

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2022**

Arkansas



PART B DUE February 1, 2024

**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 2022-2023 school year, Arkansas' educational system was comprised of 256 school districts and open enrollment charter schools, three state agencies (Arkansas School for the Blind, Arkansas School for the Deaf, and Division of Youth Services), 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 276 programs.

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The Office of Special Education's website is <https://dese.ade.arkansas.gov/Offices/special-education>

Number of Districts in your State/Territory during reporting year

276

General Supervision System:

The systems that are in place to ensure that the IDEA Part B requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions).

The DESE's Office of Special Education (OSE) is composed of the following sections. To learn more about each section go to the OSE website at <https://dese.ade.arkansas.gov/Offices/special-education>.

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) 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) manages the due process hearing and complaint investigation systems, 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 appropriate 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 MPE section focuses on 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 Early Childhood Special Education (ECSE) section ensures that a Free Appropriate Public Education is available & provided to all children with disabilities ages 3-5 in Arkansas and works collaboratively with the MPE section to monitor early childhood programs.

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 partners with Curriculum and Assessment, DRS, MPE, SSIP and SPDG staff, along with other divisions within the agency, to assist LEAs, institutions of higher education, and state and private agencies, parents, and the general public in the development of programs and trainings to improve services for students with disabilities.

The State Personnel Development Grant (SPDG) utilizes competency-based professional learning and ongoing coaching to increase the implementation of high-leverage and other evidence-based practices at the regional, district, and school levels for behavior and academics, with a literacy focus.

The Funding and Finance Section's role in general supervision is ensuring the appropriate use of IDEA funds and state and local funds budgeted explicitly for special education. This section supports LEAs in developing all grant applications and budgets pertaining to IDEA federal, state, and local funds. The OSE has implemented a risk-based fiscal monitoring system 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 to enhance 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.

The OSE's structure creates a general supervision system in the following ways: 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 and DESE to carry out the 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 MPE staff serve as state complaint investigators which creates natural collaboration with DRS.

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 correlate 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, OSE requires a compliance action plan (CAP) to address the deficiency. The CAP includes 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 the implementation of corrective actions. Individual LEAs may be required to conduct a self-review of policies, procedures, and practices to address identified findings, with the corresponding timelines for review, to specify their implementation of corrective actions. The OSE staff monitoring the public agency will require revisions to the plan if the efforts appear ineffective. Before 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 the correction of noncompliance. Public agencies must submit written assurance and/or evidence that the deficiencies noted within a CAP are corrected as directed. When written assurance is provided, evidence documenting the public agency's progress in correcting the deficiencies must be available at the public agency for OSE staff review. Upon receiving all requested evidence noted in a CAP and complete correction verification by the OSE staff, the OSE will notify the public agency of its compliance status.

The correction of noncompliance, from a hearing decision or complaint, 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, evidence-based technical assistance and support to LEAs.

The State provides professional development (PD) & technical assistance (TA) to LEAs around compliance & performance indicators through a variety of mechanisms based on established needs. The MPE & EC sections provide targeted TA for compliance & program improvement based on risk factors including monitoring findings, desk audits, APR Determinations, Indicator Data, referrals from the other units within the agency, & other information. The Dispute Resolution section provides TA to districts when noncompliance is identified through complaints or hearings.

The IDEA Data & Research unit provides PD to LEAs focused on data reporting, data use, & data literacy capacity building. Other various consultant groups provide TA around student-specific issues & program improvement in an effort to build capacity within the LEA. In alignment with the State Systemic Improvement Plan (SSIP) these consultants are involved in a multi-year shift towards sustainable job-embedded professional learning. Much of the TA work focuses on the principles of implementation & improvement science.

An online referral system, Central Intake and Referral/Consultant Unified Intervention Team (CIRCUIT), continues to be used to meet TA requests around specific needs, & consultants are assigned based on the referral type. A central entity receives referrals & assigns the case to a consultant group. Evidence-based practices & Universal Design for Learning principles are used in the provision of technical assistance, & each TA provider participates in ongoing approved PD to improve their knowledge, skills, & coaching capacity. When student-specific requests are initiated, TA efforts to support LEAs are delivered with an intentional focus on growing the capacity of the LEA to meet the needs of that student & future students with similar needs. Memorandums of Understanding (MOUs) outline required skills & functions of each consultant group. TA activities are logged in monthly activity reports & reviewed by the administrative team in the OSE. Special Education Consultant Teams deployed through CIRCUIT include the following:

Arkansas Transition Services (ATS): The mission of ATS is to effectively assist students with disabilities, educators, parents, agency personnel, & community members in preparing students to transition from school to adult life & reach positive post-school outcomes. To improve transition outcomes for students with disabilities, ATS staff provide technical assistance, training, & consultations to special education teachers, other relevant staff, & various agency personnel.

Arkansas Behavior Support Specialists (BSS): The BSS focus on providing districts with the training, coaching, implementation, & alignment of evidence-based behavioral practices. Regional training & onsite coaching are provided to LEAs through two multi-year projects called AR THRIVE and BX3. The AR THRIVE Leadership Academy is an intensive, hands-on, multi-day training for school leaders to increase capacity to lead multi-tiered systems of support (MTSS) for positive behavior & mental health at the school level. The BX3 Project centers on the capacity of building-level behavior teams within districts through participation in professional learning & coaching focused on behavior supports to improve school wide & individual student behavior outcomes.

Accessible Educational Materials (AEM): The AEM consultant assists LEAs with TA accessible materials that are designed or converted in a way that makes them usable across the widest range of student variability regardless of format. The AEM consultant provides support to LEAs, regional education service cooperatives, & families with professional learning on current and emerging technologies.

Arkansas Public School Resource Center (APSRC): The APSRC Special Education Consultant supports charter schools & families by providing PD & assistance with IEP development, paperwork, the law & due process, & inclusive education.

Educational Services for the Visually Impaired (ESVI): ESVI provides consultation to LEAs in the use of recommended low vision devices & direct instruction in mobility devices, recommendations for large print or Braille books, & for assistive equipment and materials. For cane users, ESVI provides Orientation & Mobility lessons. Additionally, ESVI consultants assist with Functional Vision Assessments, Learning Media Assessments, Orientation &

Mobility Assessments, & Assistive Technology Assessments.

Arkansas Brain Injury School Support Program (BISSP): BISSP utilizes a MTSS approach to support LEAs to ensure personnel receive the PD & assistance needed for students with brain injury (BI) to successfully re-enter the education setting. With a focus on integration of interdisciplinary supports, the BISSP includes consulting with LEAs on intervention strategies that assist in managing student behavior, enhancing academic achievement of low performing students, assessment & identification of students potentially in need of special education services, & the provision of PD to faculty & administrators regarding BI. The BISSP builds cohesion among state agencies to improve coordination between medical, educational systems & families. The ARBISSP coordinator meets with families of students with brain injury prior to discharging from a hospital inpatient unit.

Children and Youth with Sensory Impairments (CAYSI): The CAYSI program serves individuals from birth to age 21 who are deaf-blind or who are at risk for deaf-blindness. CAYSI consultants provide training, TA, & information to families, educators, & others who work with these individuals. CAYSI supports the philosophy of inclusion of the individual with deaf-blindness in educational, vocational, recreational, & community environments.

Easterseals Outreach Program and Technology Services (esOPTS): esOPTS builds the capacity of district and school teams to implement evidence-based & high-leverage practices that positively impact student outcomes. esOPTS team members serve as regional consultants working with school teams by providing PD, consultation, coaching, & specialized psychoeducational assessments. In addition to addressing student-specific needs through the CIRCUIT referral process, esOPTS also provides targeted assistance to districts interested in developing sustainable programs for all students in the areas of educational programming, assistive technology, & pediatric feeding disorders.

Educational Audiology and Speech Pathology Resources for Schools (EARS): EARS services include managing hearing screening programs, assisting with amplification & other classroom technical assistance, & making recommendations for accommodations/modifications for students with auditory processing disorders. A full range of evaluation services are available to LEAs including audiological assessments, counseling/guidance for parents, & hearing conservation education. Speech pathology services include specialized assessments, classroom observations, assistance with writing appropriate goals, & modeling therapy with individual students.

The Arkansas Deaf Educational Services Consultant works alongside EARS & CAYSI to increase the capacity & efficacy of LEAs in service provision to students who are deaf/hard of hearing. The consultant provides general, targeted, & intensive TA, PD, and coaching designed to improve outcomes for students who are deaf/hard of hearing & advance inclusive education.

Related Services Coordinators: The Related Service Coordinators (RSCs) work to build LEA capacity with educational speech-language pathologists, occupational therapists, & physical therapists. The RSCs promote the provision of inclusive related services to improve educational outcomes & ensure FAPE. Support for RS Assistants is also provided.

SSIP Coordinator: The SSIP coordinator works with all TA mechanisms to facilitate coherence within the State's support system in alignment with IDEA & ESSA.

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 (PD) and technical assistance (TA) 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 PD around systemic implementation of Universal Design for Learning (UDL), collaboration between general/special educators and related services, high-leverage and evidence-based practices, specific issues, and program improvement in order to build capacity within each LEA.

To enhance the provision of special education services for children with disabilities, the OSE continues to be involved in interagency collaborations. 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. Additionally, the OSE engages with content specialists at all regional educational service cooperatives to promote access to quality, tier one instruction with additional supports as needed.

The consultant teams include:

IDEA Data & Research provides PD opportunities to LEAs focusing on data reporting, data use, and building data literacy capacity.

When student-specific requests are initiated in the online referral system, the Central Intake and Referral/Consultant Unified Intervention Team delivers TA with a focus on growing the capacity of the LEA to meet the needs of that student and future students with similar needs.

The Arkansas Public School Resource Center Special Education Consultant increases the capacity of LEAs by assisting with IEP development, paperwork, the law and due process, and provides PD on inclusive practices.

Serving all 75 counties, Arkansas Transition Services (ATS) staff provide TA, PD, and consultations to LEAs, special education teachers, and other relevant staff, as well as to various agency personnel. Every other year, ATS holds a statewide conference focused on transition program improvement and increasing the skills of transition teams.

In alignment with DESE's Division of Educator Effectiveness and the SSIP, the State Personnel Development Grant (SPDG) works with districts and education service cooperatives to provide job-embedded PD on UDL, HLPs, and coaching practices.

The Arkansas Behavior Support Specialists (BSS) provide regional, district, building-level training and support via in-person PD and online modules. BSS services include training, consultation and coaching on evidence-based behavioral practices (e.g., essential behavior concepts, functional behavior assessment, behavior intervention plan development, school-wide positive behavior supports, behavior data collection, classroom behavior management and assistance with program development) to meet the social and behavioral needs of students with disabilities.

The Arkansas Co-Teaching Project assists LEAs in improving the least restrictive environment (LRE) and ensuring students have access to and make progress in the general education curriculum. The co-teaching project partners with Johns Hopkins University's Center for Technology in Education to implement a year-long blended Boundless Learning Co-Teaching PD package in Arkansas.

The Accessible Educational Materials consultant provides assistance to LEAs related to materials that are designed or converted in a way that makes them usable across the widest range of student variability regardless of format.

The Education Services for the Visually Impaired (ESVI) consultants collaboratively work with LEAs to 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; and recommendations for large print or Braille books and for assistive equipment and materials.

The Arkansas Brain Injury School Support Program (BISSP) offers statewide TA through PD on a variety of topics including prevention, identification, assessment, and programming for students with mild-moderate-severe acquired brain injury (BI). Targeted TA is offered to support the needs of the LEA or regional education cooperative in establishing a system of support for students with BI at the local level. The BISSP consultants provide PD and coaching to LEAs on intervention strategies that assist in managing student behavior, enhance academic achievement, identification of students potentially in need of special education services, the provision of PD to school faculty and administrators, and concussion management with emphasis on Return to Learn protocols.

Speech-Language services include TA on a variety of communication, regulatory, and service delivery issues; information in the form of PD and self-study materials; and a resource and equipment loan program which includes professional texts, assessment tools, 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.

Children and Youth with Sensory Impairments (CAYSI) takes a proactive approach to providing TA and PD designed to empower students, families, and education teams with the knowledge and resources needed to thrive in the world of education. This type of engagement encompasses a comprehensive teacher resources packet, information pertinent to deafblindness, and evidence-based resources tailored to enhance the educational experience of students with deafblindness. CAYSI extends its outreach to include topics such as access to the general education curriculum, the student's mode of communication, and the development of transition plans.

Easterseals Outreach Program and Technology Services (esOPTS) provides support to build the capacity of districts and school teams to implement evidence-based and high-leverage practices that positively impact student outcomes. This support includes providing PD on a variety of topics accompanied with coaching support. esOPTS learning opportunities utilize adult learning principles and UDL to ensure optimal skill and knowledge development to improve student results.

In addition to providing PD and TA to LEAs for students who are deaf/hard of hearing, Educational Audiology and Speech Pathology Resources for Schools (EARS) also offers an online YouTube channel and LiveBinder that LEAs may access for information on best practices for working with children who are deaf/hearing loss. A Teacher of the Deaf consultant works in conjunction with the EARS team to ensure that high leverage assessment and instructional practices are promoted for students who are deaf/hard of hearing.

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 supports educational interpreters working in Arkansas public schools by offering reimbursement for taking the Educational Interpreter Performance Assessment 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.

Medicaid in the Schools (MITS) services include training and TA 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.

Stakeholder Engagement:

The mechanisms for broad stakeholder engagement, including activities carried out to obtain input from, and build the capacity of, a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting and any subsequent revisions to targets, analyzing data, developing improvement strategies, and evaluating progress.

In Spring 2021, Arkansas developed a plan of action to establish a representative broad stakeholder group from across the state to complement 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 composed 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 work with this core group continued throughout the 2021-22 school year. Following the submission of the new targets for the FFY 2020-2025 SPP/APR cycle, the OSE has continued to collaborate closely with numerous partners through various initiatives in order to obtain authentic engagement and reciprocal exchange of information regarding the targets and implementation of activities.

To increase the capacity of diverse groups of parents from across the state OSE partnered with The Center for Exceptional Families (TCFEF), Arkansas' Parent Training and Information (PTI) center. TCFEF maintains a diverse database of families of students with disabilities from across the state, and engages with them via social media, virtual and in-person meetings, and through email. The OSE partnered with TCFEF during the target setting for the FFY 2020-2025 SPP/APR cycle and maintains ongoing collaboration to solicit stakeholder feedback regarding indicator target updates and implementation of activities. To ensure broad input of stakeholders and eliminate barriers to participation, OSE and TCFEF incorporated the principles of Universal Design for Learning into presentations and materials as well as offering translated documents in other languages. During the 2022-23 school year, TCFEF engaged with families through school meetings, phone calls, training sessions, and family events. Through these interactions, families provided feedback to TCFEF which was used to inform the OSE on initiative implementation efforts.

Our State Special Education Advisory Council is an integral group of stakeholders who provide input on target setting and improvement activities with meetings being held quarterly in January, April, July, and October. Each meeting provides a forum for solicitation of feedback regarding SPP/APR targets and the SSIP Theory of Action. The Advisory Council representation includes: Parents (9), 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 public participants are provided updates on the previously held stakeholder input sessions, compliance indicators, dispute resolution indicators, and the SSIP. Meeting agendas are available at the following website: <https://dese.ade.arkansas.gov/Offices/special-education/advisory-council>.

The Arkansas Association of Educational Administrators (AAEA) is an agency of diverse school leaders that promotes quality public education for all children in Arkansas. The OSE maintains a close partnership with AAEA, and particularly the constituent groups of Beginning Administrators (BA) and Special Education Administrators (AASEA). These partnerships provide avenues for broad stakeholder input on all targets in the SPP/APR, and any need for subsequent revisions to the targets. During this reporting cycle, the BA subgroup continued to provide input through the OSE and AAEA's Advancing Inclusive Principal Leadership (AIPL) initiative. More information on the AIPL initiative and the alignment work to Indicator 17 can be found at the following websites: <https://ccssoinclusiveprincipalsguide.org/policy-to-practice/case-study-arkansas/> and <https://sites.google.com/view/inclusive-practices/home?authuser=0>.

Additional stakeholder input continued to be acquired through the following statewide training opportunities:

The Inclusive Practices Project has an intentional focus on inclusive practices, ensuring students who are IEP eligible, as well as other groups of struggling learners, have meaningful access to core instruction and established systems of intervention. Participating schools engage in a collaborative evaluation process that gathers data regarding student achievement, teacher practices, and effective professional development. This project is directly aligned with several key indicators, but is especially integral to supporting Indicator 5 (LRE) and Indicator 17 (SSIP). Schools supported by this initiative are factored into the Arkansas State-identified Measurable Result (SiMR). These LEAs form a key constituency group for ongoing input on targets and revisions. More information about this project can be found at this website: <https://dese.ade.arkansas.gov/Offices/special-projects/inclusive-practices-project>.

The ALL IN Initiative of the OSE promotes equitable access to core instruction to foster greater opportunities for students to reach college, career, and life goals. The Inclusive Practices website provides important information for stakeholders in the areas of Least Restrictive Environment (LRE), Universal Design for Learning (UDL), High-Leverage Practices (HLPs), Inclusive Principal Leadership, Inclusive Related Services, Parent Resources, Flexible Service Delivery, Scheduling, IEP Documentation and Videos for Implementation Support. During this reporting period, the website expanded to include a Toolkit specifically for Inclusive Practices. The Toolkit provides educators and families with the knowledge and resources to support local efforts and to further advance the shift to inclusive education to improve outcomes for students with disabilities. Additional information on this initiative can be found on the following website <https://sites.google.com/view/inclusive-practices/home>. As part of the ALL IN Initiative, the Learning for All statewide trainings were unveiled in this reporting period and presented in every regional educational service cooperative across the state to over 3000 participants. Learning for All emphasizes two key considerations for achieving inclusive education: Universal Design for Learning and Executive Functioning. In addition, during this reporting period a meeting occurred with the Arkansas Educator Preparation Program Council of Deans to present the ALL IN message and the SSIP Theory of Action. Input from the Council was requested on the direction of this work and the connectivity between higher education preparation programs. As a result of this collaboration, the Council decided to include high-leverage practices into the curricula.

The Early Childhood Special Education (ECSE) section focuses on improving results for children with disabilities & ensuring all LEAs meet the IDEA program requirements. Through the Building Arkansas Strong through Inclusive Classrooms (BASIC) project, the ECSE section provides professional learning & coaching with intentionality on the expansion of high-quality early childhood inclusive education for all students, especially SWDs. To learn more about the BASIC project visit: <https://sites.google.com/view/the-basics-of-inclusion?usp=sharing>.

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

NO

Number of Parent Members:

86

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.

Arkansas established a representative broad stakeholder group from across the state to provide feedback on all targets for the SPP/APR in the spring of 2021. This select stakeholder group represented the five regions of the state, multiple race/ethnicities and included both males & females. Stakeholder representation was composed 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, & 4 superintendents/principals. This select stakeholder group, as well as state advisory members, OSE staff & TA providers, participated in a series of webinars on indicator target setting & improvement activities. Following the completion of the feedback sessions for target setting, the OSE maintained the following mechanisms to solicit continued stakeholder feedback.

State Advisory Council:

The State Special Education Advisory Council is an integral group of stakeholders who provide input on target setting and improvement activities with meetings being held quarterly in January, April, July, and October. The Advisory Council representation includes: Parents (9), 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 sessions, compliance indicators, dispute resolution indicators, & the SSIP. During the Advisory quarterly meetings, stakeholders are provided updates on the indicators, state initiatives, & are asked to provide input for future activities.

The Center for Exceptional Families (TCFEF)

The OSE partnered with TCFEF during the target setting for the FFY 2020-2025 SPP/APR cycle & maintains ongoing collaboration to solicit stakeholder feedback regarding indicator targets. TCFEF maintains a large database of families of students with disabilities, & engages with them via social media, virtual and in-person meetings, & through email. As part of the target setting, in December of 2021, TCFEF, the IDEA Data and Research Manager, and the SSIP Coordinator facilitated a statewide virtual event for families to provide feedback on the setting targets, data analysis, & improvement strategies. For families who could not attend the live virtual session, a link to a recording of this event was sent to TCFEF's broad network of families to review and provide input at their convenience. Further, TCFEF is a partner of the State Personnel Development Grant (SPDG) which directly aligns to the SSIP Theory of Action, and a representative serves on the SPDG Core Management team & functions as the Family and Community Liaison. Additional information can be found on the TCFEF and SPDG webpages at <http://thecenterforexceptionalfamilies.org> & <https://www.arspdg.org/parents-family/>. During the 2022-23 school year TCFEF provided 89 training sessions exclusively for parents on such topics as Understanding the Referral process, Understanding the IEP, and Understanding Behavior Plans. Through these and other interactions, TCFEF collected feedback from parents and families to inform OSE on implementation efforts.

Statewide Conferences

Opportunities for stakeholder feedback occurred at several state conferences. The ADE Summit, which is held each summer, provides opportunities for stakeholder input on key improvement strategies including the SSIP. State and national experts present on aspects of UDL, HLPs, master scheduling & collaboration. The sessions focus on the advancement of Arkansas' professional development system that is heavily supported by the SPDG. One combined session, supported by DESE Educator Effectiveness and the SPDG, focused on job-embedded professional learning (i.e., micro-credentials) for UDL and HLPs. This session is in direct alignment with the coherent improvement strategies outlined in the SSIP Theory of Action & solicited feedback on the perceived benefits and potential use of micro-credentials.

The Arkansas School-Based Therapy Conference was held in the summer of 2023 with approximately 500 participants, and the Arkansas Collaborative Consultants (OSE's technical assistance providers) Fall Convening was held in the summer of 2023 with 97 participants. At both, components of the Indicator 17: SSIP improvement strategies were discussed & 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 and executive functioning were highlighted as increasing areas of focus. OSE partnered with Maryland Coalition for Inclusive Education to facilitate a full-day training on aspects of capacity building and improvement strategies for inclusive education. While most participants at these conferences were educators & TA providers, parents of students with disabilities were also in attendance.

The ALL IN Initiative of the OSE promotes equitable access to core instruction to foster greater opportunities for students to reach college, career, & life goals. The Inclusive Practices website includes an Inclusive Education Toolkit and provides important information for stakeholders in the areas of Least Restrictive Environment (LRE), Universal Design for Learning (UDL), High-Leverage Practices (HLPs), Inclusive Principal Leadership, Inclusive Related Services, Parent Resources, Flexible Service Delivery, Scheduling, IEP Documentation and Videos for Implementation Support. During this reporting period, the Inclusive Education Toolkit expanded to include additional resources. The purpose of this Toolkit is to provide educators and families with the knowledge and resources to support local efforts and to further advance the shift to inclusive education to improve outcomes for students with disabilities. Use the following link to learn more about the Inclusive Education Toolkit: <https://drive.google.com/file/d/1hSV7vTAM3uTchtF0QB-em8Q5jMRCuPSj/view>. As part of the ALL IN Initiative, the Learning for All statewide training was continued across the state with over 3000 attendees. Learning for All emphasizes two key considerations for achieving inclusive education: Universal Design for Learning and Executive Functioning. In addition, during this reporting period a meeting occurred with the Arkansas Educator Preparation Program Council of Deans to present the ALL IN message and the SSIP Theory of Action. Input from the Council was requested on the direction of this work and the connectivity between higher education preparation programs. As a result of this collaboration, the Council decided to include high-leverage practices into the curricula.

Inclusive Practices Project

The current state initiatives involved with inclusive practices and outlined in the SSIP Theory of Action continued to scale up to include greater numbers of educators, administrators and families across Arkansas. Through the Inclusive Practices Project, LEAs have partnered with families to collaborate around data-driven decisions that occur with scheduling, placement, and access to core instruction through a tiered system of support. The conversations center around special education as a service, and not a place and highlight the importance of Indicators 1, 2, 5 and 17. Building off of the momentum of the 2022 Arkansas Teacher of the Year (ATOY), who is a special educator and a champion for inclusive practices, a series of inclusive education videos were developed and are available on the state's professional development learning management system called Arkansas IDEAS.

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.

Part of OSE's ALL IN initiative, Learning for All is a training presented statewide at regional education service cooperatives (ESC) to support ESC specialists & district/school-level personnel, with additional focus on districts/schools identified as needing targeted support under Arkansas' ESSA Plan. ALL IN promotes equitable access to core instruction to foster greater opportunities for students with disabilities (SWDs). To advance ALL IN, the Inclusive Practices website provides access to an Inclusive Practices Toolkit for educators & families. For additional information visit <https://sites.google.com/view/inclusive-practices/home>.

Serving the entire state & regionally aligned to each ESC, the Arkansas Collaborative Consultants (ACCs) implement a coordinated approach to provide LEAs, educators, families & students with services to maximize outcomes for all students, especially SWDs. Using a coherence & value-creation framework, the ACCs strategically & intentionally support the SSIP & other Part B Indicators. All consultants assist in implementing tiered supports for educators & families. The ACCs embed research-based information, UDL & HLPs into the following implementation activities.

The Centralized Intake & Referral/Consultant Unified Evaluation Team (CIRCUIT) system can be requested by parents/guardians or LEA administrators. Through CIRCUIT, State Special Education Consultants assist LEAs with interventions needed for students with sensory, intellectual & multiple disabilities, disruptive and/or self-injurious behavior, autism spectrum disorders, brain injuries or other disability-related needs.

The Arkansas Behavior Support Specialists (BSS) lead BX3, a capacity building project for LEAs, that includes a key component of family stakeholder input. The BSS provide direct support to students, families & LEAs through the CIRCUIT system. To learn more on the BSS family resources visit <https://arbss.org/familyresources/>.

The Arkansas Brain Injury School Support Program (ARBISSP) builds cohesion among state agencies to improve coordination between medical, educational systems & families. The ARBISSP coordinator meets with families of students with brain injury prior to discharging from a hospital inpatient unit. These meetings allow families to express concerns & hopes for returning to school & community. This allows the ARBISSP to ensure LEAs, families & students receive the assistance needed to successfully return to & participate in school.

Arkansas Transition Services (ATS) assists SWDs, families, educators, agency personnel & community members to prepare students to transition from school to adult life & reach positive post-school outcomes. ATS activities include school transition fairs, CIRCLES (Communicating Interagency Relationships & Collaborative Linkages for Exceptional Students), Film Camp & parent involvement in person-centered planning for transition. Through College Bound Arkansas, families provide ATS with feedback & attend informational sessions to help their child succeed at the post-secondary level. ATS supports LEAs in the Self-Determined Learning Model of Instruction, an evidence-based practice that increases the capacity of educators to assist students to build critical 21st century learning & skills. In the Post-School Outcomes Pilot, ATS guides schools through an analysis of post-school outcome data collected one year after students graduate high school. Through this process, additional requests for services are made by former students & families in which ATS ensures these requests are met. To learn more, visit the ATS website: <https://arkansastransition.com/index.php/tools-and-resources/parents-family-members>.

The Children and Youth with Sensory Impairment (CAYSI) program assists families in gaining knowledge & skills regarding deaf-blindness that reflect the needs of the child. Technical assistance (TA) is developed by analyzing the family's capacity for leadership within school & community settings. CAYSI provides various levels of family support to improve outcomes for SWDs including home visits, parent groups, online seminars & service provider meet-and-greets.

The Early Childhood Special Education (ECSE) section ensures that a Free Appropriate Public Education is available & provided to all children with disabilities ages 3-5 in Arkansas. The ECSE section supports MPE to monitor special education programs for compliance with state & federal regulations & provides TA for program improvement. The ECSE section focuses on improving results for children with disabilities & ensuring all LEAs meet the IDEA program requirements. Through the Building Arkansas Strong through Inclusive Classrooms (BASIC) project, the ECSE section provides professional learning & coaching with intentionality on the expansion of high-quality early childhood inclusive education for all students, especially SWDs. To learn more about the BASIC project visit: <https://sites.google.com/view/the-basics-of-inclusion?usp=sharing>.

Educational Audiology and Speech Pathology Resources for Schools (EARS) provide free sign language classes for families of students who are deaf/hard of hearing (D/HH). In addition, student-specific support for assistive hearing technology, communication & academics are provided to families through a tiered system. The EARS program provides TA at community events for families of children who are D/HH. Quarterly newsletters are sent to LEAs & families to provide timely information on educational considerations & to highlight student success stories. To support EARS, the Deaf Educational Services Specialist meets with families to provide information on state programs, educational expectations & strategies to strengthen literacy support for children who are D/HH. To learn more about the family activities provided by Arkansas Deaf Educational Services visit: <https://www.ardeafed.org/families>.

Easterseals Outreach Program and Technology Services (esOPTS) facilitate student-centered planning for families to make informed decisions on the acquisition & services for assistive technology. The esOPTS website provides various training, events & resources specifically designed for families to support SWDs.

The Accessible Educational Materials Consultant assists families by providing accessible video demonstrations of current & emerging technologies available for students in conjunction with more in-depth training upon requests from students, families, LEAs & ESCs.

The Educational Services for the Visually Impaired (ESVI) provide consultation to families in the use of recommended low vision devices, large print or Braille books, instruction in mobility devices & assistive equipment. ESVI provides student-based activities to provide students & their families the opportunity to communicate with one another & strengthen relationships as families work alongside their child's teacher.

The State Personnel Development Grant (SPDG) provides training to LEAs focused on increasing support for families to improve outcomes for SWDs. To strengthen partnerships with families, the SPDG provides LEAs with family engagement newsletters that include services, resources & tools. The SPDG co-developed a professional learning micro-credential in collaboration with families from SPDG supported LEAs for HLP3: Collaborating with Families to Support Student Learning and Secure Needed Services. Families provided input & feedback during the development of the MC. The MC is available statewide via Arkansas IDEAS, the agency professional development learning management system.

In partnership with OSE, the 2022 Arkansas Teacher of the Year developed a series of educational videos for inclusive education to offer background information, teaching strategies & tips to help administrators, teachers & families as they navigate through the many transitions in a student's educational journey. The videos are available statewide via Arkansas IDEAS.

Soliciting Public Input:

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

In establishing the SPP/APR targets, the mechanisms for soliciting public input included the establishment of a core stakeholder group, state advisory council meetings, statewide conferences, and PTI lead webinars and in-person meetings for families. Public input was solicited for targets, data, and strategies via invitations 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. During these target setting sessions, 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.

The State Special Education Advisory Council is an integral group of stakeholders who provide input on target setting, analyzing data, improvement activities, and evaluating progress. During this reporting period, quarterly meetings for the Advisory Council were held in January, April, July, and October, and included the following representatives: Parents (9), 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 Advisory Council meetings, members and any public participants are provided updates on the previously held stakeholder sessions, compliance indicators, dispute resolution indicators, and the SSIP. Discussions include analyzing year to year changes and the different methodologies which could be applied. Additionally, these meetings focus on current and future state initiatives and how the initiatives could affect the data and impact student outcomes. Based on these discussions, council members provide input for future activities to inform the OSE on implementation efforts.

To collect input for analyzing data, develop improvement strategies, and evaluate progress, the OSE invites stakeholders to attend various meetings, conferences, trainings, and webinars through several methods including direct invitations, emails to LEAs, newsletters, Commissioner Memos (DESE website), placement on the DESE event calendar, and listserv postings. Stakeholder feedback is collected via notetaking, recording of sessions, participant surveys, and direct surveys on specific topics.

Several opportunities in which the OSE solicited stakeholder input and feedback include monthly LEA meetings, monthly meetings with the Arkansas Collaborative Consultants (ACC), yearly ACC Fall Convening, yearly Arkansas School-based Therapy Conference, yearly DESE Summit, monthly OSE meetings, monthly meetings with regional education service cooperatives, cross-agency content meetings, and statewide trainings such as ALL IN, Arkansas THRIVE, and the Inclusive Practices Project.

The inclusion of DESE and LEA special education staff in the implementation of state initiatives such as Arkansas THRIVE, ALL IN, and the Inclusive Practices Project directly affect multi-tiered systems of support (MTSS) for academics and behavior as well as student access to quality core instruction. The ALL IN initiative and the Inclusive Practices Project place focus on the advancement of inclusive education and includes the collection of participant feedback through engagement activities and survey data. Based on LEA and participant indicated needs, training improvements and revisions were made related to service delivery, scheduling, and data analysis for the purpose of ensuring all students have access to the general education curriculum. With greater access to MTSS and rigorous instruction alongside peers with and without disabilities, the results of these activities should be evident in the future by impacting several indicators and student outcomes.

During this reporting period, a collaborative meeting occurred with the Arkansas Educator Preparation Program Council of Deans. The ALL IN message

was presented as well as the SSIP Theory of Action. Input from the Council was requested on the direction of this work and the connectivity between high education preparation programs. As a result of this collaboration, the Council decided to include high-leverage practices into the curricula.

The Arkansas Transition Services hosts multiple opportunities for stakeholders to provide ongoing feedback and discussion related to Secondary Transition Indicators 1, 2, 13, and 14. Throughout the year, Arkansas Transition Services hosts sessions for LEAs, transition teams, families, and students to provide input and collaboratively develop action plans for transition program improvements. The Transition Services Summit includes sessions that analyze data and monitor progress related to all transition indicators. Cadre meetings center around the possible need for continued or different strategies and interventions. Stakeholder input and feedback is continuously considered as Secondary Transition Indicator progress is reviewed through the school year.

More information about the stakeholder sessions is provided under the Broad Stakeholder Input section.

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.

Stakeholder meetings in relation to target setting, data analysis and the development of improvement strategies for the FFY 2020-2025 SPP/APR are posted on the special education public reporting web page. This will be updated in early spring 2024

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 2021 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 2021 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 revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, 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

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 ED Facts 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 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2018	87.56%

FFY	2017	2018	2019	2020	2021
Target >=	85.10%	85.91%	86.72%	88.00%	88.00%
Data	83.80%	84.61%	82.58%	90.86%	89.76%

Targets

FFY	2022	2023	2024	2025
Target >=	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.

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.

In the 2022-23 school year, Arkansas saw it's first cohort of students graduate with an alternate diploma. We recognize that this group will be small and have already accounted for them when targets were set. Therefore, our stakeholders along with the State do not anticipate a change in targets in the future.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,622
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	54

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	13
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	382

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
3,622	4,071	89.76%	88.00%	88.97%	Met target	No Slippage

Graduation Conditions

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

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)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* 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 dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2018	10.69%

FFY	2017	2018	2019	2020	2021
Target <=	2.14%	1.98%	1.82%	10.00%	10.00%
Data	1.88%	1.62%	1.65%	7.28%	8.47%

Targets

FFY	2022	2023	2024	2025
Target <=	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.

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 flat rate of 10% as the target for all years. Ten percent is the average rate for recent years prior to the pandemic.

In discussion with stakeholders over the past year, by setting the drop out targets at 10% and the graduation target at 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 occurred in the 2022-23 school year.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (ED <i>Facts</i> file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,622
SY 2021-22 Exiting Data Groups (ED <i>Facts</i> file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (ED <i>Facts</i> file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	54
SY 2021-22 Exiting Data Groups (ED <i>Facts</i> file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	13

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	382

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
382	4,071	8.47%	10.00%	9.38%	Met target	No Slippage

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)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3A - Indicator Data

Historical Data:

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

FFY 2022 Data Disaggregation from ED Facts

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

01/10/2024

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	5,930	5,258	9,817
b. Children with IEPs in regular assessment with no accommodations (3)	5,549	4,872	8,906
c. Children with IEPs in regular assessment with accommodations (3)	2	8	7
d. Children with IEPs in alternate assessment against alternate standards	338	296	668

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

01/10/2024

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	5,929	5,259	9,817
b. Children with IEPs in regular assessment with no accommodations (3)	5,550	4,872	8,919
c. Children with IEPs in regular assessment with accommodations (3)	7	19	38
d. Children with IEPs in alternate assessment against alternate standards	337	296	665

(1) The children with IEPs who are English learners and took the ELP in lieu of the regular reading/language arts assessment are not included in the prefilled data in this indicator.

(2) 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.

(3) The term "regular assessment" is an aggregation of the following types of assessments, as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	5,889	5,930	99.16%	95.00%	99.31%	Met target	No Slippage
B	Grade 8	5,176	5,258	97.96%	95.00%	98.44%	Met target	No Slippage
C	Grade HS	9,581	9,817	96.68%	95.00%	97.60%	Met target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	5,894	5,929	99.27%	95.00%	99.41%	Met target	No Slippage
B	Grade 8	5,187	5,259	98.51%	95.00%	98.63%	Met target	No Slippage
C	Grade HS	9,622	9,817	97.24%	95.00%	98.01%	Met target	No Slippage

Regulatory Information

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

Public Reporting Information

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

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>

or

https://arksped.ade.arkansas.gov/documents/data_n_research/PublicReporting/PublicReportingAssessment202223.pdf

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response

The State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities participating in regular assessments who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State level. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3A - Required Actions

Within 90 days of the receipt of the State's 2024 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2022, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2023 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2023.

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	6.68%
Reading	B	Grade 8	2020	4.46%
Reading	C	Grade HS	2020	3.56%
Math	A	Grade 4	2020	14.23%
Math	B	Grade 8	2020	3.54%
Math	C	Grade HS	2020	2.58%

Targets

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

Targets: Description of Stakeholder Input

During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to establish the baseline using the data from 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.

Stakeholder have been informed of a new statewide regular assessment being implemented in the 2023-24 school year. Once the data is received, stakeholders will be engaged to ascertain if new targets and baseline are warranted. It may take a couple of years of data to determine if a new baseline year and targets should be established.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

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	5,551	4,880	8,913
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	448	251	399
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	0	1	0

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

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	5,557	4,891	8,957
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	997	201	201
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	0	0	1

(1)The term “regular assessment” is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	448	5,551	8.74%	7.13%	8.07%	Met target	No Slippage
B	Grade 8	252	4,880	5.41%	5.01%	5.16%	Met target	No Slippage
C	Grade HS	399	8,913	4.05%	3.85%	4.48%	Met target	No Slippage

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	997	5,557	13.43%	14.90%	17.94%	Met target	No Slippage
B	Grade 8	201	4,891	4.18%	4.11%	4.11%	Met target	No Slippage
C	Grade HS	202	8,957	2.18%	2.83%	2.26%	Did not meet target	No Slippage

Regulatory Information

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

Public Reporting Information

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

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)

3B - Prior FFY Required Actions

None

3B - OSEP Response**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 ED*Facts* 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	2022	2023	2024	2025
Reading	A >=	Grade 4	34.74%	36.83%	38.91%	40.99%
Reading	B >=	Grade 8	19.96%	22.05%	24.13%	26.22%
Reading	C >=	Grade HS	18.43%	20.52%	22.60%	24.69%
Math	A >=	Grade 4	18.35%	21.77%	25.20%	28.62%
Math	B >=	Grade 8	20.56%	24.82%	29.08%	33.33%
Math	C >=	Grade HS	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 data from the 2020/21 school year. 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.

With stakeholder input, Arkansas revised its criteria for alternate assessment participation. Over the past three years the percent of students participating in the alternate assessment has fallen below the 1% ESSA requirement.

FFY 2022 Data Disaggregation from ED Facts

Data Source:

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/10/2024

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	338	296	668
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	134	54	46

Data Source:

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/10/2024

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	337	296	665
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	44	30	119

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	134	338	36.42%	34.74%	39.64%	Met target	No Slippage
B	Grade 8	54	296	15.84%	19.96%	18.24%	Did not meet target	No Slippage
C	Grade HS	46	668	9.14%	18.43%	6.89%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

Pursuant to the ESSA requirement that States assess 1% or fewer of their students with the alternate assessment, Arkansas has aggressively put actions in place to ensure that only students with the most significant cognitive disabilities participate in the alternate assessment. These actions included adopting new alternate assessment criteria and providing significant technical assistance to districts that were over the 1%. Based on this work,

Arkansas has lowered the percentage of students who participate in the alternate assessment from well over 1% to below 1%. The students who have moved from the alternate assessment to general assessment were students with complex needs but who did not meet the criteria as having the most significant cognitive disabilities. These students were typically the highest functioning students who had participated in the alternate assessment. Since students with complex needs now participate in the general assessment, the proficiency rate for students with disabilities on the general assessment has slipped. Also, since the students who previously performed at the higher range on the alternate assessment no longer participate in that assessment, the overall proficiency rate for the alternate assessment also slipped. Additionally, at the high school level, students have had more years being instructed on lower levels when they hit high school, so the gap is bigger than in younger grades.

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	44	337	16.96%	18.35%	13.06%	Did not meet target	Slippage
B	Grade 8	30	296	13.66%	20.56%	10.14%	Did not meet target	Slippage
C	Grade HS	119	665	14.36%	23.24%	17.89%	Did not meet target	No Slippage

Provide reasons for slippage for Group B, if applicable

Pursuant to the ESSA requirement that States assess 1% or fewer of their students with the alternate assessment, Arkansas has aggressively put actions in place to ensure that only students with the most significant cognitive disabilities participate in the alternate assessment. These actions included adopting new alternate assessment criteria and providing significant technical assistance to districts that were over the 1%. Based on this work, Arkansas has lowered the percentage of students who participate in the alternate assessment from well over 1% to below 1%. The students who have moved from the alternate assessment to general assessment were students with complex needs but who did not meet the criteria as having the most significant cognitive disabilities. These students were typically the highest functioning students who had participated in the alternate assessment. Since students with complex needs now participate in the general assessment, the proficiency rate for students with disabilities on the general assessment has slipped. Also, since the students who previously performed at the higher range on the alternate assessment no longer participate in that assessment, the overall proficiency rate for the alternate assessment also slipped.

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)

3C - Prior FFY Required Actions

None

3C - OSEP Response

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 ED*Facts* 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 2022-2023 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2022-2023 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 2022-2023 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2022-2023 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	2022	2023	2024	2025
Reading	A <=	Grade 4	34.24	33.74	33.24	32.74
Reading	B <=	Grade 8	41.65	41.10	40.55	40.00
Reading	C <=	Grade HS	36.16	35.16	34.79	34.12
Math	A <=	Grade 4	32.81	32.30	31.79	31.28
Math	B <=	Grade 8	37.42	36.07	34.72	33.37
Math	C <=	Grade HS	27.31	26.84	26.38	25.91

Targets: Description of Stakeholder Input

During the stakeholder virtual and in person meetings on assessment, stakeholders agreed to establish the baseline using the data from 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.

Stakeholder have been informed of a new statewide regular assessment being implemented in the 2023-24 school year. Once the data is received,

stakeholders will be engaged to ascertain if new targets and baseline are warranted. It may take a couple of years of data to determine if a new baseline year and targets should be established.

FFY 2022 Data Disaggregation from ED Facts

Data Source:

SY 2022-23 Assessment Data Groups - Reading (ED Facts file spec FS178; Data Group: 584)

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	35,529	37,479	76,120
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	5,551	4,880	8,913
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	12,517	16,254	31,994
d. All students in regular assessment with accommodations scored at or above proficient against grade level	0	1	2
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	448	251	399
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	0	1	0

Data Source:

SY 2022-23 Assessment Data Groups - Math (ED Facts file spec FS175; Data Group: 583)

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	35,550	37,530	76,275
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	5,557	4,891	8,957
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	17,295	14,233	17,969
d. All students in regular assessment with accommodations scored at or above proficient against grade level	0	0	2
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	997	201	201
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	0	0	1

(1)The term "regular assessment" is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	8.07%	35.23%	29.01	34.24	27.16	Met target	No Slippage
B	Grade 8	5.16%	43.37%	41.12	41.65	38.21	Met target	No Slippage
C	Grade HS	4.48%	42.03%	34.85	36.16	37.56	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

Pursuant to the ESSA requirement that States assess 1% or fewer of their students with the alternate assessment, Arkansas has aggressively put actions in place to ensure that only students with the most significant cognitive disabilities participate in the alternate assessment. These actions included adopting new alternate assessment criteria and providing significant technical assistance to districts that were over the 1%. Based on this work, Arkansas has lowered the percentage of students who participate in the alternate assessment from well over 1% to below 1%. The students who have moved from the alternate assessment to general assessment were students with complex needs but who did not meet the criteria as having the most significant cognitive disabilities. Students with complex needs who are achieving well below grade level now participate in the general assessment. Because this group of students now participate in the general assessment, the proficiency rate for students with disabilities has slipped. The group of students who previously participated in the alternate have moved from an assessment that provided extensive accommodations and supports to the general assessment that is not as supported.

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	17.94%	48.65%	28.53	32.81	30.71	Met target	No Slippage
B	Grade 8	4.11%	37.92%	34.38	37.42	33.81	Met target	No Slippage
C	Grade HS	2.26%	23.56%	24.64	27.31	21.31	Met target	No Slippage

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs 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 2022 SPP/APR, use data from 2021-2022), 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 rates of suspensions and expulsions for 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 section 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 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 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 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon LEAs 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 child-specific and regulatory/systemic 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 QA 23-01, dated July 24, 2023.

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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target <=	30.00%	29.50%	29.50%	29.80%	29.50%
Data	Not Valid and Reliable	30.51%	29.51%	10.53%	

Targets

FFY	2022	2023	2024	2025
Target ≤	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 general education special education difference at 1.36 percentage points. The difference is calculated for all LEAs with comparable datasets and reported on the LEA APR profiles.

Further discussions over the past few years led to modifying the number of SWD each LEA must have with more than 10 days of OSS/expulsion to 5.

A minimum number of students was not established until FFY 2016 and revised in FFY 2020. Stakeholders believed identifying an LEA as having a significant discrepancy in discipline for exceeding the 1.36 percentage point difference and having 1 or 2 students exceed the 10 days, was punitive and a new cell size of 5 students was established for the numerator criteria. Stakeholders felt that the cell size of 5 was a more accurate representation of disciplinary discrepancies and it further aligned with the significant disproportionality cell size. To be identified as having a significant discrepancy in discipline, an LEA must have at least 5 SWD who received more than 10 days of out-of-school suspension or expulsions and a special education rate more than 1.36 percentage points above the general education rate.

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 2022 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.

251

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
8	27		29.20%	29.63%	Did not meet target	N/A

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

Definition

An LEA who has a at least 5 SWD with more than 10 days of OSS/expulsion and their special education rate more than the 1.36 percentage points above the general education rate are identified as having a significant discrepancy and are required to complete and submit a self-assessment for SEA review to determine if their identification is a result of inappropriate policies, procedures, and/or practices.

The denominator is comprised of LEAs with at least 5 students receiving more than 10 days of OSS/Expulsion. The numerator is comprised of the LEAs who in addition to meeting the denominator also has a percentage point difference greater than 1.36 when comparing special education rate to the general education rate for students with more than 10 days of OSS/Expulsion.

However, the difference between special education and general education is calculated for all districts even if they do not have at least 5 SWD with more than 10 days of OSS/expulsion.

The formula to identify if LEAs exceed the 1.36 percentage point difference is: Suspension and expulsion rate for children with disabilities – Suspension and expulsion rate for general education students = Difference between Special Education & General Education students.

Data Collection

Arkansas collects student discipline data at the individual student level for all students through the statewide student management system. Discipline data are submitted to the Office of Information Technology during Cycle 7 (June) each year. Upon closing the cycle, the DESE-OSE receives two data pulls, an aggregate unduplicated count of general education students meeting the greater than 10 days out of school suspensions or expulsions criteria along with the general education enrollment count by LEA to establish the general education rate. The second dataset is a student level discipline file for children with disabilities which is aggregated into the 618 reporting. This dataset along with child count for the denominator establishes the special education discipline rate. These data sets allow for the comparative analysis.

Methodology and Identification

Arkansas has always used a special education general education comparison for Indicator 4. In FFY 2009, Arkansas revised its methodology to reflect a revised difference between students with IEPs and general education students, receiving more than 10 days of out-of-school suspension or expulsions. Using discipline data from 2007-08, 2008-09, and 2009-10, a three-year base average value was established in which all local education agencies (LEAs) are required to meet each year. This methodology resulted in an average difference of 1.36 percentage points. The formula is presented below.

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

between Special Education & General Education students.

Since the establishment of the 1.36 percentage point difference, the data has been analyzed and discussed with stakeholders to determine if the current significant difference rate is still reasonable, valid and reliable. More recent analysis showed a greater gap developing (prior to the pandemic); therefore, the decision was made to maintain the 1.36 base value instead of making a change.

A minimum number of students was not established until FFY 2016 and revised in FFY 2020. Stakeholders believed identifying an LEA as having a significant discrepancy in discipline for exceeding the 1.36 percentage point difference and having 1 or 2 students exceed the 10 days, was punitive. A new cell size of 5 students was established for the numerator criteria. Stakeholders felt that the cell size of 5 was a more accurate representation of disciplinary discrepancies and it further aligned with the significant disproportionality cell size. To be identified as having a significant discrepancy in discipline, an LEA must have at least 5 SWD who received more than 10 days of out-of-school suspension or expulsions and a special education rate more than 1.36 percentage points above the general education rate.

Provide additional information about this indicator (optional)

With the input from stakeholders, Arkansas believes its methodology is reasonable, valid and reliable, even though not all LEAs are included in the Indicator. For an LEA to flag for a self-assessment they must have at least 5 students with greater than 10 days of OSS/expulsion and exceed the 1.36 percentage point difference. The 1.36 percentage point difference is very narrow and more recent analysis showed a greater gap developing (prior to the pandemic). With this information stakeholders decided to maintain the 1.36 base value instead of making a change, and by increasing the number of students with IEPs receiving more than 10 days of out-of-school suspension or expulsions to 5, LEAs would not be identified over a small count of students.

Based on the data used to report the indicator, Arkansas analyzed 9.7% (27/278) of its LEAS; however, further analysis found that the State was one LEA shy of exceeding the recommended 10%. DESE-OSE has the complete data set for next year's APR Indicator 4A, and the analysis reveals a rate of 12.90% (36/279) of the LEAs; thus, putting the State above the 10% recommendation. DESE-OSE will present the information to stakeholders for methodology considerations and will continue to monitor the data for future adjustments if warranted.

Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 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.

Eight districts were required to complete a review of policies, procedures, and practices. 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.

All 8 of the LEAs flagged submitted their self-assessments by the appropriate deadline. The staff of the Office of Special Education Monitoring/Program Effectiveness section reviewed the completed self-assessments and determined that one district had inappropriate policies, procedures, and practices. A letter of findings was issued in January 2024.

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

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

If YES, select one of the following:

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

The State must report on the correction of noncompliance in next year's SPP/APR consistent with requirements in the Measurement Table and OSEP QA 23-01, dated July 24, 2023. Please explain why the State did not ensure that policies, procedures, and practices were revised to comply with applicable requirements.

The state issued a finding of non-compliance based on the self-assessments and clarifications provided by the LEA. The LEA is now in their one-year window of their compliance action plan (CAP) and will be submitting documentation and evidence of their revised policies, procedures, and practices as outline in the CAP. The Monitoring and Program Effectiveness section will review the submitted documents required in the CAP for future clearance.

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State's LEAs are being examined for significant discrepancy under the State's chosen methodology.

Response to actions required in FFY 2021 SPP/APR

With the input from stakeholders, Arkansas believes its methodology is reasonable, valid and reliable, even though not all LEAs are included in the Indicator. For an LEA to flag for a self-assessment they must have at least 5 students with greater than 10 days of OSS/expulsion and exceed the 1.36 percentage point difference. The 1.36 percentage point difference is very narrow and more recent analysis showed a greater gap developing (prior to the pandemic). With this information stakeholders decided to maintain the 1.36 base value instead of making a change, and by increasing the number of students with IEPs receiving more than 10 days of out-of-school suspension or expulsions to 5, LEAs would not to be identified over a small count of students.

Arkansas does examine all LEAs with comparable datasets to determine if they exceed the 1.36 percentage point difference. This is reported on the LEA APR profiles even if they do not have more than 5 students, Further, more than 50% of LEAs report zero students with more than 10 days of OSS/expulsion.

4A - OSEP Response

OSEP's Required Actions in response to the State's FFY 2021 SPP/APR required the State to explain, in its FFY 2022 SPP/APR, how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. OSEP appreciates the State reported it reviewed its methodology to determine if it is reasonably designed. However, OSEP notes that the State's revised methodology included a very low percentage of the State's LEAs in its analysis of rates of suspension and expulsion of greater than 10 days in a school year for children with IEPs.

4A - Required Actions

The State must report, in the FFY 2023 SPP/APR, on the correction of noncompliance that the State identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022 SPP/APR, use data from 2021-2022), 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 the rates of suspensions and expulsions for 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 section 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 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 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 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 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, 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.

Provide detailed information about the timely correction of child-specific and regulatory/systemic 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 QA 23-01, dated July 24, 2023.

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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	Not Valid and Reliable	0.38%	0.38%	0.00%	

Targets

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

FFY 2022 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.

18

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
5	1	260		0%	0.38%	Did not meet target	N/A

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

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

The definition and measurement for 4B uses a percentage point difference calculation within the LEA for a single year. The calculation is the difference of a specific race for SWD with suspension and expulsion exceeding 10 days minus the percent of all general education students with suspension/expulsion exceeding 10 days within the LEA (the same general education rate used for Indicator 4A).

Districts identified as having a percentage point difference greater than 4.00 (special education suspension and expulsion rate for a specific race is more than four percentage points higher than general education suspension and expulsion rate), and meet the following criteria are flagged as having a significant disciplinary discrepancy by race/ethnicity. The flagged LEAs are required to complete and submit a self-assessment for the review of discipline policies, procedures, and practices.

Criteria for being identified as having a significant discrepancy in order of application

1. an LEA has a Special Education Child Count of more than 40 students
2. an LEA has a Special Education Child Count with more than 10 students in a particular race/ethnicity
3. an LEA has a Special Education OSS/expulsion count of 5 or greater in a particular race

Provide additional information about this indicator (optional)

Arkansas believes their methodology for 4B is reasonable, valid and reliable. Arkansas uses a general education/special education difference. If the special education rate for a particular race/ethnicity is 4 percentage points higher than the general education rate for all racial/ethnic groups. The four percentage point difference has been in place since our baseline year for Indicator 4B. The four initially aligned with the risk ratio used for Indicators 9 and 10 and stakeholders, at the time and currently, felt that having a special education rate 4 point higher was truly a significant difference and not just by chance.

The LEA data is analyzed to determine if they meet the three criteria outlined above. It is rare that an LEA would be excluded from being flagged as having a significant discrepancy due to the number of students in their child count or in all racial/ethnic groups. While some racial/ethnic groups may be

below the count of 10 not all racial/ethnic groups would meet the criteria for exclusion from possible identification. If an LEA meets criteria 1 and 2 and have a significant difference greater than 4, the third criteria is applied. The LEA must have at least 5 students in the racial/ethnic group of analysis with OSS/Expulsion of greater than 10 days.

Except for the 2020/21 school year, Arkansas has always identified LEAs for Indicator 4B and has previously found non-compliance through the self-assessment review process.

Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 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 one district identified as having inappropriate policies, procedures, and practices related to race/ethnicity within disciplinary actions. The self-assessment tool required a team approach and review of student level data for completion.

The State identified five districts in 2021-22 as having a Significant Discrepancy by Race/Ethnicity. In the Spring of 2023, they completed a self-assessment of policies, procedures, and practices related to disciplinary actions. The State reviewed each of the LEA's self-assessment for 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 one finding 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 DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

If YES, select one of the following:

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

The State must report on the correction of noncompliance in next year's SPP/APR consistent with requirements in the Measurement Table and OSEP QA 23-01, dated July 24, 2023. Please explain why the State did not ensure that policies, procedures, and practices were revised to comply with applicable requirements.

The state issued a finding of non-compliance based on the self-assessment and clarifications provided by the LEA. The LEA is now in their one-year window of their compliance action plan (CAP) and will be submitting documentation and evidence of their revised policies, procedures, and practices as outline in the CAP. The Monitoring and Program Effectiveness section will review the submitted documents required in the CAP for future clearance.

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must explain how its methodology is reasonably designed to determine if significant discrepancies, by race and ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, including how the State's LEAs are being examined for significant discrepancy under the State's chosen methodology.

Response to actions required in FFY 2021 SPP/APR

Arkansas believes their methodology for 4B is reasonable, valid and reliable. Arkansas uses a general education/special education difference. If the special education rate for a particular race/ethnicity is 4 percentage points higher than the general education rate for all racial/ethnic groups. The four percentage point difference has been in place since our baseline year for Indicator 4B. The four initially aligned with the risk ratio used for Indicators 9 and 10 and stakeholders, at the time and currently, felt that having a special education rate 4 point higher was truly a significant difference and not just by chance.

The LEA data is analyzed to determine if they meet the three criteria outlined above. It is rare that an LEA would be excluded from being flagged as having a significant discrepancy due to the number of students in their child count or in all racial/ethnic groups. While some racial/ethnic groups may be below the count of 10 not all racial/ethnic groups would meet the criteria for exclusion from possible identification. If an LEA meets criteria 1 and 2 and have a significant difference greater than 4, the third criteria is applied. The LEA must have at least 5 students in the racial/ethnic group of analysis with OSS/Expulsion of greater than 10 days.

Except for the 2020/21 school year, Arkansas has always identified LEAs for Indicator 4B and has previously found non-compliance through the self-assessment review process.

4B - OSEP Response

4B- Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the districts identified with noncompliance in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 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 2022.

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 ED Facts 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	2017	2018	2019	2020	2021
A	2019	Target >=	61.81%	63.77%	56.94%	57.32%	57.70%
A	56.94%	Data	53.34%	54.32%	56.94%	58.83%	59.81%
B	2019	Target <=	12.16%	12.00%	12.18%	12.08%	11.98%
B	12.18%	Data	13.15%	12.72%	12.18%	11.66%	11.56%
C	2019	Target <=	2.43%	2.40%	2.01%	1.99%	1.99%
C	2.01%	Data	2.14%	2.05%	2.01%	1.92%	1.78%

Targets

FFY	2022	2023	2024	2025
Target A >=	58.07%	58.45%	58.82%	59.20%
Target B <=	11.88%	11.78%	11.68%	11.58%
Target C <=	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%.

As Arkansas moves forward with its inclusion initiatives, the state will continue monitoring the outcomes and will share results with stakeholders allowing more input on the implementation strategies.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	70,301

Source	Date	Description	Data
Data Groups (EDFacts file spec FS002; Data group 74)			
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	46,076
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	7,552
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	398
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	618
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	242

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 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	46,076	70,301	59.81%	58.07%	65.54%	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	7,552	70,301	11.56%	11.88%	10.74%	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]	1,258	70,301	1.78%	1.99%	1.79%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED Facts 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 (Inclusive) – 6A, 6B, 6C

Part	FFY	2017	2018	2019	2020	2021
A	Target >=	34.93%	35.94%	20.74%	21.44%	22.13%
A	Data	28.17%	29.04%	20.74%	18.77%	18.57%
B	Target <=	28.61%	26.65%	20.21%	19.73%	19.25%
B	Data	27.27%	23.74%	20.21%	21.71%	21.67%
C	Target <=				1.08%	1.04%
C	Data				1.08%	0.37%

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 FFY 2020 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.

At various meetings across the state, including the quarterly Advisory Council, stakeholders were informed on early childhood inclusions initiatives. One such initiative is the Building Arkansas Strong through Inclusive Classrooms (BASIC) project. The ECSE section provides professional learning & coaching with intentionality on the expansion of high-quality early childhood inclusive education for all students, especially SWDs. As data and its results, on this and other initiatives which could affect this indicator, become available stakeholder groups will be provided opportunities to provide input on future target setting, implementation strategies, and activities.

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	2022	2023	2024	2025
Target A >=	22.83%	23.53%	24.22%	24.92%
Target B <=	18.77%	18.29%	17.81%	17.31%

Inclusive Targets – 6C

FFY	2022	2023	2024	2025
Target C <=	1.00%	0.96%	0.92%	0.88%

Prepopulated Data

Data Source:

SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

08/30/2023

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	2,795	4,907	2,223	9,925
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	485	867	424	1,776
b1. Number of children attending separate special education class	29	63	29	121
b2. Number of children attending separate school	986	1,107	520	2,613
b3. Number of children attending residential facility	2	0	1	3
c1. Number of children receiving special education and related services in the home	8	8	7	23

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 2022 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 2021 Data	FFY 2022 Target	FFY 2022 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	1,776	9,925	18.57%	22.83%	17.89%	Did not meet target	No Slippage
B. Separate special education class, separate school or residential facility	2,737	9,925	21.67%	18.77%	27.58%	Did not meet target	Slippage
C. Home	23	9,925	0.37%	1.00%	0.23%	Met target	No Slippage

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

Arkansas has a long history of approximately one-third of its preschool children with IEPs being parentally placed in state licensed Early Intervention Day Treatment (habilitation) center programs. The EIDT centers are licensed by the Department of Human Services' Division of Developmental Disabilities Services and a child must have Medicaid to be eligible to attend these centers. Although we had seen a decline in recent years, prior to the pandemic, there was a significant decline during the pandemic since many programs were closed and many parents were working from home. This was reflected by the higher number of children receiving services at home for FFY 2020 and 2021. However, post-pandemic numbers reflect a significant increase in center based programs as centers reopened and parents go back to the workplace.

This measurement is a challenge, since service eligibility at these center based programs is more stringent than IDEA eligibility and these center based programs provide services 5 days a week; thus acting as a daycare as well. Here is the link to Division of Developmental Disabilities Services - <https://humanservices.arkansas.gov/divisions-shared-services/developmental-disabilities-services/service-for-children-with-dd-id-needs/developmental-daycare-eidt-age-0-21/>

Provide additional information about this indicator (optional)

Besides implementing the BASIC project to improve early childhood inclusion, in the Spring of 2023, the Early Childhood Special Education Section was accepted to be part of an intensive technical assistance project, through the National Center for Pyramid Model Innovations. The project will establish a multi-tiered system of support in State early childhood programs to improve peer-to-adult and peer-to-peer interactions and behavior support for children with disabilities, so all children can be successful in regular preschool settings.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 3 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	2017	2018	2019	2020	2021
A1	2008	Target >=	91.08%	91.56%	91.56%	89.16%	89.64%
A1	89.56%	Data	84.39%	87.89%	88.70%	87.32%	90.06%

A2	2008	Target >=	68.24%	68.72%	68.72%	66.32%	66.80%
A2	68.61%	Data	57.89%	57.92%	63.66%	62.57%	64.60%
B1	2008	Target >=	91.90%	92.38%	92.38%	89.98%	90.46%
B1	89.64%	Data	85.98%	89.49%	89.53%	87.98%	90.18%
B2	2008	Target >=	59.64%	61.11%	61.11%	57.17%	56.21%
B2	59.74%	Data	45.68%	45.15%	48.27%	47.93%	48.43%
C1	2008	Target >=	91.65%	92.13%	92.13%	90.71%	89.73%
C1	91.68%	Data	86.59%	90.63%	90.68%	88.85%	91.85%
C2	2008	Target >=	76.93%	78.00%	78.40%	75.95%	94.97%
C2	77.81%	Data	64.97%	65.22%	70.18%	70.08%	70.75%

Targets

FFY	2022	2023	2024	2025
Target A1 >=	90.12%	90.60%	91.08%	91.56%
Target A2 >=	67.28%	67.76%	68.24%	68.72%
Target B1 >=	90.64%	91.42%	91.90%	92.38%
Target B2 >=	57.19%	58.17%	59.64%	61.11%
Target C1 >=	90.21%	91.17%	91.65%	92.13%
Target C2 >=	93.99%	75.46%	76.93%	78.00%

Targets: Description of Stakeholder Input

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.

There have been ongoing discussions with stakeholders about how to improve outcomes. Everyone has agreed that the first step to increased outcomes is ensuring children are being served in their Least Restrictive Environment (LRE). The Office of Special Education, Early Childhood Special Education (ECSE) program has formed a state-level collaborative team to address LRE in the early childhood setting. This group consists of members from Part B, Part C, various community-based preschool programs, state funded preschool, Head Start, local education agencies, higher education, parents of children with disabilities, and other stakeholders. The ECSE team used feedback to provide LRE and Outcomes trainings during the 2022-2023 school year and are offering these trainings in the 2023-2024 school year.

FFY 2022 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

5,266

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	12	0.23%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	400	7.60%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,429	27.14%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,082	39.54%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,343	25.50%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	3,511	3,923	90.06%	90.12%	89.50%	Did not meet target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	3,425	5,266	64.60%	67.28%	65.04%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	10	0.19%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	486	9.23%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,104	39.95%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,212	42.01%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	454	8.62%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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>	4,316	4,812	90.18%	90.64%	89.69%	Did not meet target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,666	5,266	48.43%	57.19%	50.63%	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	10	0.19%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	304	5.77%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,139	21.63%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	2,305	43.77%

Outcome C Progress Category	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,508	28.64%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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>	3,444	3,758	91.85%	90.21%	91.64%	Met target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	3,813	5,266	70.75%	93.99%	72.41%	Did not meet target	No Slippage

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (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, reached maximum age (age 6) 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 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 entry and exit scores as well as improvement status are collected in the student management system and submitted to the state each June.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 3 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 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 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 must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

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

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

8 - Indicator Data

Question	Yes / No
Do you use a separate data collection methodology for preschool children?	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	2017	2018	2019	2020	2021
Preschool	2005	Target >=	93.86%	94.84%	94.84%	89.94%	90.92%
Preschool	82.92%	Data	92.26%	93.83%	91.12%	90.55%	91.42%
School age	2005	Target >=	95.97%	96.45%	96.45%	94.05%	94.53%
School age	95.35%	Data	95.45%	95.82%	96.52%	96.23%	95.98%

Targets

FFY	2022	2023	2024	2025
Target A >=	91.90%	92.88%	93.86%	94.84%
Target B >=	95.01%	95.49%	95.97%	96.45%

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Preschool	3,098	3,362	91.42%	91.90%	92.15%	Met target	No Slippage
School age	15,727	16,406	95.98%	95.01%	95.86%	Met target	No Slippage

The number of parents to whom the surveys were distributed.

80,226

Percentage of respondent parents

24.64%

Response Rate

FFY	2021	2022
Response Rate	24.53%	24.64%

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.

Include the State’s analyses of 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.

The number of responding parents/guardians increased in 2022-2023 for both early childhood and school age programs. Arkansas analyzes both race/ethnicity and primary disability categories for representativeness.

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 and racial/ethnic groups. Additionally, 4.97% of respondents did not indicate the child's race and/or disability.

Using a +/- 3% as the criteria to identify over- or under-representativeness, families of CWD in school age programs are representative in all disability categories. However, families were underrepresented in two racial/ethnic groups - black (-4.25) and Hispanic (-5.94), Additionally, 13.52% of respondents did not indicate the child's race and/or disability.

Although representativeness is met for most areas, for early childhood and school age programs, there is a need for continued training on the preparation, collection, and submission of the family surveys.

The demographics of the children for whom parents are 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 via webinars and face-to-face meetings. Additionally, 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. In 2020 and 2021 school years, since most meetings were being conducted virtually, due to COVID, IDEA Data & Research developed documents LEAs could share with families on how to complete the survey online. The instructions are

available in English and Spanish, the same as the surveys. We are further exploring adding a Marshallese version to the online survey at the request of LEAs in Northwest Arkansas. That region has the largest Marshallese population outside of the Marshal Islands.

The DESE-OSE monthly technical assistance calls with LEAs includes the family surveys as a topic each Spring. 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 strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

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. In 2020 and 2021 school years, since most meetings were being conducted virtually, due to COVID, IDEA Data & Research developed documents LEAs could share with families on how to complete the survey online. The instructions are available in English and Spanish, the same as the surveys. We are further exploring adding a Marshallese version to the online survey at the request of LEAs in Northwest Arkansas. That region has the largest Marshallese population outside of the Marshal Islands.

Additional analysis will be undertaken to ascertain if a specific region of the state is contributing to the underrepresentation

The DESE-OSE monthly technical assistance calls with LEAs includes the family surveys as a topic each Spring. 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.

The potential for non-response bias was minimized through an in-depth comparison of respondent and target population characteristics for the early childhood and school age surveys. While the overall response rate increased slightly from the previous year, an examination of the actual response rates compared to the number of students in the December 1 child count for the demographic categories of race/ethnicity and disability found minimal over- or under-representation. The analysis of the survey data suggests that the results of the surveys were statistically representative of the target population (+/- 3.0%) across all disability categories for both school age and early childhood surveys. Race/ethnicity was statistically representative of the target population (+/- 3.0%) for early childhood; however, school age respondents were under-represented for Hispanic (-5.94 percentage points) and black (-4.25 percentage points). Further analysis of the school age survey data was conducted using a crosstab of race/ethnic group by disability category to determine if underrepresentation was evident and possible nonresponse bias. The results of the race/ethnicity by disability analysis found zero under- or over-representation. Further concluding there was no evidence of nonresponse bias.

Additionally, if an LEA had a zero-response rate for the family outcomes survey, the data manager sends the MPE section a list of the LEAs for further action. These LEAs must provide evidence that families were given the opportunity to participate in the survey. The DESE-OSE has fully implemented, in the required paperwork, a place for districts to document parent/guardian opportunities to participate in the family survey.

Arkansas will continue to work with LEAs on the preparation, collection, and submission of the family surveys to minimize possible response bias. 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.

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)

8 - Prior FFY Required Actions

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

Response to actions required in FFY 2021 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

8 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 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 response data 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. 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 2022 reporting period (i.e., after June 30, 2023).

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. Provide the actual numbers used in the calculation.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

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

FFY 2022 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.

17

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2	0	259	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.

The 2 LEAs which the State identified in 2022-2023 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 <https://dese.ade.arkansas.gov/Offices/special-education/monitoring-and-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)

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). 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 2022 reporting period (i.e., after June 30, 2023).

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. Provide the actual numbers used in the calculation.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

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

FFY 2022 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.

17

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
46	1	259	0.00%	0%	0.39%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The reason for slippage has to do with required documentation. Through the self-assessment process, the LEA was asked to submit additional information for clarification. The requested documentations was not received by the due date; therefore, based on the self-assessment a finding of non-compliance was issued.

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 46 LEAs that the State identified in 2022-2023 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 one finding of noncompliance.

The one LEA was issued a letter of finding in October 23, 2023. The compliance action plan (CAP) which has to be completed as soon as possible, but no later than one year from issuance of letter (October 23, 2024). The LEA must complete the CAP according to the following procedures, which align with the numbers on the CAP form:

1. State the root causes leading to inappropriate policies, procedures, and practices. This data could come from the Success Gap Rubric tool.
2. Identify corrective steps to address the cause of the non-compliance and ensure it does not re-occur.
3. Identify timelines for completion of each step.
4. Identify the evidence to be submitted, which must include at a minimum the submission of: (a) Revised policies, procedures, and/or practices for child find and identifying students with disabilities; (b) Evidence that indicates the district's revised policies, procedures, and practices are being followed, including Referral forms and conferences, Existing Data Reviews, evaluation reports, Evaluation Programming conferences; and (c) Evidence that the LEA provided a public report on the revision of policies, practices, and/or procedures (34 CFR §300.646(c)(2)).
5. Identify a timeline for the submission of evidence.
6. Identify the person responsible for overseeing the corrective steps.
7. Provide a signed assurance from the superintendent that the corrective steps will be implemented. (Completed after DESE reviews and approves CAP.)
8. The state educational advisor will approve the CAP and determine a schedule for reviewing evidence.

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)

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Because the State reported less than 100% compliance for FFY 2023 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the district identified in FFY 2022 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification is in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 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 2022.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.54%	99.75%	99.71%	99.35%	99.37%

Targets

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

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
18,563	18,432	99.37%	100%	99.29%	Did not meet target	No Slippage

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

131

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.

There were 18,563 children with parental consent to evaluate who were evaluated. The children evaluated within 60 days was 18,432 representing 99.29%, a slippage of .08%(percentage points) from the previous 2021-2022 rate of 99.37%.

Out of the 18,432 children, 3,738 or 20.28% were determined not eligible, while 13,223 representing 71.74% were determined eligible. There were 36 LEAs exceeding State established timelines of 60 days and the number of days varied between 1 - 87 days.

108 children out of the 131 were found to be eligible with days spanning between 1 - 87 days while 19 children were found not eligible and had extra 1-52 days beyond the state established timelines. The remaining 6 children had 13 days past the timeline had no determination made due to parents refusal to consent or their eligibility for services was pending signed parental consent to serve.

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 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.

The IDEA Data & Research Office via the student management system verified that each of the 36 LEAs who were not at 100% for the Indicator in FFY 2022 are correctly implementing the specific regulatory requirements by reviewing current year referrals in the student management system, which is updated data. The review conducted in December 2023, revealed that 36 of 36 LEAs were 100% compliant and are correctly implementing the regulatory requirements.

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 MySped Resource system is also used to provide the LEAs an opportunity to verify their data and to complete referrals which may have crossed over fiscal years.

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 eSchool special education modules 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)

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021 Findings of Noncompliance Verified as Corrected

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

DESE identified 2 LEAs with noncompliance for Indicator 11. The State has verified that the LEAs are correctly implementing the specific regulatory requirements based on a review of updated data and information, by reviewing data and information subsequently collected through integrated monitoring activities and the State's data system.

The LEAs were issued findings and developed a compliance action plan (CAP) in collaboration with DESE-OSE. Each LEA submitted evidence for evaluations conducted during the remainder of the school year. The SEA reviewed updated data including 3-5 new initial evaluation reports, eligibility documents, and IEP paperwork validating the timelines. The Data and Research team reviewed current year referral tracking data in the SMS during December 2023 to verify if any on-going noncompliance was evident; both LEA's data were 100% compliant.

The LEAs cited for non-compliance did not have any missed timelines during the CAP period (FFY2022). They met all CAP requirements and were 100% compliant.

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 two LEAs cited for noncompliance each had one student out of timelines.

Although late, the two students went on to receive their evaluations and eligibility was determined. The State has reviewed each individual case of previously noncompliant files and verified correction by the LEA, unless the child is no longer within the jurisdiction of the LEA, and no outstanding corrective action exists under a State complaint or due process hearing decision for the child.

The SEA reviewed each student's referral data in the SMS, which captures eligibility determination date, special education placement status (y/n), and date of parental consent for placement, and found eligibility was determined and an IEP implemented for both students and subsequent student referrals; thus, demonstrating LEA 100% compliance with IDEA.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

LEA level correction of noncompliance

DESE identified 2 LEAs with noncompliance for Indicator 11. The State has verified that the LEAs are correctly implementing the specific regulatory requirements based on a review of updated data and information, by reviewing data and information subsequently collected through integrated monitoring activities and the State's data system.

The LEAs were issued findings and developed a compliance action plan (CAP) in collaboration with DESE-OSE. Each LEA submitted evidence for evaluations conducted during the remainder of the school year. The SEA reviewed updated data including 3-5 new initial evaluation reports, eligibility documents, and IEP paperwork validating the timelines. The Data and Research team reviewed current year referral tracking data in the SMS during December 2023 to verify if any on-going noncompliance was evident; both LEA's data were 100% compliant.

The LEAs cited for non-compliance did not have any missed timelines during the CAP period (FFY2022). They met all CAP requirements and were 100% compliant.

Individual student level correction of noncompliance

The two LEAs cited for noncompliance each had one student out of timelines.

Although late, the two students went on to receive their evaluations. The State has reviewed each individual case of previously noncompliant files and verified correction by the LEA, unless the child is no longer within the jurisdiction of the LEA, and no outstanding corrective action exists under a State complaint or due process hearing decision for the child.

The SEA reviewed each student's referral data in the SMS, which captures eligibility determination date, special education placement status (y/n), and date of parental consent for placement, and found eligibility was determined and an IEP implemented for both students and subsequent student referrals; thus, demonstrating LEA 100% compliance with IDEA.

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.

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	100.00%	95.24%	100.00%	100.00%	100.00%

Targets

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

FFY 2022 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	107
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	15

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	26
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.	63
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	3
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 2021 Data	FFY 2022 Target	FFY 2022 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.	26	26	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 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 eSchool special education modules or the MySped Resource application to verify that students who had their evaluation timelines exceed the third birthday and/or the 60 day timeline 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)

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	Not Valid and Reliable	80.54%	71.26%	84.34%	78.22%

Targets

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

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
338	407	78.22%	100%	83.05%	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. If an IEP is found to be non-compliant and correction does not occur prior to issuing a letter of findings, DESE-OSE cites the district for noncompliance and the district is required to submit a Compliance Action Plan (CAP).

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)

Of the 407 IEPs monitored for secondary transition, 69 IEPs had components which were non-compliant. All 69 of the IEPs, which represents 22 districts, were corrected within 90 days. Some of the reasons for the initial non-compliance was the transition plan was not in effect for the 16th birthday, they lacked measurable post-secondary goals; and lacked career employment goals. There are no patterns or obvious reasons the various components of the transition plan are non-compliant. The LEAs represent small to large districts, with the number of IEPs out of compliance ranging from 1 to 12.

A critical component to improving secondary transition services in Arkansas is the Arkansas Transition Services (ATS) consultants. Arkansas Transition Services provides professional learning opportunities, resources, and opportunities to participate in special initiatives in a continuing effort to improve post-school outcomes. ATS collaborates with Career and Technical Education, Arkansas Rehabilitation Services, Division of Services for the Blind, the University of Arkansas, the Office of Special Education, and the National Technical Assistance Center on Transition: the Collaborative (NTACT: C) as a Core Team for our state focused on transition program improvement and post-school outcomes improvement. This team meets quarterly and attends the Capacity Building Institute each year to continue collaboration and planning.

The ATS staff continues to provide guidance through trainings and technical assistance to improve compliance with Indicator 13. The ATS consultants provide training at the cooperatives over the summer and within districts throughout the school year. Transition plan reviews are also offered one to two years prior to monitoring in those districts, as well as follow-up trainings and reviews. Arkansas Transition Services sends out weekly tips and tidbits via email to a large distribution list of special education teachers and supervisors, many regarding tips on compliance with Indicator 13. A valuable resource, the Indicator 13 Cross Reference Tool, is located on our website and allows users to see all eight components of Indicator 13 and where evidence of compliance is located in the individualized education program. The ATS website houses many other resources to help with compliance including transition assessment links and modules, information post-secondary goals, transition activities, and on the summary of performance.

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
6	5	0	1

FFY 2021 Findings of Noncompliance Verified as Corrected

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

DESE issued a finding to six LEAs in the area of secondary transition. The required actions for each LEA included revising their policies, procedures, and/or practices for post-secondary transition and providing training from Arkansas Transition Services on the process and regulatory requirements.

They were required to correct each student level finding, submit evidence of correction and submit additional evidence to ensure the non-compliance was not continuing for other students. Each district identifies specific items for their required actions that link to the root cause of the noncompliance. All districts must include a review of policies, procedures, and practices; student level corrections for students still within the district's jurisdiction; and additional evidence showing the noncompliance has not continued.

DESE-OSE reviewed the following items submitted by the LEAs: (1) updated procedures for addressing secondary transition in the IEP, and (2) the agenda with a sign-in sheet from training provided to the LEA by Arkansas Transition Services. Additionally, DESE reviewed the non-compliant student folders to ensure the non-compliance was corrected. DESE-OSE staff reviewed additional folders for students not in the original review and found their post-secondary transition to be compliant. An additional action taken by one district was to review the Arkansas Transition Services webpage and submit a summary of new learning or additional resources they will implement after the review.

Based on the on-site and desks reviews of the required actions in the Compliance Action Plan and evidence submitted to ensure the actions were complete, DESE determined 5 of the 6 districts met all requirements for post-secondary transition, and issued a letters stating these districts met the Compliance Action Plan.

The remaining district was issued a letter of long-standing noncompliance and a list of required actions including: correcting student level non-compliance, providing additional folders to ensure post-secondary transition is correctly addressed in student IEPs, monthly meetings with DESE-OSE staff to review compliance, and additional trainings from Arkansas Transition services.

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

DESE issued a finding to six LEAs in the area of secondary transition. The required actions for each LEA included revising their policies, procedures, and/or practices for post-secondary transition and providing training on the process and regulatory requirements. The LEAs were required to correct the student level finding and submit additional evidence to ensure the non-compliance was not continuing for other students.

DESE-OSE reviewed the following items submitted by the LEA: (1) updated procedures for addressing post-secondary transition in the IEP, and (2) the agenda with a sign-in sheet from training provided to the LEA by Arkansas Transition Services. Additionally, DESE reviewed the non-compliant student folders of students still in the district's jurisdiction, to ensure the non-compliance was corrected. If the student was no longer in the district's jurisdiction, DESE-OSE staff required evidence that the child moved or graduated. DESE-OSE staff reviewed additional folders for students not in the original review and found their post-secondary transition to be compliant.

Based on the on-site and desks reviews of the required actions in the Compliance Action Plan and evidence submitted to ensure the actions were complete, DESE determined 5 of the districts met all requirements for post-secondary transition, and issued letters stating these LEAs met the Compliance Action Plan.

The remaining district was issued a letter of long-standing noncompliance and a list of required actions including correcting student level non-compliance, providing additional folders to ensure post-secondary transition is correctly addressed in student IEPs, monthly meetings with DESE-OSE staff to review compliance, and additional trainings from Arkansas Transition services.

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The district that did not meet compliance was issued a letter of long-standing noncompliance and a list of required actions including correcting student level non-compliance, providing additional folders to ensure post-secondary transition is correctly addressed in student IEPs, monthly meetings with DESE-OSE staff to review compliance, and additional trainings from Arkansas Transition services.

DESE-OSE meets with the district in person or virtually on a monthly basis to review files and implementation of procedures to ensure the district understands how to write transition plans. The district was required to revise and include more details on post-secondary transition in their procedure manual, which DESE-OSE must approve. Arkansas Transition services provided two additional compliance trainings after the long-standing status was issued. The district is still in the long-standing non-compliance correction period.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Response to actions required in FFY 2021 SPP/APR

DESE issued a finding to six LEAs in the area of secondary transition. The required actions for each LEA included revising their policies, procedures, and/or practices for post-secondary transition and providing training from Arkansas Transition Services on the process and regulatory requirements. They were required to correct each student level finding, submit evidence of correction and submit additional evidence to ensure the non-compliance was not continuing for other students. Each district identifies specific items for their required actions that link to the root cause of the noncompliance. All districts must include a review of policies, procedures, and practices; student level corrections for students still within the district's jurisdiction; and additional evidence showing the noncompliance has not continued.

DESE-OSE reviewed the following items submitted by the LEAs: (1) updated procedures for addressing secondary transition in the IEP, and (2) the agenda with a sign-in sheet from training provided to the LEA by Arkansas Transition Services. Additionally, DESE reviewed the non-compliant student folders to ensure the non-compliance was corrected. DESE-OSE staff reviewed additional folders for students not in the original review and found their post-secondary transition to be compliant. An additional action taken by one district was to review the Arkansas Transition Services webpage and submit a summary of new learning or additional resources they will implement after the review.

Based on the on-site and desks reviews of the required actions in the Compliance Action Plan and evidence submitted to ensure the actions were complete, DESE determined 5 of the 6 districts met all requirements for post-secondary transition, and issued a letters stating these districts met the Compliance Action Plan.

The district that did not meet compliance was issued a letter of long-standing noncompliance and a list of required actions including correcting student level non-compliance, providing additional folders to ensure post-secondary transition is correctly addressed in student IEPs, monthly meetings with DESE-OSE staff to review compliance, and additional trainings from Arkansas Transition services.

DESE-OSE meets with the district in person or virtually on a monthly basis to review files and implementation of procedures to ensure the district understands how to write transition plans. The district was required to revise and include more details on post-secondary transition in their procedure manual, which DESE-OSE must approve. Arkansas Transition services provided two additional compliance trainings after the long-standing status was issued. The district is still in the long-standing non-compliance correction period.

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2021 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and the LEA with remaining noncompliance identified in FFY 2021: (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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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 3 for additional instructions on sampling.)

Collect data by September 2023 on students who left school during 2021-2022, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2021-2022 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).

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 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 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 analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2009	Target >=	15.31%	15.80%	15.80%	13.06%	13.26%
A	12.86%	Data	10.53%	11.78%	10.90%	15.82%	15.64%
B	2009	Target >=	51.00%	51.49%	51.49%	49.21%	49.87%
B	48.55%	Data	50.19%	25.93%	41.97%	64.06%	67.92%
C	2009	Target >=	62.48%	63.26%	63.26%	59.89%	60.44%
C	59.34%	Data	54.89%	51.35%	48.45%	68.36%	73.62%

FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A >=	13.46%	13.66%	13.86%	14.06%
Target B >=	50.53%	51.19%	51.85%	52.51%
Target C >=	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. In more recent discussions with stakeholders it was decided not to make any changes.

FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	825
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	705
Response Rate	85.45%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	124
2. Number of respondent youth who competitively employed within one year of leaving high school	387
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	19
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).	11

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Enrolled in higher education (1)	124	705	15.64%	13.46%	17.59%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	511	705	67.92%	50.53%	72.48%	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)	541	705	73.62%	60.99%	76.74%	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	2021	2022
Response Rate	85.52%	85.45%

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 2021 leavers is representative.

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

A \pm 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 2021 leavers are representative. The percentage point difference for race/ethnicity spread from -0.86 percentage points for Hispanic to 1.97 percentage points for White. The analysis of exit reasons found the percentage point difference dropouts as -1.51 while graduated with a regular diploma 1.53. Disability categories were representative with ID on the low end at -2.06 and SLD on the high end at 1.13 percentage point differences.

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 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. Between the phone survey and the he administrative data mining across state agencies (Arkansas Division of Higher Education, the Division of Workforce Services, Arkansas Rehabilitation Services, and Adult Education) allows us to locate information on a wide range of post-secodnary activities.

There were no data located across the state for 120 students. Arkansas will continue to explore additional colloaborations to increase the number of respondents. This may include expanding the adult education data beyond GED to other workforce training opportunities or exploring a possible contract with the National Student Clearinghouse.

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

The potential for nonresponse bias was minimized through an in-depth comparison of respondent and target population characteristics. Based on the 618-exiting data, the Post-school Outcome data set is compiled. For more than 10 years Arkansas has used a dual data collection which allows us to locate more students than a phone survey. This helps in addressing nonresponse bias because we are able to locate information for students which may not be located with a single methodology. Arkansas located information on 85.45% of students (705/825) across the methodology. Of the 705 students who responded to the phone survey or had information located in the data mining process, 541 students were engaged in some form of education and/or employment and another 164 students reported being not-engaged.

For the FFY 2022 APR, the data are representative by race, exit reason, and disability. While there is no evidence of systemic under-representation leading to a response bias, 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 a lower response rate.

However, in this year's sample of LEAs, 89% is composed of students graduating with a regular diploma. An additional analysis of the 120 students for which zero data was located found the largest non-response group was students who graduated with a regular diploma (96 students) which would be expected considering the composition of the dataset. Graduating with a regular diploma represented 91% of the respondents. A comparative analysis (+/-3%) of the nonresponding 120 students provided similar results of the respondents concluding there was no evidence of a nonresponse bias.

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.

Arkansas submitted an updated sampling plan to OSEP in April 2023 for continued approval and was notified in June 2023 that the submitted sampling plan was approved. The sampling plan is posted on the OSE public reporting webpage. <https://dese.ade.arkansas.gov/Offices/special-education/data-research/public-reporting>

Arkansas adopted the sampling plan OSEP provided to states in the yearly years of the SPP/APR. The 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 2017/18 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 ye ar six (6). If more LEAs are created due to a split of a district or the approval of more charter schools in the state, these LEAs will be added to year six.

Besides identifying when an LEA will be sampled, the plan discusses selection bias, the data collection, treatment of missing data, and representative analysis.

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.

Representativeness Analysis: A \pm of 3.00 percentage points is used to determine a discrepancy in the demographics over- or under-representation in the sampled LEAs (target group). Arkansas analyzes the PSO data for representativeness in the areas of race/ethnicity, disability category, and exit reason.

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)

Arkansas Transition Services provides professional learning opportunities, resources, and opportunities to participate in special initiatives in a continuing effort to improve post-school outcomes. ATS collaborates with Career and Technical Education, Arkansas Rehabilitation Services, Division of Services for the Blind, the University of Arkansas, the Office of Special Education, and the National Technical Assistance Center on Transition: the Collaborative (NTACT: C) as a Core Team for our state focused on transition program improvement and post-school outcomes improvement. This team meets quarterly and attends the Capacity Building Institute each year to continue collaboration and planning.

The ATS facilitated district participation in different initiatives to help improve post-school outcomes. The Communicating Interagency Relationships and Collaborative Linkages for Exceptional Students (CIRCLES) is a multi-tiered approach to transition planning in which four districts have participated and 15 current schools have been trained in CIRCLES. Five districts implemented the Self-Determined Learning Model of Instruction (SDLMI), an intervention to teach and practice self-determination skills in the classroom. The Post-School Outcomes Pilot, a post-school outcomes data collection process that allows high school special education teachers and other staff to contact students who exited the previous year and collect information using the PSO survey had six districts participating with an overall response rate of 82%. Those who participated did not find the survey challenging but did find it difficult to locate some students. They also stated that in some cases they were able to provide additional resources students requested at the time of the survey.

14 - Prior FFY Required Actions

None

14 - OSEP Response

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 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	19
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	7

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	2017	2018	2019	2020	2021
Target >=	64.80%	66.76%	66.76%	56.96%	58.92%
Data	55.56%	78.26%	93.33%	58.82%	64.29%

Targets

FFY	2022	2023	2024	2025
Target >=	60.88%	62.84%	64.80%	66.76%

FFY 2022 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
7	19	64.29%	60.88%	36.84%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

In Due Process Hearings, the State has identified a trend of multiple filings on the same student with the same parties. This pattern has seemingly led to a reluctance on behalf of the parties to engage in resolution meetings; thus, leading to a failure to reach agreements. Arkansas had 41 hearings for the 2022-23 school year. These were filed on behalf of 29 students. Seven (7) of the students had multiple filings with some students having as many as four (4) hearings in the school year. Further, Arkansas only had hearings for 12 students that were not connected to two (2) or more hearings.

To help address this slippage, Arkansas is reviewing procedures related to resolution meetings with the Hearing Officers to promote active engagement and encourage participation by all parties in resolution meetings.

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

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 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 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	24
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	0
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	0

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

NO

Targets: Description of Stakeholder Input

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	2017	2018	2019	2020	2021
Target >=	81.44%	83.40%	83.40%	75.00%	75.00%
Data	93.55%	100.00%	100.00%	100.00%	94.74%

Targets

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

FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	0	24	94.74%	75.00%	0.00%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The Mediation data received for the EMAPS November submission mistakenly excluded the agreements reached and the data was not available until after the submission date. Since, Arkansas' Dispute Resolution Section (DRS) has put in place a procedure to ensure all mediation data is received from the mediation center in a timely and accurate manner.

Below is the correct data for the Indicator:

- (a) Mediations held related to due process complaints 0
- (i) Mediation agreements related to due process complaints 0
- (b) Mediations held not related to due process complaints 24
- (i) Mediation agreements not related to due process complaints 23

23 of the 24 mediations held resulted in an agreement rate of 95.83%

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

Baseline Data: The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) (SiMR) 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 2022 through February 2027, 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) 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 SPPs/APRs, 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., February 1, 2023). 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 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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 (e.g., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (e.g., 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 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) 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)

YES

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

Historically, Arkansas has interpreted the population for this indicator as the special education population of grades 3-5 in SSIP-supported buildings. All students may be exposed to SSIP activities or the results. The SiMR is comprised of value-added growth scores for students with multiple years of data on the regular assessment. The State selected "yes" to reflect that the data are reflective of a subset of the special education population in SSIP-supported buildings since the SiMR does not include students who participate in the alternate assessment.

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

NO

Please provide a link to the current theory of action.

<https://arksped.ade.arkansas.gov/documents/ssip/SSIP-SPDG-OSE-TOA-2024.pdf>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2016	59.53%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	62.33%	63.16%	63.37%	64.50%

FFY 2022 SPP/APR Data

Number of SWD with a high or moderate VAS in reading at participating schools	Number of SWD with a VAS in reading at participating schools and grade levels	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,012	1,529	67.25%	62.33%	66.19%	Met target	No Slippage

Provide the data source for the FFY 2022 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-2024.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: Scale a coherent 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 continued with scaling a coordinated system of support that provides the necessary organizational and collaborative 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 uses collective knowledge to effectively leverage resources that will improve services for all students, including students with disabilities, and in increasing the reach, impact, and sustainability of the work with LEAs. The State Performance Management Team (SPMT) is directly involved with agency leaders in all initiatives reflected in the theory of action, including frameworks for improvement (High Reliability Schools-HRS), distributive leadership (Inclusive Practices Project-IPP, Effective Practices for Inclusive Education-EPIE, and Inclusive Education Support Specialist Training of Trainers-IESS), inclusive administrator leadership (Advancing Inclusive Principal Leadership-AIPL and Inclusive Education for Beginning Administrators-IEBA), evidence-based instructional practices (Reading Initiative for Student Excellence-R.I.S.E., High-Leverage Practices for Inclusive Classrooms-HLPs, Strategic Instructional Model™-SIM, Universal Design for Learning-UDL), and multi-tiered systems of support (AR THRIVE and RTI Arkansas). 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 (HRS). Through multi-tiered systems of support (AR THRIVE and RTI Arkansas), general and special educators, administrators, and related services professionals build collective efficacy via team-based and action-oriented modeling and coaching with intentional focus on student outcomes. These collaborative teams utilize multi-tiered systems of support (MTSS) and cycles of inquiry guided by 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? (IPP). To drive sustainable change, this system is dependent upon administrators who advance inclusive leadership and practices (AIPL and IEBA) and utilize distributive leadership to champion inclusive education (IPP, EPIE, IESS). The Arkansas SSIP emphasizes the value and impact of UDL and HLPs in a system that promotes inclusive education. This emphasis empowers novice and experienced educators with necessary knowledge and skills, building self and collective efficacy to meet the needs of diverse learners (AR THRIVE, R.I.S.E., HLPs, SIM™, and UDL). In the SSIP, the focus on alignment, scaling, and sustainability of these initiatives reflects a continuous evolution towards a single, coherent and collaborative system where students with disabilities are considered general education students with access to additional supports as determined by data. This system coalesces around DESE's mission to promote inclusive education.

Strategy Two: In collaboration with other DESE Units, advance Arkansas' inclusive education model to include Universal Design for Learning and expand the use of evidence-based personnel development to scale multi-tiered systems of support for behavior and academics, with a focus on literacy.

Implemented and supported in SSIP targeted districts by DESE through the State Personnel Development Grant (SPDG), this strategy has continuously evolved to focus on scaling MTSS for behavior and academics, with a focus on literacy, and the increased capacity of personnel to proficiently integrate UDL and HLPs within daily instruction. This support strategically aligns with DESE's initiatives of IPP, EPIE, IESS, R.I.S.E., HLPs, SIM™, UDL, AR THRIVE, and RTI Arkansas. In partnership with other DESE Units, the SPDG professional learning design includes multi-year job-embedded training, differentiated coaching, and follow-up supports, to increase the ability of educators to consistently implement UDL and HLPs when teaching all students, especially students with disabilities. To advance Arkansas' inclusive education model, the SPDG project embeds evidence-based practices used to expand the capacity of administrative leadership and instructional coaches to support the scale-up and sustainment of MTSS through collaborative processes and structures. Recognized as an integral part of Arkansas' comprehensive system of professional development, DESE and SPDG continue to increase access to high quality professional learning through the development of micro-credentials (MCs). A MC is a verification of proficiency in a job-embedded discrete skill that an educator demonstrates through the submission of evidence assessed via defined evaluation criteria. MCs allow educators the flexibility to personalize learning experiences that are relevant to the needs of students and are backed by research and best-practices. This form of professional learning has the capacity to assess and recognize an educator's acquisition of skills for the purpose of improving practice, advancing careers, and allowing educators to be acknowledged and rewarded as professionals. The MCs developed by DESE and SPDG provide Arkansas educators with access to professional learning on UDL, HLPs, and other evidence-based instructional practices, and DESE-approved MCs are used in a variety of ways to support educators at all stages of the career continuum. During this reporting cycle, DESE has further championed the development of MCs around UDL and HLPs to allow educators with greater choice and autonomy in the professional learning process. Through the use of MCs, the SPDG works to ensure that every student has access to a high-quality, effective teacher regardless of context resulting in improved outcomes for all, especially students with disabilities. MCs are provided by DESE and SPDG at no cost to Arkansas teachers and administrators, and the SPDG offers stipends to educators who successfully complete the MCs related to the improvement strategies outlined in the SSIP/SPDG Alignment and Evaluation Plan.

AR THRIVE, IPP, EPIE, and IESS are initiatives that are embedded within both of the infrastructure improvement strategies. AR THRIVE is a positive, proactive approach backed by in-depth evidence-based training, existing programs, and peer collaboration to develop LEA's capacity to establish and sustain MTSS in order for students to have access to the personalized academic, behavioral, and mental health supports to best meet the needs of the whole child. To scale DESE's coherent system, IPP, EPIE, and IESS are focused on increasing collective efficacy and advance the implementation of UDL and HLPs for behavior and academics within MTSS in order to maximize learning of all students through a collaborative partnership between general and special educators, administrators, and related services professionals. This systematic approach involves developing capacity at the state, regional, district, building, and classroom levels. LEAs receive differentiated coaching during the stages of planning, implementing, and monitoring of inclusive practices through cycles of continuous improvement to effectively meet the needs of all students, including students with disabilities, within a general education setting. The purposeful selection of these strategies aligns well with stakeholder feedback, 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 collaboration strategy 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), including the Universal Design for Learning (UDL) Deep Dive Group, and IDC's SSIP Data Quality Peer Group. 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 selection (4.5), training (4.0) and coaching (4.0), Organizational drivers of decision support data systems (4.5), facilitative administration (4.5) and systems intervention (4.5). Overall performance assessment of the Arkansas system coherence also remained stable at (4.0) as well as the technical & adaptive leadership drivers at (5.0). The SSIP includes multiple initiatives, each at different stages of implementation. Ratings are indicative of the intentional focus on coherence of initiatives across various stages of implementation. The SPMT continued interdepartmental collaboration and coordination through regular involvement and initiative alignment presentations at DESE Learning Services Unit Leader Meetings, quarterly Regional Content Specialist Meetings, monthly Office of Special Education Meetings, Statewide LEA Monthly Virtual Calls, monthly Arkansas Collaborative Consultants (ACC) Director Meetings, monthly EPIE Leadership and Professional Development Providers Virtual Coaching Calls, an annual convening of the Arkansas Collaborative Consultants, an annual convening of LEA Supervisors called the LEA Academy, an annual School-based Therapy Conference for related service providers, 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 the facilitation of information exchange and reduces the organizational silos that may impede sustainable systemic change. Enhanced collaboration through strategy one assists the agency to concentrate efforts on scaling and advancing organizational coherence in order to positively impact the SiMR.

Relative to strategy two, The State Personnel Development Grant (SPDG), in partnership with other DESE Units, works to transform and expand the statewide coherent system of support through professional learning and coaching. The SPDG professional learning design includes multi-year job-embedded training, differentiated coaching, and follow-up supports, with a focus on increasing the ability and efficacy of educators to effectively meet the needs of students with disabilities through inclusive education. In addition, the SPDG strives to increase the capacity of leadership and instructional coaches to support the scale-up and sustainment of multi-tiered systems of support and interventions (MTSS) with embedded high-leverage and other evidence-based practices including Universal Design for Learning. These implementation supports directly relate to DESE's professional development and technical assistance system. During this reporting cycle, the State Implementation Team reviewed data from implementation science measures from districts receiving SPDG support, and continued to meet with DESE leaders and a statewide advisory panel to gain stakeholder feedback on systemic implementation strengths and barriers. Serving as a foundational component to support the expansion of the SPDG, the Response to Intervention modules and facilitator guides for academics and behavior were revised during this reporting period. The academic and behavior modules are aligned to DESE initiatives, integrate evidence-based instructional practices, and directly impact the work of the Arkansas Behavior Support Specialists around the implementation of sustainable systems for behavior. This alignment and integration promotes equity in access to high quality professional learning, and the scaling of the ongoing initiatives for inclusive education. The SPDG differentiated coaching model and the revised behavior modules coherently align to the Arkansas THRIVE initiative which is a positive, proactive approach to develop LEA's capacity to establish and sustain MTSS in order for students

to have access to the personalized academic, behavior, and mental health supports to best meet the needs of the whole child. Data from cohorts 1-3 of THRIVE indicated that DESE supported 57 LEAs and 132 buildings. Following a nine-day intensive training, THRIVE participants return to their districts to navigate the implementation of Tier 1 and 2 systems of support for behavior and mental health. Leaders are given a one-year timeframe to apply acquired knowledge and present supporting evidence in portfolio submissions. Of the 132 buildings, 21 also enrolled in the BX3 project with the Arkansas Behavior Support Specialists to receive job-embedded coaching and implementation support. During this reporting period, 67 participants from cohort 1 successfully demonstrated the required evidence to receive the THRIVE Leadership endorsement. Future reporting of indicator 17 will showcase data from submissions of cohorts 1-3.

As the implementation team for strategy two of the SSIP regarding inclusive education, systemic improvements facilitated by the SPDG are measured through the SISEP State Capacity Assessment (SCA) tool. State Capacity Assessment results from the spring of 2023 were as follows: Leadership (78%), Infrastructure and Resources (100%), Communication and Engagement (89%), and SCA Total Score (88%). Percentages represent the number of SCA items in place and mark significant improvement over the previous year's SCA results. Current SCA ratings will serve as a comparison for future SCA administrations. At the regional educational cooperative level, the SPDG Team administers the SISEP Regional Capacity Assessment (RCA) tool to measure systemic change with regional cooperative partners. The average from all RCA assessments revealed the ESCs met the end-of-year one targets with the following results: Leadership (90%), Competency (79%), Organization (75%), Total RCA Score (82%). During this reporting period, the SPDG redefined the structure used to measure the impact of effective innovation. While systems-level work is important and critical for the overall sustainability of the project, the SPDG competency-based professional learning (micro-credentials) were identified as the intervention that has the greatest impact on daily instruction and student outcomes. Therefore, micro-credentials which focus on UDL, HLPs, and other evidence-based instructional practices are the effective innovation that positively impacts the SIMR and improves outcomes for students with disabilities.

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.

Strategy One-

Distributive Leadership Projects:

The distributive leadership projects (IPP, EPIE & IESS) support the SSIP by building a culture of shared responsibility & collective efficacy between general & special educators, administrators, & related service professionals as well as advance the implementation of UDL & HLPs within MTSS. Each project will support additional cohorts during the next reporting cycle. For IPP & EPIE, DESE will continue to partner with contracted vendors for implementation support. DESE liaisons will work alongside the vendor to build capacity & strengthen alignment of projects to systematically scale statewide. The DESE Inclusive Practices Specialist will coordinate all projects to ensure coherence & assist liaisons in capacity building efforts. By increasing access to quality core instruction & intervention, students are expected to demonstrate moderate to high growth in literacy as measured by the statewide assessment as well as improvement in LRE percentages.

High Leverage Practices:

During this phase of SSIP, acquired survey data indicated progress regarding the self-efficacy of novice special educators in Arkansas when implementing HLPs. In ongoing efforts, the SSIP will leverage agency infrastructure & systems to increase state-level capacity of HLPs, with a focus on agency unit leaders, regional content specialists, agency technical assistance providers, IHEs, & The Center for Exceptional Families (TCFEF), the state's parent training center. The SSIP will further the intentional collaboration with DESE Educator Effectiveness & IHEs around efforts to mentor all novice general & special educators with HLPs & align to the Arkansas Special Education Resource Academy, a DESE partnership with IHEs to increase the number of special educators in the state. The anticipated expansion of HLPs is projected to improve the readiness of general & special educators, foster increased efficacy in knowledge & skills to effectively work with diverse learners & result in higher percentages of novice educators who choose to remain in the profession. Additionally, the SSIP will continue to partner with TCFEF to emphasize effective ways for families & educators to meaningfully engage to improve outcomes for students with disabilities. In collaboration with TCFEF, a plan will be developed to learn more from both families & educators centered around the four categories of HLPs. The information learned from families & educators will be used to inform & further advance improvements across both strategies of the SSIP. To advance the State's focus on assistive & instructional technology (HLP17), every student in Arkansas will have access to a suite of web-based accessibility tools accompanied with training & technology integration to support inclusive education & access to high-quality instruction. As students gain access to the suite of universal tools, it is expected that Arkansas' work with HLPs, UDL & AEM will further advance leaderships' commitment to inclusive practices. Additionally, an increase in LRE is anticipated as students with disabilities will have greater access to quality core instruction.

Inclusive Administrator Leadership:

Arkansas recognizes the pivotal role of administrators to drive change for inclusive education. CCSSO will continue to support Arkansas with the Advancing Inclusive Principal Leadership (AIPL) initiative & the SSIP SiMR will remain as the overarching goal for this work. An integral component of AIPL involves incorporating HLPs into statewide professional learning for principals & school leadership teams. DESE & the work of the SSIP will continue to partner with the Arkansas Association of Educational Administrators (AAEA) to provide all administrators involved in the AAEA Beginning Administrators Academy with the ALL IN training on inclusive practices. The DESE Inclusive Practices website & Toolkits will continue to expand by adding resources, research, & implementation supports, aiming to further advance inclusive education & improve outcomes for students with disabilities. Through this expansion, LEAs will recognize that these efforts extend far beyond the scope of special education & hold significance for all stakeholders, including administrators. DESE will further invest in inclusive principal leadership by forming a principal network to advance inclusive education. While improvements to the SiMR are anticipated, DESE also expects a sustained cultural shift led by principals at the build level aimed to promote the Least Dangerous Assumption, ensuring that all students are considered general education students. DESE also anticipates that inclusive leaders will guide buildings towards increasing student access to core instruction, promoting continuous improvement in the LRE for students with disabilities.

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 support for all students regardless of grade. Arkansas will continue to broaden support for the Strategic Instructional Model, placing a particular emphasis on enhancing digital access to the eight SIM™ Learning Strategies and Content Enhancement Routines. Training sessions & coaching on these strategies & routines will continue to be reinforced through a collaborative partnership with the University of Central Arkansas Mashburn Center for Learning. The next steps for this work will include scaling the reach and sustainability of SIM™ professional learning opportunities via a learning management system, followed by job-embedded coaching. Additionally, the DESE Inclusive Practices Specialists will become certified in multiple strategies and routines to increase statewide access to certified trainers & coaches. The provision of resources & support for strategy instruction & content enhancement is expected to empower educators with the knowledge & skills necessary to help diverse students become self-directed learners. This improvement strategy directly aligns with HLP 14.

Strategy Two -

State Personnel Development Grant

Aligned with the SSIP, Arkansas will continue to leverage the SPDG to build upon previous work around RTI/MTSS for academics & behavior and through the incorporation of HLPs & UDL within professional learning. The SPDG & DESE Educator Effectiveness will continue collaborative efforts around the design of competency-based professional learning micro-credentials (MC). Next steps for this improvement strategy includes a MC for each HLP available to educators across the state via DESE's online learning management system. Arkansas will participate in the Micro-Credential Partnership of States with North Carolina, South Carolina, & Wyoming to develop assurance standards as a way to ensure all micro-credentials are of high quality. It is expected that through the use of MCs, educators across the state will gain the knowledge & ability to successfully implement UDL & HLPs within daily instruction which is expected to increase student access to quality, core instruction & improve outcomes for students with disabilities.

To develop self-directed leaders & coaches, the SPDG will continue to offer Cognitive Coaching to scale implementation support of UDL & HLPs. The SPDG & DESE Educator Effectiveness will increase statewide coaching support by continuing to offer monthly Coaching Collaborative meetings & Communities of Practice focused on coaching skills; implementation challenges; & DESE-specific implementation challenges. It is expected that the Cognitive Coaching training & Communities of Practice will support coaches to develop a consistent set of practices used to effectively support classroom educators with the implementation of MCs for UDL & HLPs. An increase in educator self-efficacy for implementing UDL & HLPs is anticipated resulting in improved student outcomes.

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

High Leverage Practices for Inclusive Classrooms (HLPs)

Universal Design for Learning (UDL)

Collaboration - Distributive Leadership Projects (Inclusive Practices Project-IPP, Effective Practices for Inclusive Education-EPIE, and Inclusive Education Support Specialist-IESS)

Response to Intervention/Multi-tiered Systems of Support - Distributive Leadership Projects

Strategic Instructional Model - Executive Functioning/Content Enhancement Routines/Learning Strategies

Inclusive Administrator Leadership - Advancing Inclusive Principal Leadership (AIPL) and ALL IN for Beginning Administrators

Provide a summary of each evidence-based practices.

High Leverage Practices for Inclusive Classrooms, as defined by the Council for Exceptional Children, encompass a set of essential practices vital for supporting student learning. These practices are designed to be systematically taught, learned, and implemented by both novice and experienced educators. Supported by research, HLPs demonstrate significant potential for improving academic and behavioral outcomes for students with disabilities and other learners. To maximize their effectiveness, these practices are best utilized within a tiered system of support, where decision-making is informed by data to address individual student needs.

According to ESSA, Universal Design for Learning is recognized as a scientifically valid framework for guiding educational practice. UDL offers flexibility in presenting information, allowing varied ways for students to respond or demonstrate learning, and promoting diverse student engagement in the learning process. Additionally, UDL aims to eliminate barriers to instruction, provide appropriate accommodations and supports, and uphold high achievement expectations for all students.

The Distributive Leadership Projects, including the Inclusive Practices Project, Effective Practices for Inclusive Education, and Inclusive Education Support Specialist, intentionally focus on promoting inclusive practices. The goal is to ensure 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. By implementing collaborative structures and maintaining a relentless focus on learning, these projects will improve student outcomes, including achievement and growth performance as measured by district and state assessments. Collaboration fosters and leads to collective teacher efficacy, a highly influential factor in improving student outcomes.

Response to Intervention/Multi-tiered Systems of Support (RTI/MTSS) is a comprehensive general education model designed to identify students who may be at risk for learning and/or behavioral challenges. This model involves multiple components and aims to provide timely support and closely monitor the progress of students to ensure effective intervention.

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.

The Inclusive Administrator Leadership Projects (Advancing Inclusive Principal Leadership in partnership with the Council of Chief State School Officers and ALL IN for Beginning Administrators in partnership with the Arkansas Association of Educational Administrators) are DESE initiatives strategically designed to develop inclusive principals and administrators. The goal is to equip them with the necessary skills to effectively serve students with disabilities and provide support to teachers across general and special education, ultimately leading to improved outcomes. Inclusive leaders strive to create learning environments where all students can excel at high levels. Additionally, they champion distributive leadership to enhance support and retention of effective teachers working with 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 imperative to improve access for students with disabilities to receive instruction in the least restrictive environments. The evidence-based practices outlined in the SSIP support systemic change, with the overarching goal of improving students' access to high-quality core instruction in the least restrictive environments. By providing educators with robust support and empowering them through quality professional learning that deepens their knowledge and skills to serve diverse learners, coupled with collaborative efforts between general and special educators as well as related services professionals around student data, students will demonstrate significant growth in literacy scores, which is the Arkansas SSIP SiMR. The intended impact has been evident in SSIP targeted schools, as the SiMR target has been exceeded in the past three reporting cycles. As reflected in the SSIP Logic Model, 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-level leadership teams build and increase capacity as measured by the Inclusive Practices Needs Assessment

*Educators in SSIP schools build and increase their capacity to implement UDL, HLPs, and other evidence-based practices, as measured by the Self-Efficacy Inventory

*Principals in SSIP schools build and increase their capacity to establish and cultivate a culture of high expectations and inclusivity for diverse learners

*SSIP schools evidence an increase in students with disabilities demonstrating moderate or high growth as measured by the DESE and as reflected in

the SiMR

*SSIP schools actively and collaboratively involve families in meaningful ways 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 Council for Exceptional Children, encompass a set of essential practices vital for supporting student learning. These practices are designed to be systematically taught, learned, and implemented by both novice and experienced educators. Supported by research, HLPs demonstrate significant potential for improving academic and behavioral outcomes for students with disabilities and other learners. To maximize their effectiveness, these practices are best utilized within a tiered system of support, where decision-making is informed by data to address individual student needs.

Universal Design for Learning is recognized as a scientifically valid framework for guiding educational practice. UDL offers flexibility in presenting information, allowing varied ways for students to respond or demonstrate learning, and promoting diverse student engagement in the learning process. Additionally, UDL aims to eliminate barriers to instruction, provide appropriate accommodations and supports, and uphold high achievement expectations for all students.

The Distributive Leadership Projects, including the Inclusive Practices Project, Effective Practices for Inclusive Education, and Inclusive Education Support Specialist, intentionally focus on promoting inclusive practices. The goal is to ensure 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. By implementing collaborative structures and maintaining a relentless focus on learning, these projects will improve student outcomes, including achievement and growth performance as measured by district and state assessments. Collaboration fosters and leads to collective teacher efficacy, a highly influential factor in improving student outcomes.

Response to Intervention/Multi-tiered Systems of Support (RTI/MTSS) is a comprehensive general education model designed to identify students who may be at risk for learning and/or behavioral challenges. This model involves multiple components and aims to provide timely support and closely monitor the progress of students to ensure effective intervention. By identifying essential standards and engaging in frequent collaborative review of students' data through common formative and summative assessments, the process of matching interventions to specific student needs will be established, ensuring high levels of learning for all students.

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.

The Inclusive Administrator Leadership Projects (Advancing Inclusive Principal Leadership in partnership with the Council of Chief State School Officers and ALL IN for Beginning Administrators in partnership with the Arkansas Association of Educational Administrators) are DESE initiatives strategically designed to develop inclusive principals and administrators. The goal is to develop leaders 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. Effective inclusive leaders will demonstrate increased efficacy in the support and feedback provided to educators, and as a result, improve the quality of instruction at the building level.

Micro-credentialing for UDL and HLPs will further transform the approach to lifelong learning for educators in Arkansas. Integrating micro-credentials into the state's professional development system will empower educators with increased autonomy in identifying and developing new competencies. Additionally, it offers educators to measure competency in newly acquired skills and potentially earn recognition along DESE's career continuum. This shift towards greater educator ownership and agency is expected to result in the implementation of rigorous and high-quality instructional and assessment practices for the benefit of Arkansas students.

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 selection (4.5), training (4.0) and coaching (4.0), Organizational drivers of decision support data systems (4.5), facilitative administration (4.5) and systems intervention (4.5). Overall performance assessment of the Arkansas system coherence also remained stable at (4.0) as well as the technical & adaptive leadership drivers at (5.0). The SSIP includes multiple initiatives, each at different stages of implementation. Ratings are indicative of the intentional focus on coherence of initiatives across various stages of implementation.

The evaluation of improvement for the SSIP aligns with the SPDG evaluation plan. As the work has evolved over reporting cycles, tools to measure implementation fidelity have undergone modifications. The SPDG's comprehensive evaluation system measures the state system of support for growing educator capacity to proficiently implement UDL and HLP within daily instruction for academics and behavior. In addition, the SPDG evaluation plan monitors educator self-efficacy, impact of professional learning, and student outcomes, including value-added literacy scores. As the implementation team for strategy two of the SSIP, systemic improvements at the state level are measured through the SISEP State Capacity Assessment (SCA) tool. 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.

To promote high quality coaching, the SPDG utilizes the Coaching Fidelity of Implementation Rubric. In the Arkansas coaching model, coaches are defined as educational leaders who build the collective capacity and efficacy of a school system based on educators' self-identified needs to improve student outcomes. This is achieved by: demonstrating knowledge of content and pedagogy; displaying professional flexibility and responsiveness; formulating a comprehensive coaching plan; fostering a culture for learning and engagement; creating an environment of respect and rapport; and communicating effectively in the coaching relationship. To further support coaching capacity, the SPDG hosts Collaborative Coaching sessions to build relationships among coaches across the network, increase coaches' skills and tools based on coaching practices, support inclusive practices and establish a community where coaches receive assistance with ongoing implementation needs, problem-solve challenges, and share positive experiences and successful strategies. A Principal and Educator Self-Efficacy Survey is utilized to measure perceived acquisition, growth, knowledge, skill, and implementation of HLPs, UDL, and other evidence-based practices that promote inclusive education. The Micro-credential Professional Learning Evaluation Criteria assists the team in ensuring high-quality standards in the development and implementation of micro-credentials for UDL and HLPs. All training performed by the State team or coaching affiliates follows the Observation Checklist for High-Quality Professional Development (HQPD) Version 3.

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.

An important systemic data point to consider in the ongoing efforts to address evidence-based practices is the continued interest expressed in the DESE Special Education Resource Teacher Academies. The purpose of the Special Education Resource Teacher Academies is to provide current licensed public school educators in Elementary K-6, 4-8, or 7-12 ELA, Math, or Science the opportunity to earn an additional Special Education Resource Endorsement and participate in job-embedded professional development while receiving graduate school credit hours, at no cost to them. Educators obtaining this endorsement are able to provide special education services within the general education classroom, as supplementary supports, or in special education classrooms. One goal of the academies is to expand LEAs' ability to consider and offer a variety of special education service delivery models. With the increasing emphasis on inclusive practices, this opportunity supports Arkansas school districts by providing the skilled staff needed to lead the nation in student-focused inclusive education. Participating educators are part of the Novice Special Education Teacher Mentoring Program at their local education service cooperative where they will receive additional coaching, professional development, regional networking opportunities, and support throughout the school year. DESE and all partnering higher education programs provide programs that:

Include 12-15 hours of graduate coursework

Lead to a Special Education Resource Teacher Endorsement

Include some summer instruction to prepare teachers for the fall semester

Include ongoing supports throughout the school year

Are designed for completion of the Academy in one year

Cover Tuition, fees, and assessment costs

In the 2021-2022 academic year, 174 educators participated in the initial cohort. Two hundred and ninety four participants (294) will participate in the 2022-2023 academic year. Each educator preparation program agrees to promote HLPs and UDL within the coursework for the academies, and interest to participate continues to exceed expectations. Survey data indicating the numbers of participants interested in continuing learning on high-leverage and inclusive practices, UDL, and executive functioning, supports the sustained use of the evidence-based practices outlined in the SSIP.

Qualitative survey feedback gathered from inclusive practices trainings, which involved over 3,000 educators, administrators, and families representing districts from every Arkansas Regional Education Service Cooperative in 2022-2023, highlighted a strong desire among district and school teams for more support in implementing inclusive practices, including UDL, HLPs, and RTI/MTSS. There is an increasing trend where LEAs are seeking DESE support specifically for the practical implementation of inclusive practices. Notably, each evidence-based practice and improvement strategy outlined in the SSIP aligns with and supports this identified need. As a result, multiple statewide trainings focusing on UDL, HLPs, and executive functioning were introduced in the summer of 2022 and continue to be offered.

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

Strategy One-

Distributive Leadership Projects: The distributive leadership projects (IPP, EPIE & IESS) support the SSIP by building a culture of shared responsibility & collective efficacy between general & special educators, administrators, & related service professionals as well as advance the implementation of UDL & HLPs within MTSS. Each project will support additional cohorts during the next reporting cycle. For IPP & EPIE, DESE will continue to partner with national technical assistance (TA) providers for implementation support. DESE liaisons will work with the TA to build capacity & strengthen alignment of projects to systematically scale statewide. The DESE Inclusive Practices Specialist will coordinate all projects to ensure coherence & assist liaisons in capacity building efforts. By increasing access to quality core instruction & intervention, students are expected to demonstrate moderate to high growth in literacy as measured by the statewide assessment as well as improvement in LRE percentages.

High Leverage Practices: During this phase of SSIP, acquired survey data indicated progress regarding the self-efficacy of novice special educators in Arkansas (AR) when implementing HLPs. In ongoing efforts, the SSIP will leverage agency infrastructure & systems to increase state-level capacity of HLPs, with a focus on agency unit leaders, regional specialists, agency technical assistance providers, IHEs, & The Center for Exceptional Families (TCFEF), the state's parent training center. The SSIP will further the intentional collaboration with DESE Educator Effectiveness & IHEs around efforts to mentor all novice general & special educators with HLPs & align to the AR Special Education Resource Academy, a DESE partnership with IHEs to increase the number of special educators in the state. The anticipated expansion of HLPs is projected to improve the readiness of general & special educators, foster increased efficacy in knowledge & skills to effectively work with diverse learners & result in higher percentages of novice educators who choose to remain in the profession. Additionally, the SSIP will continue to partner with TCFEF to emphasize effective ways for families & educators to engage to improve outcomes for students with disabilities. In collaboration with TCFEF, a plan will be developed to learn more from both families & educators centered around the four categories of HLPs. The information learned from families & educators will be used to inform & further advance improvements across both strategies of the SSIP. To advance AR's focus on assistive & instructional technology (HLP17), every student in AR will have access to a suite of web-based accessibility tools accompanied with training & technology integration to support inclusive education & access to high-quality instruction. As students gain access to the suite of universal tools, it is expected that this work with HLPs, UDL & AEM will further advance leaderships' commitment to inclusive practices. Additionally, an increase in LRE is anticipated as students with disabilities will have greater access to quality core instruction.

Inclusive Administrator Leadership: AR recognizes the pivotal role of administrators to drive change for inclusive education. CCSSO will continue to support AR with the Advancing Inclusive Principal Leadership (AIPL) initiative & the SSIP SiMR will remain as the overarching goal for this work. An integral component of AIPL involves incorporating HLPs into statewide professional learning for principals & school leadership teams. DESE & the work of the SSIP will continue to partner with the Arkansas Association of Educational Administrators (AAEA) to provide all administrators involved in the AAEA Beginning Administrators Academy with the ALL IN training on inclusive practices. The DESE Inclusive Practices website & Toolkits will continue to expand by adding resources, research, & implementation supports, aiming to further advance inclusive education & improve outcomes for students with disabilities. Through this expansion, LEAs will recognize that these efforts extend far beyond the scope of special education & hold significance for all stakeholders, including administrators. DESE will further invest in inclusive principal leadership by forming a principal network to advance inclusive education. While improvements to the SiMR are anticipated, DESE also expects a sustained cultural shift led by principals at the build level aimed to promote the Least Dangerous Assumption, ensuring that all students are considered general education students. DESE also anticipates that inclusive leaders will guide buildings towards increasing student access to core instruction, promoting continuous improvement in the LRE for students with disabilities.

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 support for all students regardless of grade. Arkansas will continue to broaden support for the Strategic Instructional Model, placing a particular emphasis on enhancing digital access to the eight SIM™ Learning Strategies and Content Enhancement Routines. Training sessions & coaching on these strategies & routines will continue to be reinforced through a collaborative partnership with the University of Central Arkansas Mashburn Center for Learning. The next steps for this work will include scaling the reach and sustainability of SIM™ professional learning opportunities

via a learning management system, followed by job-embedded coaching. Additionally, the DESE Inclusive Practices Specialists will become certified in multiple strategies and routines to increase statewide access to certified trainers & coaches. The provision of resources & support for strategy instruction & content enhancement is expected to empower educators with the knowledge & skills necessary to help diverse students become self-directed learners. This improvement strategy directly aligns with HLP 14.

Strategy Two -

State Personnel Development Grant: Aligned with the SSIP, Arkansas will continue to leverage the SPDG to build upon previous work around RTI/MTSS for academics & behavior and through the incorporation of HLPs & UDL within professional learning. The SPDG & DESE Educator Effectiveness will continue collaborative efforts around the design of competency-based professional learning micro-credentials (MC). Next steps for this improvement strategy includes a MC for each HLP available to educators across the state via DESE's online learning management system. Arkansas will participate in the Micro-Credential Partnership of States with North Carolina, South Carolina, & Wyoming to develop assurance standards as a way to ensure all micro-credentials are of high quality. It is expected that through the use of MCs, educators across the state will gain the knowledge & ability to successfully implement UDL & HLPs within daily instruction which is expected to increase student access to quality, core instruction & improve outcomes for students with disabilities. To develop self-directed leaders & coaches, the SPDG will continue to offer Cognitive Coaching to scale implementation support of UDL & HLPs. The SPDG & DESE Educator Effectiveness will increase statewide coaching support by continuing to offer monthly Coaching Collaborative meetings & Communities of Practice focused on coaching skills; implementation challenges; & DESE-specific implementation challenges. It is expected that the Cognitive Coaching training & Communities of Practice will support coaches to develop a consistent set of practices used to effectively support classroom educators with the implementation of MCs for UDL & HLPs. An increase in educator self-efficacy for implementing UDL & HLPs is anticipated resulting in improved student outcomes.

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

YES

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

The above-listed SiMR data indicates that Arkansas has exceeded the target across three reporting cycles in SSIP-supported LEAs implementing the coherent improvement strategies. Stakeholder feedback from novice special educators, beginning administrators, educators seeking resource endorsement in the Special Education Resource Academies and from parent engagement sessions indicate that the SSIP is well-calibrated to the needs of Arkansas LEAs. Results from the SSIP Infrastructure Tool, and the State Capacity Assessment indicate that systemic change is occurring throughout the cascade of supports from the SEA to the classroom.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Following the submission of the new targets for the FFY 2020-2025 SPP/APR cycle, the OSE has continued to collaborate closely with numerous partners and through various initiatives to obtain authentic engagement and reciprocal exchange of information regarding the targets, including Indicator 17. These partners and/or initiatives include:

The State Special Education Advisory Council is an integral group of stakeholders who provide input on target setting and improvement activities. The State Special Education Advisory Council meetings are held in April, July, October and January. Each meeting provides a forum for solicitation of feedback regarding SPP/APR targets and the SSIP Theory of Action. 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 public participants are provided updates on the previously held stakeholder input sessions, compliance indicators, dispute resolution indicators, and the SSIP.

The Center for Exceptional Families (TCFEF) is a Parent Training and Information (PTI) center for the state with the mission of improving educational opportunities for students with disabilities, including students transitioning to adult life beyond high school. TCFEF maintains a large database of families of students with disabilities, and engages with them via social media, virtual and in-person meetings and through email. The OSE partnered with TCFEF during the target setting for the FFY 2020-2025 SPP/APR cycle and maintains ongoing collaboration to solicit stakeholder feedback regarding indicator target updates and the SSIP. TCFEF is also a contracted partner of the State Personnel Development Grant which directly aligns with the SSIP Theory of Action.

The Inclusive Practices 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 quality core instruction and established systems of intervention. Participating schools engage in a collaborative evaluation process that gathers data regarding student achievement, teacher practices, and effective professional development. This project directly aligns with several key indicators, but is especially integral to supporting Indicator 5 (LRE) and Indicator 17 (SSIP). Schools supported by this initiative are factored into the Arkansas State-identified Measurable Result (SiMR). These LEAs form a key constituency group for ongoing input on targets and revisions. More information about this project can be found at this website: <https://dese.ade.arkansas.gov/Offices/special-projects/inclusive-practices-project>

The Arkansas Association of Educational Administrators (AAEA) is an agency of diverse school leaders that promotes quality public education for all children in Arkansas. AAEA's mission is to ensure high standards of leadership by providing quality professional development, influencing education legislation and policy, stimulating and fostering support and building successful coalitions. The OSE maintains a close partnership with AAEA, and particularly the constituent groups of Beginning Administrators (BA) and Special Education Administrators (AASEA). These partnerships provide avenues for broad stakeholder input on all targets in the SPP/APR, and any need for subsequent revisions to the targets. The BA subgroup has had increasing input over the past year through the OSE and AAEA's Advancing Inclusive Principal Leadership (AIPL) initiative.

The ALL IN Initiative of the OSE promotes equitable access to core instruction to foster greater opportunities for students to reach college, career, and life goals. The Inclusive Practices website includes an Inclusive Education Toolkit and provides important information for stakeholders in the areas of Least Restrictive Environment (LRE), Universal Design for Learning (UDL), High-Leverage Practices (HLPs), Inclusive Principal Leadership, Inclusive Related Services, Parent Resources, Flexible Service Delivery, Scheduling, IEP Documentation and Videos for Implementation Support. Additional information on this initiative can be found on the following website <https://sites.google.com/view/inclusive-practices/home>. As part of the ALL IN Initiative, the Learning for All statewide training was continued across the state with over 3000 attendees. Learning for All emphasizes two key considerations for achieving inclusive education: Universal Design for Learning and Executive Functioning. Learning for All emphasizes two key considerations for achieving inclusive education: Universal Design for Learning and Executive Functioning. These statewide trainings provide an avenue for broad

stakeholder feedback regarding Indicator 17. In addition, during this reporting period a meeting occurred with the Arkansas Educator Preparation Program Council of Deans to present the ALL IN message and the SSIP Theory of Action. Input from the Council was requested on the direction of this work and the connectivity between higher education preparation programs. As a result of this collaboration, the Council decided to include high-leverage practices into the curricula.

The Arkansas School-Based Therapy Conference is an opportunity for the constituencies of special education administrators, occupational therapists, physical therapists, and speech-language pathologists to discuss indicator 17 targets and data, and to have meaningful dialogue to connect their roles to the targets when considering flexible service delivery, scheduling, funding, collaborative teaming structures, and high-leverage practices.

The Arkansas Collaborative Consultants (ACC) Convening and ACC Monthly Director Meetings represent key stakeholders from OSE's technical assistance arm and play a vital role in establishing performance measures to meet the targets outlined in the SPP/APR and to prioritize performance measures within discretionary grants. These diverse stakeholders provide leadership, support and service to LEAs in all 75 counties in the state, in alignment with the vision and mission of OSE and the SSIP. Discussions and feedback solicited across the ACC convening and monthly meetings include Indicator 17: SSIP improvement strategies, data, targets, planning, and action steps.

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, Special Education LEA Supervisors, and The Center for Exceptional Families to keep these groups informed as well as to solicit their feedback.

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 OSE partnered with The Center for Exceptional Families (TCFEF) during the target setting for the FFY 2020-2025 SPP/APR cycle & maintains ongoing collaboration to solicit stakeholder feedback regarding indicator targets. TCFEF maintains a large database of families of students with disabilities, & engages with them via social media, virtual and in-person meetings, & through email. As part of the target setting, in December of 2021, TCFEF, the IDEA Data and Research Manager, and the SSIP Coordinator facilitated a statewide virtual event for families to provide feedback on the setting targets, data analysis, & improvement strategies. For families who could not attend the live virtual session, a link to a recording of this event was sent to TCFEF's broad network of families to review and provide input at their convenience. Further, TCFEF is a partner of the State Personnel Development Grant (SPDG) which directly aligns to the SSIP Theory of Action, and a representative serves on the SPDG Core Management team & functions as the Family and Community Liaison. Additional information can be found on the TCFEF and SPDG webpages at <http://thecenterforexceptionalfamilies.org> & <https://www.arspdg.org/parents-family/>. During the 2022-23 school year TCFEF provided 89 training sessions exclusively for parents on such topics as Understanding the Referral process, Understanding the IEP, and Understanding Behavior Plans. Through these and other interactions, TCFEF collected feedback from parents and families to inform OSE on implementation efforts.

During this reporting cycle, the OSE Inclusive Practices website expanded to include information that describes the systemic change occurring within special education in Arkansas, and provides implementation resources and supports. The website has provided effective and efficient delivery of information for key stakeholders, including individuals with disabilities, families, educators, administrators, institutions of higher education and community members. The website can be accessed here <https://sites.google.com/view/inclusive-practices/home>.

The inclusion of DESE and LEA special education staff in the implementation of state initiatives such as Arkansas THRIVE, ALL IN, and the Inclusive Practices Project directly affect multi-tiered systems of support (MTSS) for academics and behavior as well as student access to quality core instruction. The ALL IN initiative and the Inclusive Practices Project place focus on the advancement of inclusive education and includes the collection of participant feedback through engagement activities and survey data. Based on LEA and participant indicated needs, training improvements and revisions were made related to service delivery, scheduling, and data analysis for the purpose of ensuring all students have access to the general education curriculum. With greater access to MTSS and rigorous instruction alongside peers with and without disabilities, the results of these activities should be evident in the future by impacting several indicators and student outcomes.

To collect input for analyzing data, develop improvement strategies, and evaluate progress, the OSE invites stakeholders to attend various meetings, conferences, trainings, and webinars through several methods including direct invitations, emails to LEAs, newsletters, Commissioner Memos (DESE website), placement on the DESE event calendar, and listserv postings. Stakeholder feedback is collected via notetaking, recording of sessions, participant surveys, and direct surveys on specific topics.

Opportunities for stakeholder feedback occurred at several state conferences. The ADE Summit, which is held each summer, provides opportunities for stakeholder input on key improvement strategies including the SSIP. State and national experts present on aspects of UDL, HLPs, master scheduling & collaboration. The sessions focus on the advancement of Arkansas' professional development system that is heavily supported by the SPDG. One combined session, supported by DESE Educator Effectiveness and the SPDG, focused on job-embedded professional learning (i.e., micro-credentials) for UDL and HLPs. This session is in direct alignment with the coherent improvement strategies outlined in the SSIP Theory of Action & solicited feedback on the perceived benefits and potential use of micro-credentials.

Several opportunities in which the OSE solicited stakeholder input and feedback include monthly LEA meetings, monthly meetings with the Arkansas Collaborative Consultants (ACC), yearly ACC Fall Convening, yearly Arkansas School-based Therapy Conference, yearly DESE Summit, monthly OSE meetings, monthly meetings with regional education service cooperatives, cross-agency content meetings, and statewide trainings such as ALL IN, Arkansas THRIVE, and the Inclusive Practices Project.

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

NO

Additional Implementation Activities

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

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

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

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

17 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Jody Fields

Title:

Part B Data Manager

Email:

jody.fields@ade.arkansas.gov

Phone:

501-916-5861

Submitted on:

04/23/24 9:28:33 AM

Determination Enclosures

RDA Matrix

Arkansas 2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
72.50%	Needs Assistance

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	12	60.00%
Compliance	20	17	85.00%

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B."

2024 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	99%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	98%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	15%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	91%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	21%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	91%	1

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	99%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	99%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	29%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	95%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	16%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	94%	1

(2) Statewide assessments include the regular assessment and the alternate assessment.

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	9	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	88	2

**When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. §300.102(a)(3)(iv), in effect June 30, 2017, “the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential.”

2024 Part B Compliance Matrix

Part B Compliance Indicator (3)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2021 (4)	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	0.38%	N/A	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.39%	N/A	2
Indicator 11: Timely initial evaluation	99.29%	YES	2
Indicator 12: IEP developed and implemented by third birthday	100.00%	N/A	2
Indicator 13: Secondary transition	83.05%	NO	1
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	72.73%		0
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

(3) The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2024_Part-B_SPP-APR_Measurement_Table.pdf

(4) This column reflects full correction, which is factored into the scoring only when the compliance data are >=5% and <10% for Indicators 4B, 9, and 10, and >=90% and <95% for Indicators 11, 12, and 13.

Data Rubric
Arkansas

FFY 2022 APR (1)

Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1

APR Score Calculation

Subtotal	21
Timely Submission Points - If the FFY 2022 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	26

(1) In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 8/30/23	1	1	1	3
Personnel Due Date: 2/21/24	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Discipline Due Date: 2/21/24	1	1	1	3
State Assessment Due Date: 1/10/24	1	1	1	3
Dispute Resolution Due Date: 11/15/23	1	1	1	3
MOE/CEIS Due Date: 5/3/23	1	1	1	3

618 Score Calculation

Subtotal	21
Grand Total (Subtotal X 1.23809524) =	26.00

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation

A. APR Grand Total	26
B. 618 Grand Total	26.00
C. APR Grand Total (A) + 618 Grand Total (B) =	52.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part B 618 Data

1) Timely – A State will receive one point if it submits all *EDFacts* files or the entire *EMAPS* survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	C002 & C089	8/30/2023
Part B Personnel	C070, C099, C112	2/21/2024
Part B Exiting	C009	2/21/2024
Part B Discipline	C005, C006, C007, C088, C143, C144	2/21/2024
Part B Assessment	C175, C178, C185, C188	1/10/2024
Part B Dispute Resolution	Part B Dispute Resolution Survey in <i>EMAPS</i>	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in <i>EMAPS</i>	5/3/2023

2) Complete Data – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to *EDFacts* aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in *EMAPS*. State-level data include data from all districts or agencies.

3) Passed Edit Check – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection

Dispute Resolution

IDEA Part B

Arkansas

School Year: 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing" if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	39
(1.1) Complaints with reports issued.	23
(1.1) (a) Reports with findings of noncompliance	14
(1.1) (b) Reports within timelines	23
(1.1) (c) Reports within extended timelines	0
(1.2) Complaints pending.	2
(1.2) (a) Complaints pending a due process hearing.	2
(1.3) Complaints withdrawn or dismissed.	14

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	50
(2.1) Mediations held.	24
(2.1) (a) Mediations held related to due process complaints.	24
(2.1) (a) (i) Mediation agreements related to due process complaints.	0
(2.1) (b) Mediations held not related to due process complaints.	0
(2.1) (b) (i) Mediation agreements not related to due process complaints.	0
(2.2) Mediations pending.	0
(2.3) Mediations withdrawn or not held.	26

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	38
(3.1) Resolution meetings.	19
(3.1) (a) Written settlement agreements reached through resolution meetings.	7
(3.2) Hearings fully adjudicated.	11
(3.2) (a) Decisions within timeline (include expedited).	8
(3.2) (b) Decisions within extended timeline.	0
(3.3) Due process complaints pending.	15
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	12

Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)

(4) Total number of expedited due process complaints filed.	3
(4.1) Expedited resolution meetings.	1
(4.1) (a) Expedited written settlement agreements.	1
(4.2) Expedited hearings fully adjudicated.	1
(4.2) (a) Change of placement ordered	1
(4.3) Expedited due process complaints pending.	0
(4.4) Expedited due process complaints withdrawn or dismissed.	2

State Comments:

Errors:

Please note that the data entered result in the following relationships which violate edit checks:

State error comments:

This report shows the most recent data that was entered by:

Arkansas

These data were extracted on the close date:

11/15/2023

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

<https://sites.ed.gov/idea/how-the-department-made-determinations/>



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

Final Determination Letter

June 21, 2024

Honorable Jacob Oliva
Secretary of Education
Arkansas Department of Education
Four Capitol Mall, Room 304-A
Little Rock, AR 72201

Dear Secretary Oliva:

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Arkansas needs assistance in implementing the requirements of Part B of the IDEA. This determination is based on the totality of Arkansas' data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Arkansas' 2024 determination is based on the data reflected in its "2024 Part B Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for each State and Entity and consists of:

- (1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;
- (2) a Results Matrix that includes scoring on Results Elements;
- (3) a Compliance Score and a Results Score;
- (4) an RDA Percentage based on both the Compliance Score and the Results Score; and
- (5) the State's or Entity's Determination.

The RDA Matrix is further explained in a document, entitled "[How the Department Made Determinations under Section 616\(d\) of the Individuals with Disabilities Education Act in 2024: Part B](#)" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2024, as it did for Part B determinations in 2014-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for Arkansas).

In making Part B determinations in 2024, OSEP continued to use results data related to:

- (1) the participation and performance of CWD on the most recently administered (school year 2021-2022) National Assessment of Educational Progress (NAEP), as applicable (For the 2024 determinations, OSEP using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2024 determination as it did for Puerto Rico's 2023 determination. OSEP did not use NAEP data in making the BIE's 2024 determination because the NAEP data available for the BIE were not comparable to the NAEP data available for the 50 States, the District of Columbia, and Puerto Rico; specifically, the most recently administered NAEP for the BIE is 2019, whereas the most recently administered NAEP for the 50 States, the District of Columbia, and Puerto Rico is 2022.)
- (2) the percentage of CWD who graduated with a regular high school diploma; and
- (3) the percentage of CWD who dropped out.

For the 2024 IDEA Part B determinations, OSEP also considered participation of CWD on Statewide assessments (which include the regular assessment and the alternate assessment). While the participation rates of CWD on Statewide assessments were a factor in each State or Entity's 2024 Part B Results Matrix, no State or Entity received a Needs Intervention determination in 2024 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2025 determinations.

You may access the results of OSEP's review of Arkansas' SPP/APR and other relevant data by accessing the EMAPS SPP/APR reporting tool using your Arkansas-specific log-on information at <https://emaps.ed.gov/suite/>. When you access Arkansas' SPP/APR on the site, you will find, in applicable Indicators 1 through 17, the OSEP Response to the indicator and any actions that Arkansas is required to take. The actions that Arkansas is required to take are in the "Required Actions" section of the indicator.

It is important for you to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

You will also find the following important documents in the Determinations Enclosures section:

- (1) Arkansas' RDA Matrix;
- (2) the HTDMD [link](#);

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UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

- (3) "2024 Data Rubric Part B," which shows how OSEP calculated Arkansas' "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and
- (4) "Dispute Resolution 2022-2023," which includes the IDEA Section 618 data that OSEP used to calculate the Arkansas' "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Arkansas' 2024 determination is Needs Assistance. A State's or Entity's 2024 RDA Determination is Needs Assistance if the RDA Percentage is at least 60% but less than 80%. A State or Entity's determination would also be Needs Assistance if its RDA Determination percentage is 80% or above but the Department has imposed Specific Conditions on the State's or Entity's last three IDEA Part B grant awards (for FFYs 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering three criteria related to IDEA Part B determinations as part of the Department's continued efforts to incorporate equity and improve results for CWD. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). This factor would be reflected in the determination for each State and Entity through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State or Entity that would otherwise receive a score of Meets Requirements would not be able to receive a determination of Meets Requirements if the State or Entity had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is considering as potential additional factors the improvement in proficiency rates of CWD on Statewide assessments. Third, the Department is considering whether and how to continue including in its determinations criteria the participation and proficiency of CWD on the NAEP.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix and States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 3, 5, and 6 (as they have in the past). Under EDFacts Modernization, States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in the EDPass or EMAPS system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, Arkansas must report annually to the public, by posting on the State educational agency's (SEA's) website, the performance of each local educational agency (LEA) located in Arkansas on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Arkansas' submission of its FFY 2022 SPP/APR. In addition, Arkansas must:

- (1) review LEA performance against targets in the State's SPP/APR;
- (2) determine if each LEA "meets the requirements" of Part B, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part B of the IDEA;
- (3) take appropriate enforcement action; and
- (4) inform each LEA of its determination.

Further, Arkansas must make its SPP/APR available to the public by posting it on the SEA's website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

- (1) includes Arkansas' determination letter and SPP/APR, OSEP attachments, and all State or Entity attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and
- (2) will be accessible to the public via the ed.gov website.

OSEP appreciates Arkansas' efforts to improve results for children and youth with disabilities and looks forward to working with Arkansas over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,

Valerie C. Williams

Director

Office of Special Education Programs

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cc: Arkansas Director of Special Education

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