# 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

# Iowa



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

lowa's process for providing progress reports, as well as setting targets and baselines with the Special Education Advisory Panel (SEAP) includes providing the historical context of the topic around each indicator, the historical data and targets, and important current or future planned activities that may have an effect on outcome data. These materials are provided to members prior to meetings for time to review the data and have questions prepared for receiving clarification.

In the year for FFY22, no targets were revised and no baselines were reset. Indicator data and targets submitted in each SPP/APR are presented to SEAP each year. SEAP members discuss and provide feedback regarding strategies the state might use to improve indicator data. Further, Iowa engages in a number of ongoing opportunities to include diverse groups of parents to participate in systemic planning and implementation. The activities themselves are tailored to the specific topic.

For example, the Department contracted with ASK Resource Center to provide outreach and support to families whose Learners are Served under IDEA. Activities included: (a) Coordinating and delivering statewide RESPECT training as a means of building capacity, (b) Working with consultants, families and stakeholders to address the needs of lowa students with hearing loss and their families, (c) Designing, coordinating and delivering the transitioniowa.org website, its content and related training/information for families experiencing postsecondary transition, and (d) Coordinating and delivering the annual Together We Can Conference for families. The Department also provides a portion of Part B discretionary funds to Area Education Agencies to support activities for Family-Educator Partnerships.

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

327

#### **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).

Infrastructure.

Beginning in 1974, lowa code required a free appropriate public education to meet the needs of children from birth through 21 years of age eligible for special education [Chapter 256B.2(3)]. It mandated the creation of statewide intermediate education agencies, or Area Education Agencies (AEAs), to ensure the provision and equity of services across counties or merged areas. In Iowa, AEAs are currently mandatory; each Local Education Agency (LEA) must be assigned to an AEA. The AEAs carry special education general supervision/compliance responsibilities, and provide the services needed by LEAs, such as (1) provision of special education support services to individuals under the age of 21 years, (2) media and other educational services to all children through grade 12, and (3) implement the Child Find system to locate and identify students suspected of having disabilities.

The vision of lowa's Individuals with Disabilities Education Act System of General Supervision (IDEA-SGS) is to provide leadership in system structures and processes (policies, procedures, practices), and facilitate the use of a statewide IDEA data system to: 1. improve results and functional outcomes for infants, toddlers, and learners with disabilities; 2. empower families and caregivers to enhance those results; 3. ensure early intervention service programs, AEAs, and LEAs meet IDEA Part C and Part B requirements with an emphasis on results and outcomes; and 4. use complete, valid, and reliable data for reporting and decision-making. This is supported through implementation of our robust continuous improvement cycle that includes critical areas of focus: Inform, Detect, Inspect, Correct-Prevent. This System has historically been in partnership between the lowa Department of Education (IDE) and the AEAs.

Data and Reporting ensures accurate and timely data collection, analysis and reporting across all measures required within IDEA, including Part B indicators, and related program evaluation measures. Data and reporting is the foundation of IDEA-SGS informing the state and constituents on progress and outcome results for students aged 3 to 21. Data are collected through lowa's ACHIEVE online system which supports collecting/using data at the learner, classroom, school, district, AEA and statewide level. At the statewide level, data are used to complete required state and federal reporting requirements, identify noncompliance issues and intervention efficacy, promote discussions across educators, parents, families and learners, and support lowa's IDEA-Differentiated Accountability (Integrated Monitoring) system which designates districts in need of Level 1, 2 or 3 supports.

Fiscal Management ensures funds are distributed and used appropriately in adherence to IDEA and state laws/policies. Entities receiving IDEA funds (AEAs/LEAs) are required to complete an annual application that includes an action plan, narrative, and detailed budget around use of funds to implement IDEA programming. Applications are reviewed, approved, and monitored. Expenditures are tracked to ensure consistency with approved budgets. AEA expenditures are tracked and reported quarterly; a summary report is provided to the state at the end of the fiscal year. Likewise, LEA expenditures are tracked and reported by and to their respective AEA, the results of which are compiled and reported to the state\*

Dispute Resolution includes state complaints, mediation and due process, through informal and formal mechanisms. The IDE has written procedures for resolving any complaint which are widely disseminated to parents and other interested individuals (e.g., lowa Parent Training and Information Center, Disability Rights Iowa, independent living centers). A mediator assists in resolving differences between parents, schools and private service providers. Mediation is voluntary on the part of all parties, may occur at any time, and is conducted by a qualified and impartial mediator who is trained in effective mediation techniques. Whenever a due process hearing request is filed, the parties involved in the dispute have an opportunity for an impartial due process hearing.

Compliance and Improvement includes identification and correction of noncompliance within the AEAs and LEAs. In regards to the AEAs, the IDE annually conducts desk audits for each AEA and follows up with accreditation visits if determined necessary. During this visit AEA documents are reviewed and internal (AEA staff) and external (Staff from LEAs served by the AEA) interviews are held that relate to the agency's five-year Comprehensive Improvement Plan and the services the agency provides in accordance with the eight required standards and one optional standard outlined in Chapter 72 of the Iowa Code. A targeted interview is held with special education staff; topics discussed during this interview include the agency's State Performance Plan indicator data, the required standards, LEA special education procedural compliance data, the AEA's general supervision responsibilities and other AEA data used by the IDE to make the accreditation determination regarding the agency.

Compliance and Improvement-Monitoring for LEAs is similar to the process used with the AEAs. One difference is at the beginning in FY2022, district results for students receiving special education services were included as part of the desk audits. Results were used as part of lowa's Integrated Monitoring: IDEA-Differentiated Accountability Index Score, used to identify the level of support each district may need:

Level 1. There are 229 LEAs identified in Level 1 that met IDEA requirements with an index score at =/>65. Additional support provided within the LEA, or through AEAs, includes: 1.Selecting an area of focus (early literacy or secondary transition), 2.Developing an implementation plan, 3.Engaging in professional learning aligned to that area, and 4.Submitting a progress report to the IDE at the conclusion of the academic year.

Level 2. There are 65 LEAs identified in Level 2 that met IDEA requirements with an index score of 62.5 to 64.99. Required additional support through AEAs includes: 1.Completing a review of district data aligned to IDE-selected area of focus (early literacy or secondary transition), 2.Developing an implementation plan, 3.Engaging in professional learning and system improvement activities aligned to that area, 4.Engaging in monthly system/practice coaching and check-ins, and 5.Submitting a progress report to the IDE at the conclusion of the academic year.

Level 3. There are 33 LEAs identified in Level 3 that did not meet IDEA requirements with a score of <62.5. Required support through the AEAs are the same as Level 2 but within a three year cohort-cycle of improvement and an increase in monitoring and support by the IDE.

An Accreditation Site Visit may be required, and if so, the process may include lowa Chapter 12, Equity, Special Education and Title Programs; dependent upon findings of the desk audit. LEAs provide additional information as a result of the IDE's procedural compliance review related to the implementation of IDEA. Data are collected through a Web-based tool with a report developed for each LEA to identify individual student noncompliance and whether issues are identified as a system level issue. If noncompliance is identified as a system level issue, the district must respond to the corrective action identified within the report. The AEA then monitors and verifies the correction of individual noncompliance as well as the implementation of the required corrective action. Individual student noncompliance and system level corrective action are to be corrected immediately, but no later than one year from date of notification. After the AEA verifies that all corrections have been made, documentation is submitted to the IDE.

\*Note there is an exception to this if a school does CEIS.

#### **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.

lowa's technical assistance system as distinguished by OSEP, is intricately entwined with lowa's professional development system. This section, therefore, describes the structures which support technical assistance and professional development. The activities and strategies used for technical assistance and professional development are explained within the description of lowa's professional development system.

lowa's technical assistance system has long been a partnership between the IDE, AEAs and LEAs through the IDEA Support Network and SDI Literacy Network. These structures provide leverage in four ways: (1) Alignment of resources, including fiscal and personnel, focused on one priority (literacy) across priority areas that have the greatest success across children/youth (work teams); (2) Collaboration of the DE, AEA and LEAs; (3) Identification/development of evidence-based frameworks, strategies and programs by experts in the field regardless of affiliation or location; and (4) Intentional statewide scaling based on implementation science.

# **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.

Using the Network structures previously described, Iowa employs its own model of professional development, established from evidence based practices of professional learning. The Iowa Professional Development Model (IPDM) is an integrated cycle of planning, ongoing implementation and evaluation. It emphasizes ongoing support and feedback for the learning and application of new skills. Iowa Administrative Code requires each district's professional development plans to meet the following standards:

- 1. Align with the lowa teaching standards and criteria;
- 2. Deliver research-based instructional strategies aligned with the student achievement goals established by the district;
- Deliver professional development training and learning opportunities that are targeted at improvement of instruction and designed with the following components:
  - a. Student achievement data and analysis, comparisons of sub-group data which includes students with disabilities;
  - b. Theory about learning and instruction;
  - c. Classroom demonstration and practice;
  - d. Classroom observation and self-reflection;
  - e. Teacher collaboration and study of teacher implementation; and
  - f. Integration of instructional technology, if applicable;
- 4. Include an evaluation component of professional development that measures improvement in instructional practice and its impact on student learning; and
- 5. Support the professional development needs of district certified staff responsible for instruction.

lowa's established Professional Learning Governance Council (PLGC) identifies and prioritizes statewide needs for professional learning. PLGC members include two representatives of local special education directors, two representatives of AEA directors of special education and two representatives of the IDE.

# 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.

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

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

YES

**Number of Parent Members:** 

17

# **Parent Members Engagement:**

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

Parents of individuals with disabilities and/or individuals with disabilities constitute 57% of the membership of SEAP (17/30 members), and are involved in every aspect of stakeholder engagement such as data analysis of historical data for each indicator, providing input on which set of targets would be ambitious yet achievable, discussing improvement strategies to reach the proposed targets, and understanding the progress across indicators (evaluation).

Note that evaluation of progress is conducted by comparing annual indicator outcomes to the targets set.

#### Activities to Improve Outcomes for Children with Disabilities:

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

The State established a parent group specifically to provide input on family engagement in the IEP process. The focus of the group is on the development of an ACHIEVE Family Portal to the state-wide IEP system. Their ongoing input has been used to directly inform the development of this portal and related Family Portal User Guide. The portal will allow families real-time access to progress monitoring data as well as all documents related to their child's IEP. The original portal launch date was July 2023, however this has been rescheduled to launch in February 2024.

## **Soliciting Public Input:**

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

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and Iowa's Special Education Advisory Panel (SEAP). For any revisions needed prior to any SPP/APR submission, feedback is gathered at least two months ahead, to allow for consideration and additional sessions, if warranted. Annual updates are provided to SEAP, which may produce specific actions or activities for the rest of the year.

In addition, in FY22, the IDE solicited input on Iowa Administrative Code (IAC), Chapter 41 in compliance with Executive Order 10. Executive Order 10 put a moratorium on administrative rulemaking and instituted a comprehensive review of all existing administrative rules, including IAC 281--41. Discussions focused on revisions to rule and any related impact on procedures, processes and services for students with IEPs and the families and educators who support them. Feedback was then used in refining revisions prior to submission.

# 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.

Progress of the state's performance on the indicators is shared annually with SEAP, which is involved in any needed revisions to targets, and progress across indicators, improvement strategies, SiMr and SSIP. Outcome data are shared with various stakeholder groups that meet throughout the year, such as the AEA Special Education Directors and State Special Education team, SEAP, and various state work groups for discussion regarding progress evaluation. This also includes public posting of state and LEA data profiles on the public reporting page, and the IDEA-DA support site.

# 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.

A link to Iowa's current SPP/APR on the IDEA website is located on IDE's website under the Special Education Public Reporting webpage: https://educate.iowa.gov/pk-12/special-education/public-reporting.

When made available, the FFY 2022 SPP/APR will be posted on the same IDE website in the same location. Performance of AEAs and LEAs on appropriate indicators are posted annually by June 1. District and AEA profiles are posted at: https://educateiowa.gov/pk-12/special-education/special-education-public-reporting

# Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2022 and 2023 is Needs Assistance. In the State's 2023 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

### Response to actions required in FFY 2021 SPP/APR

In regards to accessing technical assistance sources, Iowa accessed the National Center for Systemic Improvement (NCSI) to assist in determining the result elements and/or compliance indicators and improvement activities in order to focus the state's use of available technical assistance to improve performance. As a result of the technical assistance received, the state action was the development and implementation of components of IDEA-DA, including technical assistance across the state to improve performance. This includes the following three strategies outlined in detail within indicator B17:

Strategy 1. Establish a technical assistance system to effectively implement and support personnel preparation and professional development in the area of SDI.

Strategy 2. Build capacity of lowa's coaching network so that network participants have the capacity to train, coach, and support delivery of SDI with integrity.

Strategy 3. Deliver high-quality professional development so that SDI is implemented with fidelity and effectively improves learning for a wide range of learners.

# Intro - OSEP Response

The State's determinations for both 2022 and 2023 were Needs Assistance. Pursuant to Section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 23, 2023 determination letter informed the State that it must report with its FFY 2022 SPP/APR submission, due February 1, 2024, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

# Intro - Required Actions

The State's IDEA Part B determination for both 2023 and 2024 is Needs Assistance. In the State's 2024 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2023 SPP/APR submission, due February 1, 2025, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

# **Indicator 1: Graduation**

# **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 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
2020	80.43%

FFY	2017	2018	2019	2020	2021
Target >=	95.00%	95.00%	95.00%	83.37%	85.42%
Data	74.25%	76.51%	83.12%	80.43%	77.68%

# **Targets**

FFY	2022	2023	2024	2025
Target >=	86.57%	87.72%	88.87%	90.00%

#### Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

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#### **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)	2,912
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)	
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)	62
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)	975

# 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
2,912	3,949	77.68%	86.57%	73.74%	Did not meet target	Slippage

# Provide reasons for slippage, if applicable

The State attributes slippage to effects of the COVID-19 pandemic, which impacted learners across all student groups. For example, the 4-year cohort graduation rate in lowa decreased from the 2019-2020 rate across every single student group. This rate decreased between 2020-2021 to 2021-2022 in every student group with the exception of very slight increases for White (92.6 to 92.7) and Asian (92.9 to 93.0) with a larger increase for American Indian or Alaskan Native (76.9 to 81.1). Therefore these data reflect the larger overall trend for lowa's students.

# **Graduation Conditions**

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

Graduation in the State of Iowa is defined as (1) a student who has received a regular diploma who completed all unmodified district graduation requirements in the standard number of four years, or (2) students receiving a regular diploma from an alternative placement within the district, or who have had the requirements modified in accordance with a disability. Students who have finished the high school program but did not earn a diploma, or earned a certificate of attendance or other credential in lieu of a diploma are not considered graduates.

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 EDFacts file specification FS009.

# Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to 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
2012	21.49%

FFY	2017	2018	2019	2020	2021
Target <=	19.50%	19.00%	19.00%	18.52%	18.28%
Data	19.34%	19.02%	18.79%	17.37%	20.94%

# **Targets**

FFY	2022	2023	2024	2025
Target <=	18.02%	17.77%	17.51%	17.25%

# Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

#### **Prepopulated Data**

Source	Date	Description	Data
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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)	
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)	62
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)	975

# 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
975	3,949	20.94%	18.02%	24.69%	Did not meet target	Slippage

# Provide reasons for slippage, if applicable

The State attributes slippage to the ongoing effects of the COVID-19 pandemic through FY21 and FY22 school years, which directly impacted the overall dropout rate across the state. The State dropout rate has increased each year across all student groups from FFY20 to FFY22 with just two exceptions reflected below across FY20, FY21 and FY22, respectively:

- --American Indian or Alaskan Native at a dropout rate of 6.9, 7.4 and 6.7; and
- --White at a dropout rate of 1.6, 2.2 and 2.2.

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

The National Center for Education Statistics (NCES) definitions used for dropouts include students who satisfy one or more of the following conditions:

- Was enrolled in school at some time during the previous school year and was not enrolled as of Count Day of the current year or
- Was enrolled in school at some time during the previous school year and left the school before the previous summer and
- Has not graduated from high school or completed a state or district-approved educational program; and
- Does not meet any of the following exclusionary conditions:
- transfer to another public school district, private school, or state or district-approved educational program,
- temporary school-recognized absence for suspension or illness,
- death, or
- move out of the state or leave the country
- student who has left the regular program to attend an adult program designed to earn a High School Equivalency Diploma (HSED) or an adult high school diploma administered by a community college is considered a dropout. However, a student who enrolls in an alternative school or alternative program administered by a public school district is not considered a dropout.

## 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	А	Grade 4	2018	98.55%
Reading	В	Grade 8	2018	97.60%
Reading	С	Grade HS	2018	95.48%
Math	А	Grade 4	2018	98.55%
Math	В	Grade 8	2018	97.63%
Math	С	Grade HS	2018	95.54%

# **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

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

# FFY 2022 Data Disaggregation from EDFacts

#### **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)	5,818	5,042	13,583	
b. Children with IEPs in regular assessment with no accommodations (3)	919	492	1,621	
c. Children with IEPs in regular assessment with accommodations (3)	4,565	4,142	10,510	
d. Children with IEPs in alternate assessment against alternate standards	281	271	908	

#### **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)	5,819	5,043	13,592
b. Children with IEPs in regular assessment with no accommodations (3)	922	493	1,643
c. Children with IEPs in regular assessment with accommodations (3)	4,573	4,166	10,586
d. Children with IEPs in alternate assessment against alternate standards	279	264	895

- (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 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	5,765	5,818	98.52%	95.00%	99.09%	Met target	No Slippage
В	Grade 8	4,905	5,042	96.74%	95.00%	97.28%	Met target	No Slippage
С	Grade HS	13,039	13,583	93.35%	95.00%	95.99%	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
Α	Grade 4	5,774	5,819	98.58%	95.00%	99.23%	Met target	No Slippage
В	Grade 8	4,923	5,043	96.96%	95.00%	97.62%	Met target	No Slippage
С	Grade HS	13,124	13,592	93.78%	95.00%	96.56%	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.

lowa does not report the number of children without disabilities participating in regular assessments who were provided accommodations. Therefore the State does not report the number of children with disabilities participating in regular assessments who were provided accommodations (that did not result in an invalid score), as this is not reported for any category of students.

The State publicly reports on the participation of children with disabilities on statewide assessments in two places. Participation of children with disabilities on the regular assessment is found by following these instructions:

- 1. Go to www.iaschoolperformance.gov
- 2. To view the data at the state level, select the most recent year from the dropdown menu and click on "View State Report".
- 3. From the menu bar, click on "Learning Measures" and select "Participation" from the options below.
- 4. The following screen gives details on the participation of students in English Language Arts and Math. Students with Disabilities (IEP) is listed with other student subgroups. The percentage is shown in the bar, with the numerator and denominator above each bar ("x out of x students").
- 5. To view the same data for any district or school in the state, use the search bar on the main site page, or the "Search/Compare" button on subsequent pages, to select any specific district or school.
- 6. Repeat Steps 3 and 4 to view participation for the selected district or school.

Participation of children with disabilities on the alternate assessment are found on the State's public website at this link: https://educate.iowa.gov/pk-12/special-education/public-reporting#iowa-alternate-assessment-participation-rates

Provide additional information about this indicator (optional)

# 3A - Prior FFY Required Actions

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

#### Response to actions required in FFY 2021 SPP/APR

The language of 34 C.F.R. § 300.160(f) requires SEAs to make available and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children. As indicated previously, lowa does not report the number of children in general education participating in regular assessments with accommodations (e.g., students with 504 plans), thus, the state does not report on the number of children in special education who take assessments with accommodations.

The State publicly reports on the participation of children with disabilities on statewide assessments in two places. Participation of children with disabilities on the regular assessment is found by following these instructions:

- 1. Go to www.iaschoolperformance.gov.
- 2. To view the data at the state level, select the most recent year from the dropdown menu and click on "View State Report".
- 3. From the menu bar, click on "Learning Measures" and select "Participation" from the options below.
- 4. The following screen gives details on the participation of students in English Language Arts and Math. Students with Disabilities (IEP) is listed with other student subgroups. The percentage is shown in the bar, with the numerator and denominator above each bar ("x out of x students").
- 5. To view the same data for any district or school in the state, use the search bar on the main site page, or the "Search/Compare" button on subsequent pages, to select any specific district or school.
- 6. Repeat Steps 3 and 4 to view participation for the selected district or school.

Participation of children with disabilities on the alternate assessment is found on the State's public website at this link: <a href="https://educate.iowa.gov/pk-12/special-education/public-reporting#iowa-alternate-assessment-participation-rates">https://educate.iowa.gov/pk-12/special-education/public-reporting#iowa-alternate-assessment-participation-rates</a>

# 3A - OSEP Response

# 3A - Required Actions

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

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

# 3B - Indicator Data

#### **Historical Data:**

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	А	Grade 4	2018	25.14%
Reading	В	Grade 8	2018	18.15%
Reading	С	Grade HS	2018	17.60%
Math	Α	Grade 4	2018	33.42%
Math	В	Grade 8	2018	23.18%
Math	С	Grade HS	2018	13.23%

## **Targets**

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	28.79%	28.95%	29.11%	29.27%
Reading	B >=	Grade 8	24.82%	25.09%	25.36%	25.63%
Reading	C >=	Grade HS	20.80%	21.00%	21.20%	21.40%
Math	A >=	Grade 4	31.44%	32.12%	32.80%	33.50%
Math	B >=	Grade 8	24.97%	25.44%	25.91%	26.38%
Math	C >=	Grade HS	15.36%	16.36%	17.36%	18.36%

# **Targets: Description of Stakeholder Input**

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

# 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	5,484	4,634	12,131
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	615	268	536
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	949	1,050	1,975

# **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	5,495	4,659	12,229
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	639	254	480
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,377	999	1,632

(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 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

Gr ou p	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	1,564	5,484	29.25%	28.79%	28.52%	Did not meet target	No Slippage
В	Grade 8	1,318	4,634	26.85%	24.82%	28.44%	Met target	No Slippage
С	Grade HS	2,511	12,131	22.08%	20.80%	20.70%	Did not meet target	Slippage

# Provide reasons for slippage for Group C, if applicable

The State attributes slippage to effects of the COVID-19 pandemic, which impacted learners across all student groups. For example, data for all students in group C (grade 11) experienced a decrease in reading proficiency from 70.9 to 69.2 from FY2019 to FY2022. Therefore these data reflect the larger overall trend for lowa's students.

# FFY 2022 SPP/APR Data: Math Assessment

Gr ou p	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	2,016	5,495	32.82%	31.44%	36.69%	Met target	No Slippage
В	Grade 8	1,253	4,659	23.03%	24.97%	26.89%	Met target	No Slippage
С	Grade HS	2,112	12,229	13.64%	15.36%	17.27%	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.

The State publicly reports on the proficiency of children with disabilities on statewide assessments in two places. Participation of children with disabilities on the regular assessment is found by following these instructions:

- 1. Go to www.iaschoolperformance.gov.
- 2. To view the data at the state level, select the most recent year from the dropdown menu and click on "View State Report".
- 3. From the menu bar, click on "Learning Measures" and select "Proficiency" from the options below.
- 4. The following screen gives details on the proficiency of students in English Language Arts and Math. Students with Disabilities (IEP) is listed with other student subgroups. The percentage is shown in the bar, with the numerator and denominator above each bar ("x out of x students").
- 5. To view the same data for any district or school in the state, use the search bar on the main site page, or the "Search/Compare" button on subsequent pages, to select any specific district or school.
- 6. Repeat Steps 3 and 4 to view proficiency for the selected district or school.

Proficiency of students with disabilities on the alternate assessment is found by following these steps:

- 1. Go to www.iaschoolperformance.gov.
- 2. To view the data at the state level, select the most recent year from the dropdown menu and click on "View State Report".
- 3. From the menu bar, click on "Additional Metrics" and select "Alternate Assessment Results" from the options below.
- 4. The following screen gives details on the proficiency of students on the alternate assessment in English Language Arts and Math. Students with Disabilities (IEP) is listed with other student subgroups. The percentage is shown in the bar, with the numerator and denominator above each bar ("x out of x students").
- 5. To view the same data for any district or school in the state, use the search bar on the main site page, or the "Search/Compare" button on subsequent pages, to select any specific district or school.
- 6. Repeat Steps 3 and 4 to view proficiency on the alternate assessment for the selected district or school.

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

# 3B - Prior FFY Required Actions

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

# Response to actions required in FFY 2021 SPP/APR

The State publicly reports on the proficiency of children with disabilities on statewide assessments in two places. Participation of children with disabilities on the regular assessment is found by following these instructions:

- 1. Go to www.iaschoolperformance.gov.
- 2. To view the data at the state level, select the most recent year from the dropdown menu and click on "View State Report".
- 3. From the menu bar, click on "Learning Measures" and select "Proficiency" from the options below.
- 4. The following screen gives details on the proficiency of students in English Language Arts and Math. Students with Disabilities (IEP) is listed with other student subgroups. The percentage is shown in the bar, with the numerator and denominator above each bar ("x out of x students").
- 5. To view the same data for any district or school in the state, use the search bar on the main site page, or the "Search/Compare" button on subsequent pages, to select any specific district or school.
- 6. Repeat Steps 3 and 4 to view proficiency for the selected district or school.

Proficiency of students with disabilities on the alternate assessment is found by following these steps:

- Go to <u>www.iaschoolperformance.gov</u>.
- 2. To view the data at the state level, select the most recent year from the dropdown menu and click on "View State Report".
- 3. From the menu bar, click on "Additional Metrics" and select "Alternate Assessment Results" from the options below.
- 4. The following screen gives details on the proficiency of students on the alternate assessment in English Language Arts and Math. Students with Disabilities (IEP) is listed with other student subgroups. The percentage is shown in the bar, with the numerator and denominator above each bar ("x out of x students").
- 5. To view the same data for any district or school in the state, use the search bar on the main site page, or the "Search/Compare" button on subsequent pages, to select any specific district or school.
- 6. Repeat Steps 3 and 4 to view proficiency on the alternate assessment for the selected district or school.

# 3B - OSEP Response

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

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

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

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

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

of testing.

# 3C - Indicator Data

# **Historical Data:**

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	А	Grade 4	2020	44.04%
Reading	В	Grade 8	2020	19.01%
Reading	С	Grade HS	2020	12.04%
Math	А	Grade 4	2020	16.13%
Math	В	Grade 8	2020	9.30%
Math	С	Grade HS	2020	11.02%

# Targets

Subject	Group	Group Name	2022	2023	2024	2025
Readin g	A >=	Grade 4	45.24%	45.84%	46.44%	47.04%
Readin g	B >=	Grade 8	20.21%	20.81%	21.41%	22.01%
Readin g	C >=	Grade HS	15.59%	16.19%	16.79%	17.39%
Math	A >=	Grade 4	17.33%	17.93%	18.53%	19.13%

Math	B >=	Grade 8	10.50%	11.10%	11.70%	12.30%
Math	C >=	Grade HS	12.22%	12.82%	13.42%	14.02%

#### Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

# 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

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	281	271	908
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	146	68	128

# 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	279	264	895
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	58	42	162

#### 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
Α	Grade 4	146	281	51.20%	45.24%	51.96%	Met target	No Slippage
В	Grade 8	68	271	34.30%	20.21%	25.09%	Met target	No Slippage
С	Grade HS	128	908	15.50%	15.59%	14.10%	Did not meet target	Slippage

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

The State attributes slippage to effects of the COVID-19 pandemic, which impacted learners across all student groups. For example, data for all students in group C (grade 11) experienced a decrease in reading proficiency from 70.9 to 69.2 from FY2019 to FY2022. Therefore these data reflect the larger overall trend for lowa's students.

# 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
Α	Grade 4	58	279	21.31%	17.33%	20.79%	Met target	No Slippage
В	Grade 8	42	264	21.78%	10.50%	15.91%	Met target	No Slippage
С	Grade HS	162	895	18.47%	12.22%	18.10%	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.

Assessment results are publicly reported for the state and for all LEAs on the Iowa School Performance Profiles, as an Additional Measure under "Alternate Assessment Results":https://www.iaschoolperformance.gov/ECP/StateDistrictSchool/StateDetails?DetailType=DLM&k=0&y=2022

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 EDFacts file specifications FS175 and 178.

#### Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 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	А	Grade 4	2020	44.55
Reading	В	Grade 8	2020	48.79
Reading	С	Grade HS	2020	51.26
Math	А	Grade 4	2020	36.39
Math	В	Grade 8	2020	43.48
Math	С	Grade HS	2020	48.18

#### **Targets**

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A <=	Grade 4	43.83	43.67	43.51	43.35
Reading	B <=	Grade 8	48.04	47.77	47.50	47.23
Reading	C <=	Grade HS	50.86	50.66	50.46	50.26
Math	A <=	Grade 4	34.84	34.16	33.48	32.80
Math	B <=	Grade 8	42.65	42.18	41.71	41.24
Math	C <=	Grade HS	48.54	47.54	46.54	45.54

#### Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

# 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. All Students who received a valid score and a proficiency was assigned for the regular assessment	35,253	36,889	112,288
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	5,484	4,634	12,131
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	24,412	26,588	75,864
d. All students in regular assessment with accommodations scored at or above proficient against grade level	949	1,050	1,975
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	615	268	536
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	949	1,050	1,975

# **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. All Students who received a valid score and a proficiency was assigned for the regular assessment	35,264	36,945	112,633
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	5,495	4,659	12,229
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	24,061	25,263	70,344
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,377	999	1,632
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	639	254	480
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,377	999	1,632

<sup>(1)</sup> 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 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
Α	Grade 4	28.52%	71.94%	43.56	43.83	43.42	Met target	No Slippage
В	Grade 8	28.44%	74.92%	47.60	48.04	46.48	Met target	No Slippage
С	Grade HS	20.70%	69.32%	48.52	50.86	48.62	Met target	No Slippage

# 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	36.69%	72.14%	35.90	34.84	35.45	Did not meet target	No Slippage
В	Grade 8	26.89%	71.08%	42.63	42.65	44.19	Did not meet target	Slippage
С	Grade HS	17.27%	63.90%	45.66	48.54	46.63	Met target	No Slippage

# Provide reasons for slippage for Group B, if applicable

The State attributes slippage to effects of the COVID-19 pandemic, which impacted learners across all student groups. For example, data for all students across groups A, B and C experienced a decrease in mathematics proficiency. Specifically for group B (grade 8) mathematics proficiency decreased from 71.2 to 65.6 from FY2019 to FY2022. Therefore these data reflect the larger overall trend for lowa's students.

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
2005	1.36%

FFY	2017	2018	2019	2020	2021
Target <=	1.30%	1.30%	1.30%	1.55%	1.32%
Data	1.61%	0.92%	1.54%	1.55%	0.31%

#### **Targets**

FFY	2022	2023	2024	2025
Target <=	1.25%	1.19%	1.13%	1.06%

# Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

# 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.

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Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2	320	0.31%	1.25%	0.63%	Met target	No Slippage

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

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

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

The State's definition of significant discrepancy is a rate ratio that exceeds the threshold of 3.50 for any single year of data. The State uses out-of-school suspensions and expulsions in this calculation. The district's rate of suspensions and expulsions greater than 10 days is compared to the State's rate of suspensions and expulsions greater than 10 days.

The district's rate is calculated by dividing by the number of students with an IEP removed (out-of-school suspensions and expulsions) for greater than 10 days by the total number of students with an IEP in the district. The calculation for the State's rate is the same - the number of students with an IEP removed (out-of-school suspensions and expulsions) for greater than 10 days divided by the total number of students with an IEP in the state. A rate ratio is then calculated to determine significant discrepancy, which is the district's rate divided by the State's rate.

The percent of districts with significant discrepancy is calculated by (1) identifying districts with a rate ratio of greater than or equal to 3.50, (2) dividing the number of districts with this significant discrepancy by the total number of districts in the state that met the minimum n of ten, and (3) multiplying by 100

An out-of-school suspension is defined as an "administrative removal of a student from regular classes or activities for disciplinary reasons." Expulsion is defined as "school board action resulting in the removal of a student from a district for disciplinary reasons."

# Provide additional information about this indicator (optional)

#### 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.

Districts identified as significantly discrepant participate in a district review consisting of the following areas relating to discipline/suspensions and expulsions: (1) A review and examination of district discipline data, (2) A review of policies, procedures and practices, (3) A review of documents (i.e., individual IEPs, student handbook to ensure alignment with board polices, etc.), (4) A review of the district Positive Behavioral Interventions and Supports, and (5) The development of a Corrective Action Plan, if necessary.

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

#### If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

Completed reviews (self-assessment) and the Corrective Action Plan were reviewed by the State and a desk audit was conducted to verify findings. The desk audit consisted of the review of individual IEPs, review of documents (i.e., prior written notice, change in placement and manifestation determinations, functional behavioral assessments, behavior intervention plans, etc.). A final determination of findings was made by the State and a review of the Corrective Action Plan was conducted to ensure policies, procedures, and practices were revised to comply with applicable requirements. Review indicated 100% compliance.

# 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
1	1	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

Completed reviews (self-assessment) and the Corrective Action Plan were reviewed by the State and a desk audit is conducted to verify findings. The desk audit consisted of the review of individual IEPs, review of documents (i.e., prior written notice, change in placement and manifestation determinations, functional behavioral assessments, behavior intervention plans, etc.). A final determination of findings was made by the State and a review of the Corrective Action Plan was conducted to ensure policies, procedures, and practices were revised to comply with applicable requirements. No additional noncompliance was found during the review, thus 100% compliance was found.

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

The State (a) reviewed and revised policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, (b) reviewed and/or revised procedures for giving parents prior written notice for students involved in change of placements consistent with the discipline provisions of IDEA 2005, and (c) reviewed and revised district policies, procedures and practices regarding the discipline provisions of IDEA 2005.

The State also verified that in each program for which noncompliance was identified, the specific regulatory requirements were being correctly implemented by ensuring that the LEA had adopted and been trained in statewide procedures for the development and implementation of IEPs that are aligned with Iowa's Special Education Rules, Iowa Code, and Federal Code. Monitoring of corrective actions was carried out by the State's monitoring consultant. No additional noncompliance was found, thus 100% compliance was found.

# 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 threshold for measuring significant discrepancy in the rate of long-term suspensions and expulsions is reasonably designed.

Further, the State must report, in the FFY 2022 SPP/APR, on the correction of noncompliance that the State identified in FFY 2021 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

# Response to actions required in FFY 2021 SPP/APR

In regards to the methodology designed to determine if significant discrepancies are occurring: Subsequent to the FFY2021 SPP/APR submission, lowa conducted a review of its significant discrepancy methodology with technical assistance support from the IDEA Data Center (IDC) to 1) consider the reasonableness of lowa's methodology, and 2) ensure the calculation meets current requirements. Based on the review with IDC, lowa confirmed its use of a minimum cell size of 10 and a minimum n-size of 10 for both B4-A and B4-B. These are the values that are used for significant disproportionality calculations, which are within the range that OSEP has set forth as reasonable. In addition, the districts identified as having a risk ratio above the state set threshold are consistent with the districts that are receiving the most intensive level of support from the state from its IDEA Differentiated Accountability process. The IDE revised its definition accordingly to ensure greater clarity regarding the methodology and threshold around this indicator.

The State retained the 3.50 threshold rate for a number of reasons. First, 3.50 is the threshold used to identify the districts with significant discrepancies for which IEP reviews had already been completed, using the State Year (SY) 21-22 data.

Second, The State ran an analysis of SY22-23 data using 2.5 as the threshold and 3.5 as the threshold, retaining minimum cell size of 10. Each threshold identified the same districts. The 2.5 threshold did not identify additional districts.

Finally, the State is in Cohort 2 for DMS 2.0 with a September site visit. The State is currently reviewing the newly released DMS 2.0 protocol for significant disproportionality in preparation for OSEP review. OSEP's feedback on lowa's responses to the protocol will be used to review the threshold with stakeholders.

In regards to reporting on the correction of noncompliance: The state verified that noncompliance in FFY2021 was corrected by a thorough desk audit and monitoring procedures that include:

- 1. IEP Review. A review of individual IEPs and related documents (i.e., prior written notice, change in placement and manifestation determinations, functional behavioral assessments, behavior intervention plans, etc.) to verify findings.
- 2. Policy Review. A review of revised policies, procedures and practices across the below to verify areas that must be revised to comply with applicable requirements:
  - IEP development and implementation
  - Procedural safeguards of the LEA
  - Use of positive behavioral interventions and supports
  - Prior written notice to parents for students involved in change of placements, and
  - Discipline provisions of IDEA 2005 of the LEA
- 3. Corrective Action Plan Review. A review of the corrective action plan to verify policies, procedures and practices identified in the policy review were revised to comply with applicable requirements.
- 4. Data Review. A review of data in the new state data system, ACHIEVE, to verify each individual case of noncompliance was corrected.

# 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 results in a threshold for measuring significant discrepancy in the rate of long-term suspension and expulsion rates of children with IEPs that falls above the median of thresholds used by all States.

The State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2021 because it did not report that it verified correction of those findings, consistent with OSEP QA 23-01. Specifically, the State did not report that that it verified that each LEA with noncompliance identified in FFY 2021 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.

#### 4A - Required Actions

The State did not report that noncompliance identified in FFY 2021 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b) was corrected. When reporting on the correction of this noncompliance, the State must demonstrate, in the FFY 2023 SPP/APR, that it has verified that each district 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 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.

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
2009	0.55%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.32%	0.62%	0.31%	0.00%	Not Valid and Reliable

# **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.

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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
0	0	319	Not Valid and Reliable	0%	0.00%	Met target	N/A

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

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

Were all races and ethnicities included in the review?

YES

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

The State's definition of significant discrepancy is a rate ratio that exceeds the threshold of 3.50 for any one or more race/ethnicity categories: Asian, American Indian, Black/African American, Hispanic/Latino, Multiracial, Native Hawaiian or Pacific Islander, and White. The State uses out-of-school suspensions and expulsions in making this calculation. Iowa's rate ratio is set at 3.50, which is used for each race/ethnicity category - Asian, Black/African American, American Indian, Hispanic, Multiracial, Pacific Islander or Native Hawaiian, White - for any single year of data.

The district's rate is calculated by dividing by the number of students with an IEP of a race/ethnicity removed for greater than 10 days by the total number of students with an IEP of that race/ethnicity in the district. This is done for each race/ethnicity category at the district level. The State's rate is calculated by dividing the number of students with an IEP removed for greater than 10 days by the total number of students with an IEP in the state (the same rate used in Indicator 4A calculation).

Provide additional information about this indicator (optional)

# 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.

Districts identified as significantly discrepant participate in a district review consisting of the following areas relating to discipline/suspensions and expulsions: (1) A review and examination of district discipline data, (2) A review of policies, procedures and practices, (3) A review of documents (i.e., individual IEPs, student handbook to ensure alignment with board policies, etc.), (4) A review of the district Positive Behavioral Interventions and Supports, and (5) The development of a Corrective Action Plan, if necessary.

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

## If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

Completed reviews (self-assessment) and the Corrective Action Plan are reviewed by the State and a desk audit is conducted to verify findings. The desk audit consists of the review of individual IEPs, review of documents (i.e., prior written notice, change in placement and manifestation determinations, functional behavioral assessments, behavior intervention plans, etc.). A final determination of findings is made by the State and a review of the Corrective Action Plan is conducted to ensure policies, procedures, and practices were revised to comply with applicable requirements.

## 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

The State did not provide valid and reliable data for FFY 2021. The State must provide valid and reliable data for FFY 2022 in the FFY 2022 SPP/APR using a methodology that does not result in different thresholds for different racial and ethnic groups.

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

# Response to actions required in FFY 2021 SPP/APR

In regards to the reasonableness of lowa's methodology to determine significant discrepancies by race or ethnicity, as well as the State's threshold for measuring significant discrepancy:

Subsequent to the FFY2021 SPP/APR submission, lowa conducted a review of its significant discrepancy methodology with technical assistance support from the IDEA Data Center (IDC) to (1) consider the reasonableness of lowa's methodology, and (2) ensure the calculation meets current requirements. Based on the review with IDC, lowa corrected the comparison group for B4-B, so that each district race/ethnic group is compared to the state rate for all students. Iowa also confirmed its use of a minimum cell size of 10 and a minimum n-size of 10 for both B4-A and B4-B. These are the values that are used for significant disproportionality calculations, which are within the range that OSEP has set forth as reasonable. In addition, the districts identified as having a risk ratio above the state set threshold are consistent with the districts that are receiving the most intensive level of support from the state from its IDEA Differentiated Accountability process. The IDE revised its definition accordingly to ensure greater clarity regarding the methodology and threshold around this indicator.

# 4B - 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, by race or ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. 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 results in a threshold for measuring significant discrepancy in the rate of long-term suspension and expulsion rates of children with IEPs that falls above the median of thresholds used by all States.

# **4B- Required Actions**

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

# **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

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

#### Measurement

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

# Instructions

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

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.

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

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

# 5 - Indicator Data

# **Historical Data**

Part	Baseline	FFY	2017	2018	2019	2020	2021
Α	2020	Target >=	65.00%	65.00%	65.00%	72.30%	73.10%
Α	73.51%	Data	69.44%	70.61%	71.71%	73.51%	74.73%
В	2020	Target <=	7.50%	7.00%	7.00%	7.00%	6.50%
В	6.72%	Data	8.14%	7.78%	7.22%	6.72%	6.47%
С	2020	Target <=	2.60%	2.50%	2.50%	1.70%	1.60%
С	1.19%	Data	1.52%	1.37%	1.23%	1.19%	1.03%

# **Targets**

FFY	2022	2023	2024	2025
Targe t A >=	75.84%	76.95%	79.69%	80.81%
Targe t B <=	6.50%	6.00%	6.00%	6.00%
Targe t C <=	1.50%	1.40%	1.30%	1.15%

Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center

around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

### **Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	66,965
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	49,857
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	4,794
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	479
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	78
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	15

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

NO

# 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	49,857	66,965	74.73%	75.84%	74.45%	Did not meet target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	4,794	66,965	6.47%	6.50%	7.16%	Did not meet target	Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	572	66,965	1.03%	1.50%	0.85%	Met target	No Slippage

Part	Reasons for slippage, if applicable
В	The State attributes slippage to the ongoing effects of the COVID-19 pandemic as more restrictive environments to address increased social emotional needs have been reported.

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 EDFacts file specification FS089.

### Measurement

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

#### Instructions

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

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

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

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

For Indicator 6C: States may express their targets in a range (e.g., 75-85%).

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

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

# 6 - Indicator Data

#### Not Applicable

Select yes if this indicator is not applicable.

NO

# Historical Data (Inclusive) - 6A, 6B, 6C

Part	FFY	2017	2018	2019	2020	2021
Α	Target >=	44.00%	45.00%	45.00%	47.49%	50.01%
Α	Data	32.61%	32.36%	33.23%	47.49%	47.79%
В	Target <=	5.00%	4.00%	4.00%	4.41%	4.12%
В	Data	5.68%	5.32%	3.64%	4.41%	4.08%
С	Target <=				1.68%	2.00%
С	Data				1.68%	1.59%

**Targets: Description of Stakeholder Input** 

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

### **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
Α	2020	47.49%
В	2020	4.41%
С	2020	1.68%

### Inclusive Targets - 6A, 6B

FFY	2022	2023	2024	2025
Target A >=	52.53%	55.05%	57.57%	60.10%
Target B <=	3.84%	3.55%	3.27%	2.98%

# Inclusive Targets - 6C

FFY	2022	2023	2024	2025
Target C <=	2.00%	2.00%	1.75%	1.50%

### **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	1,711	2,330	795	4,836
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	996	1,232	257	2,485
b1. Number of children attending separate special education class	125	100	21	246
b2. Number of children attending separate school	1	1	0	2
b3. Number of children attending residential facility	1	1	0	2
c1. Number of children receiving special education and related services in the home	17	12	2	31

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	2,485	4,836	47.79%	52.53%	51.39%	Did not meet target	No Slippage
B. Separate special education class, separate school or residential facility	250	4,836	4.08%	3.84%	5.17%	Did not meet target	Slippage
C. Home	31	4,836	1.59%	2.00%	0.64%	Met target	No Slippage

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

The State attributes slippage to the ongoing effects of the COVID-19 pandemic as more restrictive environments to address increased social emotional needs have been reported.

Provide additional information about this indicator (optional)

# 6 - Prior FFY Required Actions

None

# 6 - OSEP Response

# 6 - Required Actions

### Indicator 7: Preschool Outcomes

# **Instructions and Measurement**

Monitoring Priority: FAPE in the LRE

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

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

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

#### **Data Source**

State selected data source.

#### Measurement

#### Outcomes:

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

Progress categories for A, B and C:

- 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 (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 <u>General Instructions</u> 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 >=	66.00%	67.00%	67.00%	61.50%	62.50%
A1	66.25%	Data	65.06%	55.92%	59.01%	62.35%	59.00%
A2	2008	Target >=	59.00%	60.00%	60.00%	50.00%	51.00%
A2	53.54%	Data	57.60%	54.33%	50.95%	55.83%	52.09%
B1	2008	Target >=	74.00%	75.00%	75.00%	68.00%	69.00%
B1	73.97%	Data	70.83%	65.00%	63.56%	68.78%	66.17%
B2	2008	Target >=	34.50%	36.00%	36.00%	33.00%	33.50%
B2	34.92%	Data	37.21%	33.17%	25.74%	33.77%	33.59%
C1	2008	Target >=	64.00%	65.00%	65.00%	60.00%	60.50%
C1	56.67%	Data	59.27%	58.22%	56.49%	60.81%	57.38%
C2	2008	Target >=	66.00%	67.00%	67.00%	60.00%	60.50%
C2	54.98%	Data	63.24%	61.29%	59.74%	60.77%	58.17%

# **Targets**

FFY	2022	2023	2024	2025
Target A1 >=	63.50%	64.50%	65.50%	66.50%
Target A2 >=	52.00%	53.00%	54.00%	55.00%
Target B1 >=	70.00%	71.50%	73.00%	74.00%
Target B2 >=	34.00%	34.50%	35.00%	35.50%
Target C1 >=	61.00%	61.50%	62.00%	62.50%
Target C2 >=	61.00%	61.50%	62.00%	62.50%

# Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

# FFY 2022 SPP/APR Data

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

354

# 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	6	1.69%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	95	26.84%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	35	9.89%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	100	28.25%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	118	33.33%

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. Calculation:(c+d)/(a+b+c+d)	135	236	59.00%	63.50%	57.20%	Did not meet target	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. Calculation: (d+e)/(a+b+c+d+e)	218	354	52.09%	52.00%	61.58%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	6	1.69%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	100	28.25%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	56	15.82%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	171	48.31%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	21	5.93%

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. Calculation: (c+d)/(a+b+c+d)	227	333	66.17%	70.00%	68.17%	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. Calculation: (d+e)/(a+b+c+d+e)	192	354	33.59%	34.00%	54.24%	Met target	No Slippage

# Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	6	1.69%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	90	25.42%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	19	5.37%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	89	25.14%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	150	42.37%

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.  Calculation:(c+d)/(a+b+c+d)	108	204	57.38%	61.00%	52.94%	Did not meet target	Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  Calculation: (d+e)/(a+b+c+d+e)	239	354	58.17%	61.00%	67.51%	Met target	No Slippage

Part	Reasons for slippage, if applicable
A1	The State attributes slippage to the intricacies related to the transition to a new data system, and the need for ongoing training in ACHIEVE. For this reporting period, providers entered data into two data systems, each having unique fields and methods for documentation.
C1	The State attributes slippage to the intricacies related to the transition to a new data system, and the need for ongoing training in ACHIEVE. For this reporting period, providers entered data into two data systems, each having unique fields and methods for documentation.

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.

Early Childhood Outcomes (ECO) is a systematic process to determine children's functioning compared to same-aged peers and to determine progress in skills and behaviors in the three ECO areas (A, B, C). The ECO entry data for the Comparison to Peers are collected as part of the development of the Initial IEP and the final ECO data for Comparison to Peers and Progress data are collected when the child exits or no longer receives early childhood special education services. Iowa began collecting the ECO data through its IEP/IFSP database, ACHIEVE, at the end of the 2021-2022 school year. The launch date of the new system resulted in the majority of IEPs of preschool age students being in ACHIEVE during the reporting period, however, the initial ECO data remained in the IMS data system for preschool age students who began special education services before the launch of ACHIEVE. Because of the new ECO procedures in ACHIEVE and collecting data across two different systems, there were far fewer matching entry and final ECO scores available in the system than originally anticipated by the end of the reporting period. This is the reason for the dramatic drop in the number of students reported from the previous year-data will be at normal levels for the next reporting year.

A child's Comparison to Peers rating of his or her skills and behaviors are determined based on a triangulation of multiple sources of data gathered using methods such as Record review, Interview, Observation, and Test/Assessment (RIOT). The Present Levels of Academic Achievement and Functional Performance (PLAAFP) is used to summarize the child's skills and behaviors in comparison to the functioning expected for the chronological age of the child as well as the child's progress prior to exiting early childhood special education services in each of the three ECO areas. The ECO decision tree is used to summarize each child's level of functioning in each of the three ECO areas in relation to same-aged peers and includes a seven-level outcome rating scale aligned to the Child Outcomes Summary (COS) Process. Additionally, the IEP Team determines if a child has progressed or acquired new skills or behaviors in each of the three ECO areas and documents the child's progress by responding to a "yes/no" question when the child exits or no longer receives early childhood special education services

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 <u>General Instructions</u> 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

· 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

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators,

State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

### **Historical Data**

Group	Baseline	FFY	2017	2018	2019	2020	2021
Preschool	2016	Target >=	85.00%	85.00%	91.00%	88.64%	89.80%
Preschool	87.71%	Data	89.07%	90.95%		88.64%	91.40%
School age	2016	Target >=	75.00%	75.00%	86.00%	85.68%	87.54%
School age	84.92%	Data	85.49%	85.65%		85.68%	81.78%

# **Targets**

FFY	2022	2023	2024	2025
Target A	90.96%	92.12%	93.38%	94.44%
Target B >=	89.40%	91.26%	93.12%	95.00%

# 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	830	911	91.40%	90.96%	91.11%	Met target	No Slippage
School age	5,633	6,244	81.78%	89.40%	90.21%	Met target	No Slippage

The number of parents to whom the surveys were distributed.

50,218

Percentage of respondent parents

14.25%

# **Response Rate**

FFY	2021	2022
Response Rate	4.78%	14.25%

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

The State compared the demographics of the children for whom the parents responded to the demographics of the state's population of children in special education. If the percent of the survey responses are within +/- 3 percentage points of the population, it is considered representative. Differences that are greater are considered over- or underrepresented, respectively.

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.

Survey data were analyzed across age and race/ethnicity to determine the extent to which parents responding to the survey are representative of the demographics of children receiving special education services in lowa. The response rate itself increased substantially from 4.78% to 14.23% from FY21 to FY22, with corresponding increases across every single student group. Significant response increases were seen as noted below:

African American: 103 to 573 Hispanic or Latino: 158 to 692

Aged three: 24 to 159 Aged four: 66 to 318

In further analysis, the state determined the surveys completed were representative of the population of students receiving special education by race/ethnicity (all were within +/-3 percentage points). For parents who responded on behalf of children ages 3-5, parents of children aged 3 were underrepresented at -4.95 and parents of children aged 4 are overrepresented at 4.40\*\*

Based on the analysis described above, the state recognizes the need to improve representativeness of parents responding on behalf of children in the following areas: Parents of students who are age 3 (under representation) and 4 (over representation).

\*\*This represents a substantial change in last year's data for parents of children ages 3 and 4, as these data indicated significant underrepresentation at -12.23 and -8.21, respectively.

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

lowa's new IEP/IFSP data system allows for the tracking of responses by the demographics of the child. Additional reminders and follow up notifications are then sent to those parents to complete and submit surveys. This strategy was effective across all student groups with the exception of parents of children age 3. The IDE will target additional reminders to parents of children age 3 to continue to increase the response rate for this demographic.

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

lowa's new IEP/IFSP data system allows for the tracking of responses by the demographics of the child. Within this system, surveys are sent directly to parents via email. The Part B Data Manager is then able to track participation according to the gender, age, and race/ethnicity of the students for which the parents are responding in real time. If, during the survey window, the participation of historically underrepresented groups is lower than the current state population for those groups (such as parents of children who are age 3), then the Data Manager can send targeted reminder emails to those groups to try to increase the number who are responding.

The State took significant steps (listed above) to increase response rates from previous years of data collection. These steps effectively resulted in an increased response rate from 4.78% in FFY 2020 to 14.25% in FFY 2022,

The State will continue to use the advanced features of ACHIEVE to improve response rates and representativeness. These features include the ability to monitor responses and to send "nudges" to underrepresented categories. The State will also elicit feedback from the Special Education Advisory Panel (SEAP) and other stakeholders for suggestions on ways to further increase responses.

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 survey that is used to collect Indicator B8 data (a parent school climate and culture survey instrument) is available for all parents of students in preschool through grade 12, including those with IEPs and those without IEPs. In Spring 2023, the survey was sent directly to all parents in the IEP/IFSP Parent Portal. The response rate increased from 4.78% in FFY 2020 to 14.25% in FFY 2022. An increase in response rate decreases the possibility that nonresponse bias is present. In addition, the state evaluated whether the responses received by race/ethnicity and by geographic region were representative of the population of students receiving special education as a whole. In its analysis, the state determined that nonresponse bias was not present by geographic location; meaning, parents in one geographic region were no less likely to have responded to the survey than parents in another geographic location. Although the surveys completed were representative of the population of students receiving special education by race/ethnicity (all were within +/-3 percentage points), there is an indication of nonresponse bias among parents of students who are Native Hawaiian or Other Pacific Islander, based on the response rate for that particular group. Other race/ethnic groups were less than 2 percentage points difference from the overall participation rate (range of 12.43% to 16.33%), while the response rate of parents of students who are Native Hawaiian or Other Pacific Islander was 6.87 percentage points lower (7.38% vs 14.25%). With that being said, the very small number of students in the population (<150 surveys sent) makes it difficult to determine nonresponse bias with high confidence.

The State took significant steps to decrease nonresponse bias from previous years of data collection. These steps effectively resulted in: Representative response rates of all race/ethnicities except Native Hawaiian or Other Pacific Islander. The very small number of students in this population (<150 surveys sent) makes it difficult to determine nonresponse bias with high confidence.

Decreased underrepresentation of parent responses with children ages 3-5 to -4.95 from -12.23 of underrepresentation in last year's responses.

The State will continue to use the advanced features of ACHIEVE to improve representativeness. These features include the ability to monitor responses and to send "nudges" to underrepresented categories. The State will also elicit feedback from the Special Education Advisory Panel (SEAP) and other stakeholders for suggestions on ways to further increase responses.

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 analyze the response rate to identify potential nonresponse bias and report on steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

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

In regards to the analysis of nonresponse bias, the state analyzed whether the responses received by race/ethnicity and by geographic region were representative of the population of students receiving special education as a whole. In its analysis, the state determined that nonresponse bias was not present by geographic location; meaning, parents in one geographic region were no less likely to have responded to the survey than parents in another geographic location. Although the surveys completed were representative of the population of students receiving special education by race/ethnicity (all were within +/-3 percentage points), there was an indication of nonresponse bias among parents of students who are Native Hawaiian or Other Pacific Islander, based on the response rate for that particular group. Other race/ethnic groups were less than 2 percentage points difference from the overall participation rate (range of 12.43% to 16.33%), while the response rate of parents of students who are Native Hawaiian or Other Pacific Islander was 6.87 percentage points lower (7.38% vs 14.25%). With that being said, the very small number of students in the population (<150 surveys sent) makes it difficult to determine nonresponse bias with high confidence.

In regards to the analysis and results of the analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services, the state administers the indicator B8 survey through the new state data system. The survey is available for all parents of students in preschool through grade 12, including those with IEPs and those without IEPs. In Spring 2023, the survey was sent directly to all parents in the IEP/IFSP Parent Portal. The response rate increased from 4.78% in FFY 2020 to 14.25% in FFY 2022, which decreases the possibility that nonresponse bias is present. Further, the state analysis compared the demographics of the children for whom the parents responded to the demographics of the state's population of children in special education. If the percent of the survey responses are within +/- 3 percentage points of the population, it is considered representative. Differences that are greater are considered over- or underrepresented, respectively. The results indicated significant response rate increases across student groups. In further analysis, the state determined the surveys completed were representative of the population of students receiving special education by race/ethnicity (all were within +/-3 percentage points). For parents who responded on behalf of children ages 3-5, parents of children aged 3 were underrepresented at -4.95 and parents of children aged 4 were overrepresented at 4.40. However it is important to note this represents a substantial change from last year's data for parents of children ages 3 and 4, as these data indicated significant underrepresentation at -12.23 and -8.21, respectively.

In regards to actions (steps) taken to promote response from a broad section of parents of children with disabilities - and to address representation - lowa's new IEP/IFSP data system allows for the tracking of responses by the demographics of the child. Within this system, surveys are sent directly to parents via email. The Part B Data Manager is then able to track participation according to the gender, age, and race/ethnicity of the students for which the parents are responding in real time. If, during the survey window, the participation of historically underrepresented groups is lower than the current state population for those groups (such as parents of children who are age 3), then the Data Manager can send targeted reminder emails to those groups to try to increase the number who are responding.

# 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.

# 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.

9

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	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 0.00%	FFY 2022 Target	FFY 2022 Data	Status Met target	Slippage No Slippage
	Number of districts with						

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 State's definition of disproportionate representation is a risk ratio that exceeds the threshold of 3.50 for any one or more race/ethnicity category for any single year of data. The district's risk for a race/ethnicity category is calculated by dividing by the number of students with an IEP of each race/ethnicity by the total number of students with an IEP of each race/ethnicity in the district. The district's risk for a non-race/ethnicity category is calculated by dividing by the number of students with an IEP of each non-race/ethnicity by the total number of students with an IEP of each non-race/ethnicity in the district. The risk ratio used to determine disproportionate representation is the district's risk for a race/ethnicity divided by the district's risk for each non-race/ethnicity category. A district must have a minimum of 10 students with an IEP in any one or more race/ethnicity categories to be considered in the analysis.

The percent of districts with significant discrepancy is calculated by (1) identifying districts with a risk ratio of greater than or equal to 3.50. (2) dividing the number of districts with disproportionate representation by the total number of districts in the state that met the minimum n of ten, and (3) multiplying by 100.

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.

lowa has developed a Disproportionality Review that is conducted at the district level. The process involves a formal review in which the district examines and evaluates the following areas:

Section 1: Review of Data,

Section 2: Review of Related Issues and Practices,

Section 3: Review of Policies, Procedures and Practices,

Section 4: Technical Assistance/Professional Development, and

Section 5: Results/Findings

The data review consists of the district examining its collection and use of data, (e.g., how data are disaggregated, analyzed, used to make decisions, guide practices, etc.). The review of related issues and practices consists of the examination of key areas that have been identified as impacting the area of disproportionality (e.g., utilization of universal screening; administrator/personnel understanding of special education procedures and requirements regarding referral, evaluation, identification, placement, discipline, LRE; attempts to rule out exclusionary factors during the evaluation process, etc.)

The process also consists of a formal review of policies, procedures and practices regarding the following areas: child find, parent participation, general education interventions, systematic problem-solving process, progress monitoring and data collection, determination of eligibility and evaluations/reevaluations. In addition, the district describes the technical assistance and/or professional development that is being conducted at the district and in districts regarding and/or related to disproportionality (e.g., differentiation of instruction, progress monitoring, cultural competency, understanding racial biases, etc.).

The districts submit the completed review document and findings to the State. A team of consultants meet to review and discuss the results and findings. A final determination of whether or not disproportionality is a result of inappropriate identification is made by the SEA. Districts with noncompliance work in collaboration with the State to develop a corrective action plan. Areas of noncompliance are to be corrected as soon as possible, but no later than one year from identification.

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
1	1	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

A review of policies, procedures, and practices in the district further determined that the disproportionate representation evident in the district was the result of inappropriate practices related to: general education intervention, the systematic problem-solving process, adequacy of general education instruction, and consideration of the lack of prior instruction prior to determination of eligibility (34 CFR §300.304-300.306).

The State required the district to develop and implement a corrective action plan. The corrective action plan includes: (a) establishing a review team (b) identification of deficiencies of policies, practices and procedures (c) documentation of implementation of corrections of noncompliance (d) identification of data utilized in evaluating implementation of corrections of noncompliance (e) documentation of sustainability of corrections of noncompliance (f) report to the State results of implementation of the corrective action plan.

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

The State has monitored the progress of the district and has verified via file review that the district has corrected each individual case of noncompliance. While the State was able to verify correction of all noncompliance for prior reporting period, the State has procedures in place should timely correction not take place in the future. Iowa's Administrative Rules of Special Education provide the State with the latitude to take enforcement actions in cases of noncompliance with the IDEA including, but not limited to, requiring a corrective action plan, withholding payments under Part B, and referring the matter for enforcement to the Department of Justice or state auditor. [IAC 281 ? 41.604]

# 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 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.

YES

Provide an explanation of why it is not applicable below

lowa is a noncategorical state and does not collect disability categories.

# 10 - Prior FFY Required Actions

None

# 10 - OSEP Response

# 10 - Required Actions

OSEP notes that this indicator is not applicable.

# 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	87.31%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.00%	98.48%	89.00%	96.55%	96.74%

# **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
11,099	10,993	96.74%	100%	99.04%	Did not meet target	No Slippage

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

106

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.

Range of days beyond the 60-day timeline when meeting was held: 61-100

Reasons for delays:

- Natural disaster: 20
- Public Health Emergency COVID-19: 86

#### 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.

Reported data were generated from Iowa's Information Management System (IMS), and ACHIEVE, the IEP/IFSP data system replacing IMS. The data reflect all children and youth in Iowa who were evaluated for determination of eligibility for an IEP, during the current reporting period. The data were entered into the database by trained personnel, using the federal definition for 60-day timeline for evaluation (initial evaluations). The data taken from the system are based on the actual (not an average) number of days. Iowa uses the date of receipt of consent by the public agency, as the date for starting the 60-day calendar for completion of the evaluation. The State uses the date of evaluation as the date for stopping the calendar for calculating the timeline. At all pertinent times, Iowa's definition of 60-day timeline is identical to the federal definition contained in the 2005 IDEA amendments and the 2007 IDEA regulations.

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
ſ	453	453	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

The State used data from Iowa's Information Management System (IMS), and ACHIEVE, the IEP/IFSP data system replacing IMS. Note that ACHIEVE is designed to provide data in real-time, which allows the State to easily track special education evaluation and placement data at any given moment in time. Data were used to determine the extent to which 60-day timelines were met statewide, and which AEAs met/did not meet the regulatory requirement of 100% compliance of evaluations completed within a 60-day timeline. The state reviewed additional data from Iowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

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

The State verified the correction of noncompliance identified through a data review. Data review verification of the correction of noncompliance includes confirmation that (a) every child for whom consent to evaluate was received subsequently received an evaluation, even if late, unless the child was no longer in the jurisdiction of the AEA, and (b) each AEA that was performing below 100 percent compliance during the prior reporting period is correctly implementing IDEA requirements. The state reviewed additional data from Iowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

#### 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
FFY 2020	399	399	0

#### **FFY 2020**

#### Findings of Noncompliance Verified as Corrected

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

The State used data from Iowa's Information Management System (IMS), and ACHIEVE, the IEP/IFSP data system replacing IMS. Note that ACHIEVE is designed to provide data in real-time, which allows the State to easily track special education evaluation and placement data at any given moment in time. Data are used to determine the extent to which 60-day timelines are being met statewide, and which AEAs met/did not meet the regulatory requirement of 100% compliance of evaluations completed within a 60-day timeline. These data are included in data reviews conducted during AEA monitoring. The state reviewed additional data from Iowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

For the data collected during the reporting period FFY2020, the state verified that all 399 instances of noncompliance were corrected using the state's data system.

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

The State verified the correction of noncompliance identified through a data review. Data review verification of the correction of noncompliance includes confirmation that (a) every child for whom consent to evaluate was received subsequently received an evaluation, even if late, unless the child was no longer in the jurisdiction of the AEA, and (b) each AEA that was performing below 100 percent compliance during the prior reporting period is correctly implementing IDEA requirements. The state reviewed additional data from Iowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

# 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. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 399 uncorrected findings of noncompliance identified in FFY 2020 were corrected.

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

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

# Response to actions required in FFY 2021 SPP/APR

In regards to FFY 2020 (399), FFY 2021 (453) and FFY 2022 (106) noncompliance for indicator B11, the State used data from lowa's Information Management System (IMS), and ACHIEVE, the IEP/IFSP data system replacing IMS. Note that ACHIEVE is designed to provide data in real-time, which allows the State to easily track special education evaluation and placement data at any given moment in time. Each federal fiscal year, the State verifies the correction of noncompliance and that each LEA is correctly implementing regulatory requirements and corrected individual cases of noncompliance:

Regulatory Requirements. Data from IMS/ACHIEVE are used to determine the extent to which 60-day timelines are being met statewide, and which AEAs met/did not meet the regulatory requirement of 100% compliance of evaluations completed within a 60-day timeline. These data are included in data reviews conducted during AEA monitoring.

Individual Cases. Data review verification of the correction of noncompliance includes confirmation that (a) every child for whom consent to evaluate was received subsequently received an evaluation, even if late, unless the child was no longer in the jurisdiction of the AEA, and (b) each AEA that was performing below 100 percent compliance during the prior reporting period is correctly implementing IDEA requirements.

For data collected during the reporting period FFY 2020, 2021 and 2022, the state verified that all instances of noncompliance were corrected using the state's data system, as well as ensuring that the AEAs which had instances of noncompliance were correctly implementing IDEA requirements.

# 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

- # 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	99.83%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.48%	99.54%	88.84%	94.43%	98.38%

#### **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.	1,321
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.	1,193
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.	26
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	6
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.	1,193	1,274	98.38%	100%	93.64%	Did not meet target	Slippage

# Provide reasons for slippage, if applicable

The State attributes slippage to the intricacies related to the transition to a new data system, and the need for ongoing training in ACHIEVE. For this reporting period, providers entered data into two data systems, each having unique fields and methods for documentation.

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

81

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.

Range of days beyond third birthday when eligibility was determined and IEP developed: 1-69

Reason for Delay:

- ACHIEVE system issues (known bug that did not require a delay reason, was fixed after discovery): 74
- No Valid Reason: 7

# 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 reported were generated from Iowa's Information Management System and ACHIEVE, the IEP/IFSP database system replacing IMS. Note that ACHIEVE is designed to provide data in real-time, which allows the State to easily track B12 data at any given moment in time. The data reflect all children in Iowa who were referred by Part C prior to age three for determination of eligibility for special education services, during the current reporting period. The data were entered into the database by trained personnel.

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

At the time that lowa pulls the data for indicator B12, which is at the end of the reporting period, we are looking at data that has been continuously updated and has already had corrections made, if necessary. We can see that if eligibility was determined and an IEP was implemented after the third

birthday of a child, the correction of having the IEP in place has already been done. This is in part because the AEAs are reviewing the data frequently, as part of their responsibilities in shared general supervision with the State. The IEP data system also has checks in place that prevent IEPs that may be noncompliant from being created, and uses a timeline system so that staff can see the dates by which eligibility determinations and IEPs must be in place.

# 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
20	20	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

The State used data from lowa's Information Management System (IMS), and ACHIEVE, the IEP/IFSP data system replacing IMS. Note that ACHIEVE is designed to provide data in real-time, which allows the State to easily track B12 data at any given moment in time. These data were used to determine the extent to which early childhood transition requirements were being met in the state, and to determine which AEAs met/did not meet regulatory requirements of developing and implementing an IEP by the child's third birthday. During the prior reporting period, the State determined that noncompliance was occurring rarely and in isolated cases without any trend. As a result of the root cause analyses, the IDEcontinued to promote the use of verification reports in the state's database that alert AEAs to transition requirements. The state reviewed additional data from lowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

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

The State verified the correction of noncompliance identified during the prior reporting period through a data review that confirmed (a) every child served in Part C and referred to Part B subsequently received an evaluation and – if eligible – a fully developed IEP, even if late, unless the child was no longer in the jurisdiction of the LEA, and (b) each AEA that was performing below 100 percent compliance during the prior reporting period was correctly implementing IDEA requirements. The state reviewed additional data from Iowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

#### 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
FFY 2020	60	60	0

### **FFY 2020**

# Findings of Noncompliance Verified as Corrected

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

The State used data from Iowa's Information Management System (IMS), and ACHIEVE, the IEP/IFSP data system replacing IMS. Note that ACHIEVE is designed to provide data in real-time, which allows the State to easily track B12 data at any given moment in time. Data are then used to determine the extent to which early childhood transition requirements were being met statewide, and which AEAs met/did not meet the regulatory requirement of 100% compliance with developing and implementing an IEP by a child's third birthday. These data were also included in data reviews conducted during AEA monitoring. The state reviewed additional data from Iowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

For the data collected during the reporting period FFY2020, the state verified that all 60 instances of noncompliance were corrected using the state's data system.

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

Data review verification of the correction of noncompliance includes confirmation that (a) confirmed that every child served in Part C and referred to Part B subsequently received an evaluation and – if eligible – a fully developed IEP, even if late, unless the child was no longer in the jurisdiction of the LEA, and (b) confirmed that each AEA that was performing below 100 percent compliance during the prior reporting period was correctly implementing IDEA requirements.

For the data collected during the reporting period FFY2020, the state verified that all individual instances of noncompliance were corrected using the state's data system. The state reviewed additional data from Iowa's Information Management System (IMS) and ACHIEVE, the IEP/IFSP data system, for each LEA and verified 100% correction of non-compliance.

# 12 - 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. In addition, the State must demonstrate, in the FFY 2022 SPP/APR, that the remaining 60 uncorrected findings of noncompliance identified in FFY 2020 were corrected.

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

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

# Response to actions required in FFY 2021 SPP/APR

In regards to FFY 2020 (60), FFY 2021 (20) and FFY 2022 (81) noncompliance instances for indicator B12: The State used data from Iowa's Information Management System (IMS), and ACHIEVE, the IEP/IFSP data system replacing IMS. Note that ACHIEVE is designed to provide data in real-time, which allows the State to easily track B12 data at any given moment in time. Each federal fiscal year, the State verifies the correction of noncompliance and that each LEA is correctly implementing regulatory requirements and corrected individual cases of noncompliance:

Regulatory Requirements. Data from IMS/ACHIEVE are used to determine the extent to which early childhood transition requirements were being met statewide, and which AEAs met/did not meet the regulatory requirement of 100% compliance with developing and implementing an IEP by a child's third birthday. These data were also included in data reviews conducted during AEA on-site monitoring.

Individual Cases. Data review verification of the correction of noncompliance includes confirmation that (a) confirmed that every child served in Part C and referred to Part B subsequently received an evaluation and – if eligible – a fully developed IEP, even if late, unless the child was no longer in the jurisdiction of the LEA, and (b) confirmed that each AEA that was performing below 100 percent compliance during the prior reporting period was correctly implementing IDEA requirements.

For data collected during the reporting period FFY 2020, 2021 and 2022, the state verified that all instances of noncompliance were corrected using the state's data system, as well as ensuring that the AEAs which had instances of noncompliance were correctly implementing IDEA requirements.

# 12 - OSEP Response

# 12 - 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 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	
2016	61.69%	

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	63.86%	65.88%	68.61%	68.54%	100.00%

#### **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
11,440	11,440	100.00%	100%	100.00%	Met target	No Slippage

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

State database that includes data for the entire reporting year

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

lowa collects B13 data through the new statewide data system, ACHIEVE. The ACHIEVE data system requires that the components of indicator B13 are present in the draft IEP before the IEP team may finalize the IEP. The ACHIEVE system then provides a report of the percentage of IEPs that included each of the criteria that lowa uses to measure data for indicator B13.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	YES
If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age?	YES
If yes, at what age are youth included in the data for this indicator	14

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

# 13 - Prior FFY Required Actions

None

# 13 - OSEP Response

# 13 - Required Actions

#### 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 <u>General Instructions</u> 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);
- 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
А	2018	Target >=	48.00%	50.00%	50.00%	20.24%	22.86%
Α	20.17%	Data	18.45%	20.17%	17.62%	16.36%	16.12%
В	2018	Target >=	70.00%	72.00%	72.00%	46.57%	50.26%
В	57.02%	Data	55.17%	57.02%	42.88%	43.90%	42.87%
С	2018	Target >=	93.00%	94.00%	94.00%	67.48%	71.39%
С	66.59%	Data	65.82%	66.59%	63.57%	62.52%	58.37%

# FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A >=	25.48%	28.10%	30.72%	33.34%
Target B >=	53.95%	57.64%	61.33%	65.00%
Target C >=	75.30%	79.21%	83.12%	87.03%

Targets: Description of Stakeholder Input

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

# FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	4,355
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	4,355
Response Rate	100.00%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	657
2. Number of respondent youth who competitively employed within one year of leaving high school	1,468
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)	44
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).	924

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)	657	4,355	16.12%	25.48%	15.09%	Did not meet target	Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	2,125	4,355	42.87%	53.95%	48.79%	Did not meet target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	3,093	4,355	58.37%	75.30%	71.02%	Did not meet target	No Slippage

Part	Reasons for slippage, if applicable
A	Overall trends in general higher education enrollment have been decreasing across the state since the onset of COVID-19. For example, enrollment in higher education decreased from 62.7 in FY19 (pre-COVID) to 58.2 in FY22. Therefore the data for this indicator directly reflects the overall higher education enrollment trends.

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

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

#### Response Rate

FFY	2021	2022
Response Rate	100.00%	100.00%

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

lowa uses specific data sets to determine the answer for B14. Specifically, the State uses administrative data compiled from Iowa Workforce Development (IWD) and National Student Clearinghouse (NSC) to match to a base file of all students who exited school while on an IEP during the 2021-2022 school year. Rather than a response rate, the State analyzes the data for a match rate to determine what percentage of students that exited school were found in the IWD and/or the NSC data files. For B14, the response rate is 4355/4355=100%. Therefore no analysis for representativeness was necessary.

\*Note that when the match rate is lower than 70%, the IDE will analyze the data to determine which groups are underrepresented in the outcome data files.

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.

Given that lowa uses specific data sets to determine the answer for B14 with the response rate at 4355/4355=100%, no analysis for representativeness was necessary.

The State's Special Education Advisory Panel (SEAP) selected and approved an additional demographic category of geographic location (e.g., urban, suburban, rural) which is used in the ongoing evaluation of outcome data internally and with stakeholders, including SEAP, IVRS, AEAs and LEA staff.

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.

The State used administrative data compiled from Iowa Workforce Development (IWD) and National Student Clearinghouse (NSC) to match to a base file of all students who exited school while on an IEP during the 2021-2022 school year. Rather than a response rate, the State analyzed the data for a match rate to determine what percentage of students that exited school were found in the IWD and/or the NSC data files.

\*Note that when the match rate is lower than 70%, the IDE will analyze the data to determine which groups are underrepresented in the outcome data files

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.

Given that lowa uses specific data sets to determine the answer for B14 with the response rate at 4355/4355=100%, no analysis for representativeness was necessary.

Sampling Question	Yes / No
Was sampling used?	NO
Survey Question	Yes / No
Was a survey used?	NO

# 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 EDFacts Metadata and Process System (EMAPS)).

#### Measurement

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

#### Instructions

Sampling is not allowed.

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

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

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

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

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

#### 15 - Indicator Data

Select yes to use target ranges

Target Range 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	0
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	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

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

#### **Historical Data**

Baseline Year	Baseline Data
2005	100.00%

FFY	2017	2018	2019	2020	2021
Target >=					
Data	66.67%	100.00%	60.00%	0.00%	87.50%

# **Targets**

FFY	2022	2023	2024	2025
Target >=				

# 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
0	0	87.50%			N/A	N/A

Provide additional information about this indicator (optional)

# 15 - Prior FFY Required Actions

None

# 15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2022. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

# 15 - Required Actions

#### **Indicator 16: Mediation**

#### **Instructions and Measurement**

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

#### **Data Source**

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

#### Measurement

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

#### Instructions

Sampling is not allowed.

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

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of 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	11/15/2023 2.1 Mediations held	
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

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, lowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

#### **Historical Data**

Baseline Year	Baseline Data	
2005	74.00%	

FFY	2017	2018	2019	2020	2021
Target >=	75.00%	75.00%	75.00%	75.00%	
Data	100.00%	87.50%	88.89%	66.67%	40.00%

# **Targets**

FFY	2022	2023	2024	2025
Target >=				

#### 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	0	40.00%			N/A	N/A

Provide additional information about this indicator (optional)

# 16 - Prior FFY Required Actions

None

# 16 - OSEP Response

The State reported fewer than ten mediations held in FFY 2022. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

# 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

<u>Baseline Data</u>: 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.

<u>Targets:</u> 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.

<u>Updated Data:</u> 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, is 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, is 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)?

Decrease the percentage of students with IEPs in grades kindergarten through 3rd grade identified as high risk on a literacy assessment.

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

NC

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

YES

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

The subset population is a set of students that are attending a district that participated in professional learning in the area of specially designed instruction (SDI) literacy between 2015-2022, have implemented SDI literacy strategies for grades kindergarten through 3rd grade, and have at least 3 or more years of experience with SDI literacy. These are the districts that participated in professional learning during lowa's first SSIP. The SIMR, however, has been changed to more accurately identify continued progress and sustainability. Students attending districts that fit these criteria will be tracked over the course of the 2020-2025 SPP/APR period.

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://drive.google.com/file/d/1N-i\_-jPNxRkx7ZRHqpReQQj1At371Drs/view?usp=sharing

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
2020	50.56%

Т

#### argets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be less than or equal to the target	49.00%	48.00%	47.00%	46.00%

#### FFY 2022 SPP/APR Data

Number of IEP students in grades K-3 that are high risk on literacy assessment	Number of IEP students in grades K- 3 assessed using literacy assessments	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
989	2,101	44.97%	49.00%	47.07%	Met target	No Slippage

#### Provide the data source for the FFY 2022 data.

FastBridge literacy screening assessments, early Reading and CMBr English. FastBridge combines Computer Adaptive Tests (CAT) and CurriculumBased Measures (CBM) to screen students, identify skill gaps, and offer proven recommendations for reading instruction and diagnostic reading interventions. It is based on the research of Dr. Ted Christ and colleagues at the University of Minnesota.

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

Literacy assessments are administered in FastBridge. FastBridge reports include indicators of student risk for not reaching learning goals. These are known as benchmarks and include indicators for the following levels:

Low Risk: likely to meet grade-level goals (41st to 85th Percentiles)

Some Risk: unlikely to meet grade-level goals without supplemental instructional support (16th -40th percentiles)

High Risk: very unlikely to meet grade-level goals without intensive instructional support. These risk indicators can be used to identify supports for individual students. (41st to 85th percentiles)

Data are pulled from FastBridge into Iowa's Multi-Tiered System of Support (MTSS) data system. In the MTSS system, students are given risk level categories. For the SiMR, IDE staff analyzed student data from the districts identified in the cohort. The numerator is the number of students matching the criteria (IEP, grades K-3) that were identified as High Risk on either the eReading or CMBr assessment in the spring of 2020-2021. The denominator is all students matching the criteria (IEP, K-3) that took the assessment.

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)

NC

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.

lowa used an external evaluator for the initial years implementing the SSIP and found the formative evaluation data invaluable. The evaluation reports were used to inform implementation approaches, review progress on short term measures and evaluate effect. As such, lowa will continue to use the current evaluation plan and has contracted with an external evaluator for the next five years.

Current evaluation plan:

https://docs.google.com/document/d/1mSdA3W8dDFC35QmOC65G0I9Uzsc6ukLB/edit?usp=sharing&ouid=103733777135894690636&rtpof=true&sd=true&

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 1. Establish a technical assistance system to effectively implement and support personnel preparation and professional development in the area of SDI. This is accomplished through the implementation and support of three critical teams:

- The IDEA Support Network consists of IDEA program consultants and AEA administrators responsible for professional learning in each of 9
  AEAs. It is facilitated by the State Director of Special Education, an AEA Director of Special Education and a program manager. The IDEA
  Support Network provided professional learning for the roll-out of the new statewide IFSP/IEP data system.
- 2. The SDI Literacy Implementation Network ensures consistency and fidelity to the SDI Framework and to the resources, materials, and tools developed by the Design Teams in each of the following instructional focus areas: preschool (PS), K-6 literacy (K-6), and significant disabilities (SD). Responsibilities of the SDI Literacy Implementation Network include: developing communication tools to use with AEA, district, and/or school staff and other stakeholder groups; coordinating revisions and development of professional learning materials; and providing and monitoring implementation guidance (negotiables and non-negotiables) for multiple levels (state, district, building, classroom).
- 3. The Professional Learning Governance Council (PLGC) which acts as the oversight for all statewide professional learning. Specifically, the PLGC identifies and prioritizes statewide needs for professional learning. PLGC members include two representatives of local special education directors, two representatives of AEA directors of special education and two representatives of the SEA.

Strategy 2. Build capacity of lowa's coaching network so that network participants have the capacity to train, coach, and support delivery of SDI with integrity.

SDI Coaches work with teachers to implement SDI professional learning in their classroom(s). Coaching conversations take place a minimum of once per month throughout the learning and implementation. Coaching support is provided for Year 1 coaches using support materials that focus on both generic coaching skills as well as professional learning that is specific to the content area (PS, K-6, SD). Year 2 coaches continue to engage with support materials that enhance their ability to be a coach and to assist with further content-specific professional learning.

Strategy 3. Deliver high-quality professional development so that SDI is implemented with fidelity and effectively improves learning for a wide range of learners.

Professional Learning Leads (PLLs) have been identified and trained in each of the AEAs, using established professional learning packages for each content area (PS, K-6, SD). The PLLs identify districts / teachers to engage in the SDI training, implementation, and coaching. The PLLs deliver this training regionally. Ongoing support for the PLLs occurs monthly through a Community of Practice (CoP) structure facilitated by the state lead in each content area.

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.

Strategy 1. Establish a technical assistance system to effectively implement and support personnel preparation and professional development in the area of SDI.

Evaluation of the technical assistance system (e.g., SDI Literacy Implementation Network) occurs through system protocols, procedures, and decision-making guides that are used with fidelity. This technical assistance group oversees implementation across the state and ensures that all packages are implemented as designed and with fidelity. Implementation was monitored through checklists, observations, and participation in all aspects of SDI implementation in each area of focus.

Strategy 2. Build capacity of lowa's coaching network so that network participants have the capacity to train, coach, and support delivery of SDI with integrity.

Evaluation of coaching practices and implementation occurs through the Coaching Self-Assessment (CSA), which is administered each fall and spring to all SDI instructional practices coaches. Data from the CSA is utilized as part of a continuous improvement process. Based on the data, coaching support needs are identified, resources are provided, and next steps for implementation are determined. The continuous improvement process based on CSA data is replicated each fall and spring.

Strategy 3. Deliver high-quality professional development so that SDI is implemented with fidelity and effectively improves learning for a wide range of learners.

Evaluation of the delivery of high-quality professional learning occurs partially through the FIT, which is administered each fall and spring to teachers engaged in the SDI professional learning. Data from the FIT is also used as part of a continuous improvement process. Based on the data, areas of need are identified, additional training and/or coaching is provided, and support for implementation is provided to teachers. The continuous improvement process based on FIT data was replicated each fall and spring.

Review of the FIT data (teacher implementation data), student early literacy data and coaching self assessment data supported the decision to move forward with the scale-up of the implementation of SDI across the state through the AEAs. Collected data are reviewed and analyzed at the state, AEA, and local level to identify areas of strength and growth.

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.

Next steps for lowa's strategies continue to be as follows:

Strategy 1. Establish a technical assistance system to effectively implement and support personnel preparation and professional development in the area of SDI: The SDI Literacy Implementation Network will continue to meet regularly to build consistency across the state related to the implementation and support of SDI Literacy. The group will continue to provide and monitor implementation guidance to ensure fidelity of implementation across the state, coordinate revisions and development of professional learning materials, and utilize communication tools to use with stakeholder groups.

Strategy 2. Build capacity of lowa's coaching network so that network participants have the capacity to train, coach, and support delivery of SDI with integrity: We will continue to build the capacity of the AEAs to support a network of SDI coaches in partnership with their general education coaching support counterparts. The coaching networks will continue to build knowledge and skills of coaches to support SDI implementation in districts / schools / classrooms.

Strategy 3. Deliver high-quality professional development so that SDI is implemented with fidelity and effectively improves learning for a wide range of learners: Additional Professional Learning Leads will be trained to assist in the delivery of high-quality professional learning to districts as the scale-up of SDI implementation continues.

In addition, lowa will: (a). Continue to support AEAs in implementing the three SSIP strategies of the SSIP Logic Model related to continued implementation and scale-up of SDI Literacy, (b). Ensure fidelity of AEA-provided professional development delivery and coaching support to new districts, and c. Use professional learning materials and support for instructional practices and system coaches across the system.

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

lowa continues to implement the selected evidence-based practices as outlined in this and previous reports across three strategies:

- Strategy 1. Establish a technical assistance system to effectively implement and support personnel preparation and professional development in the area of SDI.
- Strategy 2. Build capacity of lowa's coaching network so that network participants have the capacity to train, coach, and support delivery of SDI with integrity.
- Strategy 3. Deliver high-quality professional development so that SDI is implemented with fidelity and effectively improves learning for a wide range of learners.

The current focus is on implementation fidelity. For example, it is expected that all materials are used as designed paired with monthly coaching. The SDI Literacy Implementation Network monitors the fidelity of implementation to ensure that there is consistency in the use of materials, delivery and coaching across the state. Ongoing data collection and review indicate schools that are supported with fidelity experience significant change in teacher practice, which in turn positively impacts student outcomes. We continue to monitor implementation to ensure scale-up reflects similar results.

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

lowa's evidence-based practices are rooted in implementation science and are focused on infrastructure support. Strategies include:

- Strategy 1. Establish a technical assistance system to effectively implement and support personnel preparation and professional development in the area of SDI.
- Strategy 2. Build capacity of Iowa's coaching network so that network participants have the capacity to train, coach, and support delivery of SDI with integrity.
- Strategy 3. Deliver high-quality professional development so that SDI is implemented with fidelity and effectively improves learning for a wide range of learners

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.

Implementation of effective specially designed instruction requires educators to accurately diagnose for instructional design, design for instructional delivery, deliver for student engagement, and engage for results. There are many evidence-based practices that align to an individual's need, the key is supporting all educators to make accurate and timely data-based decisions. The infrastructure to support them, however, is not yet strong enough to reach every teacher in every classroom. Iowa's evidence-based practices, therefore, are rooted in implementation science and are focused on infrastructure support.

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

There are two primary fidelity tools used in SDI implementation:

- 1. Framework Implementation Tool (FIT) data. The FIT is a tool that teachers utilize (fall and spring) to self-assess their implementation of the key SDI Framework components of Diagnose, Design, and Deliver. This data is shared with district leadership teams and coaches to determine relative strengths and areas of growth in the implementation of SDI professional learning. AEAs and statewide teams use the data to determine fidelity of the delivery of the professional learning as well as the support teachers need to implement the learning.
- 2. Coach Self-Assessment (CSA) data. The CSA is a tool that coaches utilize (fall and spring) to self-assess their ability to coach teachers in implementing the key SDI Framework components of Diagnose, Design, and Deliver. These data are shared with stakeholders as part of a continuous improvement process to determine the support that coaches need to enhance their ability to coach teachers in implementing the SDI professional learning. Fidelity checks for each area of focus (PS, K-6, SD). Each content area has implementation checklists, which are used for data collection regarding the level of fidelity of implementing the professional learning. The fidelity checklists for each area of focus assist coaches and teachers in determining how well the evidence practices are being implemented in each classroom.

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.

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

Part B

lowa will continue to (a) Support AEAs in implementing the three SSIP strategies of the SSIP Logic Model related to continued implementation and scale-up of SDI Literacy. (b). Ensure fidelity of AEA-provided professional development delivery and coaching support to new districts, and (c). Use professional learning materials and support for instructional practices and system coaches across the system.

### 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.

Current evaluation data indicate the B17 target is being met. In addition, ongoing data collection and review indicate schools that are supported with fidelity experience significant change in teacher practice, which in turn positively impacts student outcomes. We continue to monitor implementation to ensure scale-up reflects similar results. Further, evaluation data being collected are feasible to track, report and use for evaluation of implementation.

#### Section C: Stakeholder Engagement

#### **Description of Stakeholder Input**

The IDE engages with stakeholders throughout the year to garner input on progress towards indicator targets as well as progress on the SSIP. Discussions and input on the APR include a review of historical and baseline data, targets, and progress across indicators and SiMr. Discussions center around the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups include the AEA special education directors, IDE special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder engagement and recommendations. SEAP meets six times a year; meetings are organized around indicators, and support ongoing, rich discussions throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. SEAP member representation includes: parents, individuals with disabilities, general and special education teachers, local administrators and building leaders, AEA consultants and administrators, Iowa Vocational Rehabilitation counselors and administrators, State juvenile and adult corrections state agency, institutes of Higher Education, Family-Educator Connection, local businesses, ASK Resource Center, and other state and community organizations.

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

The following strategies were implemented to engage stakeholders in key improvement efforts around B17: Membership on development groups and task teams; feedback loops; evaluation surveys; focus groups.

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.

NA

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

NΑ

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

NA

Provide additional information about this indicator (optional).

#### 17 - Prior FFY Required Actions

None

### 17 - OSEP Response

#### 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:

Chief State School Officer

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:

Barbara Guy

Title:

State Director of Special Education

Email:

barbara.guy@iowa.gov

Phone:

5152310681

Submitted on:

04/25/24 3:00:47 PM

#### **Determination Enclosures**

# **RDA Matrix**

# Iowa

# 2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
73.93%	Needs Assistance

# **Results and Compliance Overall Scoring**

Section	Total Points Available	Points Earned	Score (%)
Results	20	11	55.00%
Compliance	14	13	92.86%

<sup>(1)</sup> For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 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		
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8		
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	17%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	94%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	23%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	94%	1

# **Math Assessment Elements**

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4		
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8		
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	41%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	92%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	20%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	91%	1

<sup>(2)</sup> 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	25	0
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	74	1

<sup>\*\*</sup>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.	0.00%	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.	N/A	N/A	N/A
Indicator 11: Timely initial evaluation	99.04%	YES	2
Indicator 12: IEP developed and implemented by third birthday	93.64%	YES	2
Indicator 13: Secondary transition	100.00%	N/A	2
Timely and Accurate State-Reported Data	92.72%		1
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

<sup>(3)</sup> The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: <a href="https://sites.ed.gov/idea/files/2024">https://sites.ed.gov/idea/files/2024</a> Part-B SPP-APR Measurement Table.pdf

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

# **Data Rubric**

#### Iowa

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	N/A	0
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	20
<b>Timely Submission Points</b> - 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) =	25

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

# 618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 8/30/23	1	0	1	2
Personnel Due Date: 2/21/24	1	1	1	3
Exiting Due Date: 2/21/24	1	0	1	2
Discipline Due Date: 2/21/24	1	0	1	2
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	18
Grand Total (Subtotal X 1.23809524) =	22.29

(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	25
B. 618 Grand Total	22.29
C. APR Grand Total (A) + 618 Grand Total (B) =	47.29
Total N/A Points in APR Data Table Subtracted from Denominator	1
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	51.00
D. Subtotal (C divided by Denominator) (3) =	0.9272
E. Indicator Score (Subtotal D x 100) =	92.72

<sup>(3)</sup> 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 EMAPS	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in EMAPS	5/3/2023

<sup>2)</sup> 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.

<sup>3)</sup> 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

#### Iowa

#### 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.	3
(1.1) Complaints with reports issued.	0
(1.1) (a) Reports with findings of noncompliance	0
(1.1) (b) Reports within timelines	0
(1.1) (c) Reports within extended timelines	0
(1.2) Complaints pending.	3
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	0

# **Section B: Mediation Requests**

(2) Total number of mediation requests received through all dispute resolution processes.	1
(2.1) Mediations held.	0
(2.1) (a) Mediations held related to due process complaints.	0
(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.	1
(2.3) Mediations withdrawn or not held.	0

# **Section C: Due Process Complaints**

(3) Total number of due process complaints filed.	1
(3.1) Resolution meetings.	0
(3.1) (a) Written settlement agreements reached through resolution meetings.	0
(3.2) Hearings fully adjudicated.	0
(3.2) (a) Decisions within timeline (include expedited).	0
(3.2) (b) Decisions within extended timeline.	0
(3.3) Due process complaints pending.	1
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	0

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

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

# **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:

Iowa

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 McKenzie Snow

Director

Iowa Department of Education

Grimes State Office Building, 400 East 14th Street

Des Moines, IA 50319-0146

Dear Director Snow:

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 Iowa needs assistance in implementing the requirements of Part B of the IDEA. This determination is based on the totality of Iowa's 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.

lowa's 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 Iowa).

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

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

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) Iowa's RDA Matrix:
- (2) the HTDMD link;
- (3) "2024 Data Rubric Part B," which shows how OSEP calculated Iowa's "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 lowa's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Iowa's 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.

lowa's determination for 2023 was also Needs Assistance. In accordance with Section 616(e)(1) of the IDEA and 34 C.F.R. §300.604(a), if a State or Entity is determined to need assistance for two consecutive years, the Secretary must take one or more of the following actions:

- (1) advise the State or Entity of available sources of technical assistance that may help the State or Entity address the areas in which the State or Entity needs assistance and require the State or Entity to work with appropriate entities;
- (2) direct the use of State-level funds on the area or areas in which the State or Entity needs assistance; or
- (3) identify the State or Entity as a high-risk grantee and impose Specific Conditions on the State's or Entity's IDEA Part B grant award.

Pursuant to these requirements, the Secretary is advising lowa of available sources of technical assistance, including OSEP-funded technical assistance centers and resources at the following websites: Monitoring and State Improvement Planning (MSIP) | OSEP Ideas That Work, Individuals with Disabilities Education Act (IDEA) Topic Areas, and requiring lowa to work with appropriate entities. In addition, lowa should consider accessing technical assistance from other Department-funded centers such as the Comprehensive Centers with resources at the following link: <a href="https://compcenternetwork.org/states">https://compcenternetwork.org/states</a>. The Secretary directs lowa to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. We strongly encourage lowa to access technical assistance related to those results elements and compliance indicators for which it received a score of zero. Iowa must report with its FFY 2023 SPP/APR submission, due February 1, 2025, on:

- (1) the technical assistance sources from which lowa received assistance; and
- (2) the actions lowa took as a result of that technical assistance.

As required by IDEA Section 616(e)(7) and 34 C.F.R. §300.606, lowa must notify the public that the Secretary of Education has taken the above enforcement actions, including, at a minimum, by posting a public notice on its website and distributing the notice to the media and through public agencies.

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

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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, lowa 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 lowa on the targets in the SPP/APR as soon as practicable, but no later than 120 days after lowa's submission of its FFY 2022 SPP/APR. In addition, lowa 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, lowa 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 Iowa's 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 lowa's efforts to improve results for children and youth with disabilities and looks forward to working with lowa 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

Valein C. Williams

cc: Iowa Director of Special Education

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