotion and expansion of new inclusive practices branding and an inclusive practices website will be an additional next step. With improved website access to resources that align with state initiatives, LEAs will be able to see that this work stretches beyond special education and is important for all stakeholders, including principals. Beyond improvements to the SiMR, DESE anticipates a principal-led continuous cultural shift at the building level that promotes the Least Dangerous Assumption, and ensures that all Arkansas students will be considered general education students first.

Strategic Instructional Model:

Though the SSIP SiMR is focused on literacy value-added growth scores for SWD in grades 3-5, Arkansas recognizes the need to provide supports for all students regardless of grade. Arkansas will continue to expand supports for the Strategic Instructional Model, with an emphasis on the following SIM Learning Strategies and Content Enhancement Routines: Inference Strategy, Proficiency in Sentence Writing Strategy, Main Idea Strategy, Listening and Note-taking Strategy, Vocabulary LINCing Routine/Strategy, Fundamentals of Sentence Writing Strategy, Unit Organizer Routine, and the Framing Routine. Trainings on these strategies and routines have been offered via face-to-face and virtually by content specialists through a partnership with the University of Central Arkansas Mashburn Center for Learning. The next steps for this work will be to partner with the DESE Digital Learning Unit to scale the reach and sustainability of SIM professional learning opportunities via a learning management system, followed by job-embedded coaching. It is expected that providing resources and support for strategy instruction and content enhancement will empower teachers with the knowledge and skills needed help diverse students become self-directed learners.

Relative to Strategy two, expanding the supports for RTI to include UDL and Inclusive Practices will occur during the next reporting period.

State Personnel Development Grant

Arkansas will leverage the SPDG to build upon previous work around RTI for academics and behavior, and embed HLPs and other EBPs to directly align with the SSIP. A Synthesis of Feedback and Recommendations from the Field was completed by the Office of Innovation for Education at the University of Arkansas in April of 2020. Multiple educator focus groups provided perspectives for the development of future professional learning in Arkansas. Given the need for educators to increase their self-efficacy, knowledge, and skills in educating students with various learning needs, the SPDG will support strategy two of the SSIP by focusing on the following: 1. Transform and expand Arkansas' statewide coherent system of supports through competency-based professional learning and coaching that will increase the implementation of high-leverage and other evidence-based practices (including RTI), which will result in improved outcomes for SWD. 2. Through personnel development and ongoing assistance, increase the capacity of regional and LEA teams to offer high-quality professional learning with a focus on implementing and sustaining integrated HLPs and other EBPs within a coherent system of support. 3. Increase the knowledge, skill, and implementation of UDL, HLPs and EBPs by offering general and special educators choice in competency-based professional learning with the added goal of certification, micro credential, and/or badge-recognition as well as a potential educator stipend. In addition to improving the SiMR, outcomes from this work are anticipated to promote improvements with LRE and teacher efficacy. Schools involved in direct SPDG support will be included in the SiMR data set.

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

High Leverage Practices for Inclusive Classrooms - HLPs
Collaboration - Inclusive Practices PLC Project
Response to Intervention - Inclusive Practices
Strategic Instructional Model - Content Enhancement Routines/Learning Strategies
Inclusive Administrative Support - Advancing Inclusive Principal Leadership

Provide a summary of each evidence-based practices.

High Leverage Practices for Inclusive Classrooms, as defined by the the Council for Exceptional Children, offers a set of practices that are essential to the support of student learning, and that can be systematically taught, learned and implemented by novice and experienced educators. HLPs have been supported by research to have significant potential for improving academic or behavioral outcomes for students with disabilities and other learners. These practices are best utilized through a tiered system of support with decision making that is based on data to meet individual student needs.

The Inclusive Practices PLC Project has an intentional focus on the promotion of inclusive practices, ensuring that students who are IEP eligible, as well as other groups of struggling learners, have meaningful access to core instruction in established systems of intervention. Through the installation and implementation of collaborative structures and a relentless focus on learning, student outcomes will improve, including achievement and growth performance measured by district and state assessments. Collaboration leads to collective teacher efficacy which is a highly influential factor for improving student outcomes.

Response to Intervention (RTI) is a multi-component, general education model, designed to identify students who may be at risk for learning or behavior challenges, offer support, and monitor progress.

The Strategic Instructional Model (SIM) is a formal model of cognitive and metacognitive interventions for struggling learners designed to focus on the following three broad areas of learning: Acquisition, storage, and/or expression/demonstration. The goal of SIM is for students to grow in executive functioning skills for self-directed learning.

Advancing Inclusive Principal Leadership is a DESE initiative in partnership with the Council of Chief State School Officers (CCSSO). The focus of this initiative is to develop Inclusive principals who are well prepared to serve students with disabilities and support teachers across general and special education in order to improve outcomes. Inclusive leaders create learning environments where all students. can excel at high levels and promote distributive leadership to support and retain effective teachers of students with disabilities.

Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.

Arkansas recognizes the need to improve access for SWD to receive instruction in least restrictive environments. The evidence-based practices outlined in the SSIP support systemic change with the overarching goal of improving students' access to quality core instruction in least restrictive environments. When educators are supported and empowered through quality professional learning that deepens knowledge and skills to serve diverse learners, and when general and special educators, and related services collaborate together around student data, students will demonstrate significant growth in literacy scores which is the Arkansas SSIP SiMR. As reflected in the SSIP Logic outputs and changes to LEA systems include the following:

- SSIP schools reflect a collaboratively designed multi-tiered system of supports for academics and behavior
- SSIP school building leadership teams build and increase capacity as measured by a Systems Analysis Tool and/or the Professional Learning Communities Continuums Survey
- Educators in SSIP schools build and increase capacity to implement HLPs and other evidence-based practices as measured by the Self-Efficacy Inventory
- SSIP schools evidence an increase of students with disabilities with moderate or high growth as measured by the DESE and as reflected in the SiMR
- SSIP schools meaningfully engage and collaborate with families to improve outcomes for students with disabilities

The evidence-based practices that will enable and implement the above-listed changes include:

High Leverage Practices for Inclusive Classrooms, as defined by the the Council for Exceptional Children, offers a set of practices that are essential to the support of student learning, and that can be systematically taught, learned and implemented by novice and experienced educators. HLPs have been supported by research to have significant potential for improving academic or behavioral outcomes for students with disabilities and other learners. These practices are best utilized through a tiered system of support, and based data and individual student needs.

The Inclusive Practices PLC Project has an intentional focus on the promotion of inclusive practices, ensuring that students who are IEP eligible, as well as other groups of struggling learners, have meaningful access to core instruction in established systems of intervention. Through the installation and implementation of collaborative structures and a relentless focus on learning, student outcomes will improve, including performance measured by district and state assessments. Collaboration leads to collective teacher efficacy which is a highly influential factor for improving student outcomes.

Response to Intervention (RTI) is a multi-component, general education model, designed to identify students who may be at risk for learning or behavior challenges, offer support, and monitor progress.

The Strategic Instructional Model (SIM) is a formal model of cognitive and metacognitive interventions for struggling learners designed to focus on the following three broad areas of learning: Acquisition, storage, and/or expression /demonstration. The goal of SIM is for students to increase self-direction in learning how to learn.

Advancing Inclusive Principal Leadership is a DESE initiative in partnership with the Council of Chief State School Officers. The focus of this initiative is to develop Inclusive principals who are well prepared to serve students with disabilities and support teachers across general and special education to improve outcomes. Inclusive leaders create learning environments where all students can excel at high levels and promote distributive leadership to support and retain effective teachers of students with disabilities.

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

To measure change across multiple agency initiatives in the SSIP, Arkansas continued to utilize the SSIP Infrastructure Development Planning and Progress Management Tool: Using Implementation Drivers and Stages of Implementation. Consideration of all initiatives reflected in the SSIP Theory of Action for this improvement strategy resulted in ratings that remained stable. On a scale of 1 to 5 (1 = pre-exploration and 5 = full implementation) Arkansas SSIP Infrastructure Tool ratings revealed the following implementation scores: Competency drivers of training (4.5) and coaching (4.0), Organizational drivers in facilitative administration (4.5) and systems intervention (4.5). Overall performance assessment of the Arkansas system coherence also remained stable at (4.5) as did the technical & adaptive leadership drivers (4.0). Multiple initiatives are included in the SSIP and some initiatives are more developed with regard to stages of implementation. Ratings reflect the intentional focus on coherence among multiple initiatives at multiple stages of implementation.

The evaluation of improvement for the SSIP aligns with the SPDG evaluation plan. The SPDG's comprehensive evaluation system measures RTI capacity, fidelity of implementation, and student outcomes. The SPDG serves as the implementation team for strategy two of the SSIP, and systemic improvements are measured through the SISEP State Capacity Assessment (SCA) tool. The State Implementation Team completed the SISEP State Capacity Assessment with a focus on RTI. The SCA is designed to support scaling up of evidence-based practices by providing a regular measure of state capacity, a structured process for completing a state action plan, information on progress towards goals, and a common infrastructure for implementation. Due to reframing RTI alongside a broader focus on inclusive practices and UDL, scores for this SCA are not directly comparable to the previous year's SCA results. State Capacity Assessment results from the spring of 2021 were as follows: Leadership (33%), Infrastructure and Resources (58%), Communication and Engagement (50%), and SCA Total Score (46%). Percentages represent the number of SCA items in place and will serve as the baseline for future SCA administrations with the expanded focus of DESE and SPDG on UDL, and inclusive practices including RTI. Historically SSIP reporting included the Regional Capacity Assessment (RCA), the District Capacity Assessment, the PBIS Tiered Fidelity Inventory, and the Reading-Tired Fidelity Inventory. These measures are designed to assist stakeholders within the system in their efforts to effectively gauge change in implementation.

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

As measured by an FY20 survey of Arkansas educators in the DESE-OSE Novice Special Education Mentoring Program, data supports DESE's intensified efforts to provide training and technical assistance with High Leverage Practices. Results from this survey indicated that 82% of novice special educators were interested in receiving more support to embed HLPs. In addition, this survey indicated that more novice teachers (FY 20/29.2%) are gaining exposure to HLPs in pre-service training programs as compared to (FY19/13.9%). Considering that 70% of novice teachers indicated that they did not have extensive coverage of HLPs in their pre-service training, DESE a continuous need to intensify and expand supports around HLPs.

Qualitative survey feedback from Inclusive Practices trainings that occurred with over 1,000 educators and families representing 137 districts from every Arkansas Regional Educational Service Cooperative in FY 20 indicated that district and school teams want more support in how to implement inclusive practices, including UDL, PLCs, RTI and HLPs. LEAs are increasingly requesting DESE support for the "how" of implementing inclusive practices, and each evidence-based practice outlined in the SSIP supports this need.

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

Inclusive Practices Professional Learning Communities Project:

Arkansas expects to expand the Inclusive Practices PLC Project with an additional seven schools during the next reporting cycle. DESE and Solution Tree will continue a partnership to develop and expand the Professional Learning Communities (PLC) at Work® process within select SSIP schools in Arkansas based on an application process. This evidence-based practice that focuses on applying PLC structures and building a culture of shared responsibility and collective teacher efficacy between general and special educators in maximizing learning for all students is essential to work of the SSIP. It is anticipated that schools involved in this initiative will install/expand a PLC culture by ensuring that all subgroups of students are addressed collectively. Additionally, it is anticipated that schools will experience increases in the number of students with disabilities being educated in general educated content settings, with access to core instruction. In this PLC culture, it is also anticipated that teachers will grow in self and collective efficacy with knowledge and implementation of UDL, HLPs and innovative service delivery models.

High Leverage Practices:

Survey data acquired during this phase of the SSIP revealed improvement in year-to-year comparisons for Arkansas novice special educators' self-efficacy with applying high-leverage practices (HLPs) in their everyday work. In FY 19, only 22% of novice special educators indicated that they felt confident applying HLPs in their everyday work. Contrastively, FY20 survey data indicated an increase in special educators' self efficacy with 35% indicating confidence in the application of HLPs. In FY19, 49% of survey respondents indicated low or no confidence applying HLPs. In FY20, only 28% of respondents indicated low or no confidence with HLP application. As next steps, the SSIP will continue to leverage agency infrastructure and supports to increase state-level capacity and knowledge of HLPs, with a focus on agency unit leaders, regional content specialists, agency technical assistance providers, IHEs and the state's parent training center. The SSIP will also continue to intentionally collaborate with Educator Effectiveness and IHEs around efforts to mentor all novice administrators and general and special educators with HLPs. It is expected that the scaling of work around HLPs will better equip general and special educators to be more confident in knowledge and skills of working with diverse learners, and that improved self-efficacy will encourage more novice teachers to remain in the profession.

Advancing Inclusive Principal Leadership:

Arkansas recognizes that administrators play an important role in guaranteeing that students and teachers have access to necessary supports. DESE has been directly supported by CCSSO's Advancing Inclusive Principal Leadership (AIPL) initiative and the SSIP SiMR will continue to be the overarching goal for this AIPL work. An integral component of AIPL has been related to embedding HLPs into statewide professional learning for principals and school leadership teams. In addition, DESE plans to develop and expand the Inclusive Practices PLC Project within additional schools to serve as working laboratories for the PLC at Work® process, conducting action research, and sharing best inclusive practices with other schools throughout the state. This project will continue to have an intentional focus on ensuring that students who are IEP eligible as well as other groups of struggling learners have meaningful access to core instruction and established systems of intervention. Arkansas will also advance strategy one by creating an additional statewide inclusive practices training campaign focused on "the how" of inclusive practices. Promotion and expansion of new inclusive practices branding and an inclusive practices website will be a next step. With improved website access to resources that align with state initiatives, LEAs will be able to see that this work stretches beyond special education and is important for all stakeholders. Beyond improvements to the SiMR, DESE anticipates a continuous cultural shift that follows the Least Dangerous Assumption, where all Arkansas students will be considered general education students first and will be served in Least Restrictive Environments. It is expected that Arkansas' LRE data will continue to improve with this continuous cultural shift. It is also anticipated that principals will grow in self-efficacy of how to serve as an inclusive instructional leader at the building level.

Strategic Instructional Model:

Though the SSIP SiMR is focused on literacy value-added growth scores for SWD in grades 3-5, Arkansas recognizes the need to provide supports for all students regardless of grade. Arkansas will continue to expand supports for the Strategic Instructional Model, with an emphasis on the following SIM Learning Strategies and Content Enhancement Routines: Inference Strategy, Proficiency in Sentence Writing Strategy, Main Idea Strategy, Listening and Note-taking Strategy, Vocabulary LINCing Routine/Strategy, Fundamentals of Sentence Writing Strategy, Unit Organizer Routine, and the Framing Routine. These strategies and routines have been offered via face-to-face and virtual sessions by content specialists through a partnership with the University of Central Arkansas Mashburn Center for Learning Team. The next steps for this work are to partner with the DESE Digital Learning Unit to scale the reach and sustainability of this work by offering SIM professional learning opportunities via a learning management system, followed by job-embedded coaching.

Response to Intervention, UDL, Inclusive Practices:

Relative to strategy two, Arkansas will leverage the SPDG to build upon previous work around RTI for academics and behavior, and embed HLPs and other EBPs to directly continue and align with the SSIP. A Synthesis of Feedback and Recommendations from the Field was completed by the Office of Innovation for Education at the University of Arkansas in April of 2020. Multiple educator focus groups' provided perspectives for the development of future professional learning in Arkansas. Given the need for educators to increase their self-efficacy, knowledge, and skills in educating students with various learning needs, the SPDG will support strategy two of the SSIP by focusing on the following: 1. Transform and expand Arkansas' statewide coherent system of supports through competency-based professional learning and coaching that will increase the implementation of high-leverage and other evidence-based practices (including RTI), which will result in improved outcomes for SWD. 2. Through personnel development and ongoing assistance, increase the capacity of regional and LEA teams to offer high-quality professional learning with a focus on implementing and sustaining integrated HLPs and other EBPs within a coherent system of support. 3. Increase the knowledge, skill, and implementation of UDL, HLPs and EBPs by offering general and special educators choice in competency-based professional learning with the added goal of certification, micro credential, and/or badge-recognition as well as a potential educator stipend. In addition to improving the SiMR, outcomes from this work are anticipated to promote improvements with LRE and teacher efficacy. Schools involved in direct SPDG support will continue to be included in the SiMR data set.

Section C: Stakeholder Engagement

Description of Stakeholder Input

In Spring 2021, Arkansas began developing a plan of action to establish a representative broad stakeholder group from across the state to compliment the work of the Special Education Advisory Council regarding the baseline and target setting for the State Performance Plan/Annual Performance Report (SPP/APR). Invitations were sent to 46 individuals of which many have dual roles. Only one person declined the invitation. This select stakeholder group represented the five regions of the state, multiple race/ethnicities and included both males and females. Further the representation was comprised of 12 parents, 4 related service providers, 8 early childhood providers, 2 early childhood coordinators, 12 district special education supervisors, 7 general/special education teachers, 4 personnel from state agencies, and 4 superintendents/principals. This stakeholder group, as well as advisory members, DESE OSE staff and TA providers, participated in a series of webinars on indicator target setting and improvement activities. Each session was split into breakout rooms so the groups were small enough to encourage discussion. The SSIP Coordinator and the IDEA Data and Research Director served as leaders and facilitators of this process.

In addition to SPP/APR stakeholder group meetings, the SSIP Coordinator was directly involved with seeking stakeholder feedback at each State Special Education Advisory Council meeting. The State Advisory meetings held in April, July, and October 2021, and January 2022 focused on setting new targets and discussion of improvement strategies. The Advisory Council representation includes: Parents (10), Adult Corrections, Advocates (2), AR Rehabilitation Services (2), Career & Technical Education (2), Center for Exceptional Families (PTI), Foster Care, Higher Education, Juvenile Corrections, LEA Special Education Supervisors, McKinney-Vento Administrator, Teachers (4), Private School, and Public Charter Schools. During these meetings, the council members and any public participants were provided updates on the previously held stakeholder input sessions, compliance indicators were discussed, dispute resolution indicators, and the SSIP. The July 2021 meeting provided an overview to the Advisory Council of stakeholder engagement meetings and input on baseline and target setting for Indicators 1, 2, 3, 4, 5, 6, and 17. The October 2021 meeting discussed the effect of the new graduation and drop out measurements on the local APRs and an update on the SSIP. The January 2022 Advisory Council presentation provided an overview of the APR with the targets set for the next six years, including the SSIP with feedback solicited prior to the final submission.

Opportunities for SSIP stakeholder engagement were also provided at conferences. The Arkansas School-Based Therapy Conference was held in September 2021 with 220 participants, and the Arkansas Collaborative Consultants Fall Convening was held in October 2021 with 84 participants. At both meetings, components of the SSIP improvement strategies were discussed and feedback solicited on the messaging, inclusion of initiatives and overall direction of the plan. Feedback was provided on the SSIP Theory of Action, and as a result, Universal Design for Learning was added as an initiative to explore within Arkansas' coherent system of support.

To gather more family input, a special stakeholder session was held with a group of parents organized by one of State's PTI centers, in December 2021. Although many families were invited to participate only three were available to attend. However, the information shared was also sent to the families who were unable to attend that day with instructions on how they could provide feedback. An overview of previous stakeholder input was provided on Indicator 17, with opportunities to provide additional feedback on the final targets and activities.

A separate Indicator 17 SSIP stakeholder input session was provided with administrators from SSIP targeted school districts in January 2022. This session focused on SSIP updates surrounding state initiatives, and the State-identified Measurable Result (SiMR) targets through FFY2025. Feedback on the SiMR and the initiatives in the SSIP was requested.

The current state initiatives involved with inclusive practices and outlined in the SSIP theory of action are being scaled to include greater numbers of educators and administrators across Arkansas, and to build capacity for job-embedded coaching supports. As more educators are trained in how to implement major initiatives, it is anticipated that progress towards the targets outlined in the SPP/APR will be accelerated.

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

The stakeholder engagement strategies primarily utilized for the SSIP include clarifying goals, working with partner organizations, using multiple meeting opportunities, communicating often, using multiple means of submitting feedback and identifying key individuals who will champion the work. The SSIP Coordinator, UALR Data and Research Director and State Implementation Team from DESE have provided regular updates to, and requested feedback from, external stakeholders including the Special Education State Advisory Council and Special Education LEA Supervisors to keep these groups informed as well as to solicit their feedback. Increased involvement with the state's family engagement center, The Center for Exceptional Families (TCFEF) was a primary focus during this cycle of the SSIP. The SSIP partnered with TCFEF to gather qualitative data and video vignettes on the educational experiences of 15 diverse families within Arkansas capturing their experiences navigating public schools and the special education process. The data for this project are still being collected for public use at the time of this report, however, the goal is to gain valuable perspectives that will help to refine the Theory of Action for supports and services that best leverage family involvement and engagement. This effort directly aligns with HLP 3, which pertains to Collaborating with Families to Support Student Learning and Secure Needed Services.

The SSIP Coordinator is frequently involved with SPDG and SPMT leadership, as well as with the Arkansas Association of Special Education Administrators' meetings. Feedback on the SSIP is regularly solicited through these collaborations. The SSIP Coordinator also serves as a team member on the AIPL initiative to increase the capacity of administrators to be inclusive leaders. As part of the annual DESE monthly LEA technical

assistance calls, the SSIP Coordinator and the Associate Director of Special Education provide updates to LEA Special Education Supervisors about the infrastructure work taking place as well as solicit their feedback on the process. Continued intentional collaboration between the DESE and the Arkansas Collaborative Consultants (Professional Development Outreach) to better support LEAs has occurred through monthly meetings and the coordinated application of the SSIP theory of action into professional development, coaching and training support and facilitation.

The DESE Director of Special Programs, SSIP Coordinator, SPDG Director, and the DESE-OSE Coordinator for Assessment collaborate monthly with other Division of Learning Services representatives, including all content leaders for DESE. These meetings provide opportunities for the work of the DESE-OSE and the SSIP to be interwoven into broader DESE content initiatives, as well as feedback to be solicited from content experts.

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

NO

Describe how the State addressed the concerns expressed by stakeholders.

NA

Additional Implementation Activities

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

Recognizing the need to calibrate initiatives and supports for all learners, and to ensure that the SSIP is reflective of supports for diverse disabilities, a collaborative group of stakeholders will meet monthly to discuss the evidence-base and application of literacy supports for students with complex learning needs. Two Arkansas Children and Youth with Sensory Impairment (CAYSI) initiatives relate to gaining access to the general education curriculum (GEC), specifically in literacy, and helping educational teams implement appropriate communication systems. This group of stakeholders will examine extant evidence for literacy supports for students with deafblindness, and work to collectively align the evidence with ongoing initiatives, including R.I.S.E..

In addition, the State's Lead R.I.S.E. Specialist, the DESE-OSE Coordinator for Curriculum and Assessment and the SSIP Coordinator will participate in the Standards-Aligned Instruction for Literacy (SAIL) cross-state collaborative addressing the evidence base and literacy supports for students with complex learning needs.

These new activities align well with Universal Design for Learning which was added to the SSIP Theory of Action during this reporting cycle. As Arkansas moves towards a nested system of professional learning, the intended results from the activities listed above will result in a plan for continuous improvement for building capacity in meeting educational needs of complex learners educated in least restrictive environments.

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

The timeline for above-listed additional activities will be monthly literacy group stakeholder meetings beginning in October of 2021 through June 2022. Initially, data collection will be limited to qualitative conversations based on agendas and meeting minutes. As the engagement deepens, it is anticipated that more quantitative data will be captured as needed to respond to stakeholder questions. Aligning the evidence base of the science of reading with UDL, high leverage and evidence-based practices and through the lens of diverse high and low incidence disabilities will guide the development of professional learning supports for LEAs in Arkansas to provide better instruction for students with cognitive/communicative/behavioral or other complex needs. With improved, standards-aligned instruction in the area of literacy, it is anticipated that students' value-added growth scores will yield moderate to high growth, which directly relates to the the Arkansas SiMR.

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

NA

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

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

17 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Jody Fields

Title:

Special Education Data Manager

Email:

jafields@ualr.edu

Phone:

501-916-5861

Submitted on:

04/28/22 10:58:08 AM

ED Attachments



AR-B-Dispute-Resol
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AR-2022DataRubric
PartB.xlsx



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2b.pdf