STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on FFY 2021

Iowa



PART B DUE February 1, 2023

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 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 the 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 FFY21, no targets were revised and no baselines were reset. The data that was submitted in the FFY21 SPP/APR was presented to SEAP along the corresponding targets for conversation. SEAP members gave their feedback and had conversations about what strategies the state could use to improve certain indicator data.

lowa engages in a number of additional 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 lowa's Parent Training and Information Center (ASK Resource) to conduct Respect Training with parents and educators as a means of building capacity. The Department also contracted with ASK Resource to hold focus group meetings with parents of students who are deaf or hard of hearing to gain input for statewide activities. The Department also is one of the sponsors of ASK Resource parent conference. 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 IDEA Part B requirements are met, e.g., monitoring, dispute resolution, etc.

Since 1974, lowa has been divided into intermediate agencies (Area Education Agencies) to provide specialized services. The AEAs were created in order to provide equity in the provision of programs and services across counties or merged areas. One key difference between lowa's AEA system and intermediate units in other states is that lowa's AEAs are mandatory. It is also mandatory that each local school district be assigned to an area education agency that will provide the services the school district needs. The AEAs carry special education general supervision and compliance responsibilities and the charge to provide the services needed by the local school districts. Their primary role is provision of special education support services to individuals under the age of 21 years requiring special education and related services, media services to all children through grade 12, and other educational services to pupils and education staff. The AEAs also provide the system used to locate and identify students suspected of having disabilities and provide the personnel to conduct evaluation activities in collaboration with LEAs. lowa's Part B general supervision system is a partnership between the lowa Department of Education (IDE) and the AEAs and is multifaceted. The components include: 1) support practices that improve educational outcomes for students (described under technical assistance and professional development); 2) use of multiple methods to identify and correct noncompliance within one year; and 3) mechanisms to encourage and support improvement and enforce compliance.

Dispute Resolution. The State uses a system for dispute resolution including both informal and formal mechanisms. Resolution Facilitation is a way to resolve differences instead of, or before use of, formal proceedings provided by the State. The SEA has written procedures for resolving any complaint, including a complaint filed by an organization or individual from another state. The SEA has widely disseminated these procedures to parents and other interested individuals, including the lowa Parent Training and Information Center, Disability Rights Iowa, independent living centers and other appropriate entities. A mediator assists in resolving differences between parents, schools and private service providers. Mediation is voluntary on the part of all parties and conducted by a qualified and impartial mediator who is trained in effective mediation techniques. Mediation can occur at any time, even prior to the filing of a due process hearing request. Whenever a due process hearing request is filed, the parties involved in the dispute have an opportunity for an impartial due process hearing.

Monitoring - Area Education Agencies (intermediate agencies). The SEA 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 school districts 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 lowa Code. During the accreditation process, the special education services the agency provides are a part of each of the eight required standards. A targeted interview is held with special education staff; topics discussed during this interview include the agency's State Performance Plan indicator data, LEA (district) special education procedural compliance data, the AEA's general supervision responsibilities and other AEA data used by the lowa Department of Education to make the accreditation determination regarding the agency.

Monitoring - Local Education Agencies (school districts). The SEA annually conducts desk audits for each LEA and follows up with accreditation visits if determined necessary. The Accreditation Site Visit process may include lowa Chapter 12, Equity, Special Education and Title Programs; dependent upon findings of the desk audit. During a site review, the district provides requested information, including additional information as a result of the lowa Department of Education's procedural compliance review related to the implementation of IDEA. Data are collected through a Web-based tool, with a report developed for each district to identify individual student noncompliance and whether or not the 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 fully implemented as soon as possible, 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 SEA.

During the site visit, multiple interviews take place on a variety of topics. The on-site visit allows for conversations to occur regarding student performance and implementation of the special education practices in the district. Interview groups include community partners, parents, teachers, school board, district administrators, and support staff. One of the interviews allows for district staff to be interviewed with a specific focus on special education practices and district level special education data. A comprehensive report written to the district identifies strengths, recommendations and any noncompliance in all of the areas reviewed during the site visit. Any special education noncompliance identified during the site visit must be corrected as soon as possible, but no later than one year from date of notification.

In FFY 2022, the SEA began to implement a continuous improvement component to the annual desk audits. The annual desk audit includes a review of

district results for students receiving special education services and a score is assigned to the district to identify the level of support the district may need. Districts are then assigned to a three year improvement cohort focusing on either early literacy or secondary transition. More details on this process will be reported in the next SPP/APR covering activities in FFY 2022.

Technical Assistance System:

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

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. The processes and structures for providing technical assistance, however, have changed over time. Successful implementation of lowa's State Personnel Grant and Systemic Improvement Plan have resulted in the establishment of new structures for the provision of technical assistance. Primary among them are the IDEA Support Network and SDI Literacy Network. These new structures have provided 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 structures described above, 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;
- 3. 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.

The State has also established a Professional Learning Governance Council (PLGC) which 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.

Broad Stakeholder Input:

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

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

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

YES

Number of Parent Members:

16

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.

As the primary vehicle for parent member involvement on SEAP, parent members of the panel were involved in every aspect of stakeholder engagement. Alongside the other panel members (see previous section for member representation), parents analyzed the historical data of each indicator, provided their input on which set of targets would be ambitious yet achievable in six years, and were engaged in the discussions regarding improvement strategies to reach the proposed targets.

Evaluation of progress will be conducted by comparing annual indicator outcomes to the targets set. Additional evaluation methods may be added as improvement strategies are implemented and progress data are shared with stakeholders.

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 an additional group of parents to provide input on family engagement in the IEP process. The current focus of the group has been on the development of a parent portal to the state-wide IEP system. This portal will give families real-time access to progress monitoring data as well as all documents related to their child's IEP. The system is scheduled to launch in July 2023.

Soliciting Public Input:

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

The State solicited input regarding IDEA Part B data, targets, evaluation and improvement strategies throughout the year. For any revisions needed prior to the next SPP/APR submission, feedback is gathered at least two months ahead, to allow for consideration and additional sessions, if warranted. Annual updates are given to SEAP, which may produce specific actions or activities for the rest of the year.

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 or baseline data. Outcome data are also 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 of evaluating progress. Current and future efforts also include public posting of state and LEA data profiles on the public reporting page.

Reporting to the Public

How and where the State reported to the public on the FFY 2020 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 2020 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

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

When made available, the FFY 2021 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 2021 and 2022 is Needs Assistance. In the State's 2022 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.

The State must report, with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2020 SPP/APR

The State's determination of Needs Assistance is primarily due to performance calculations rather than compliance calculations, with the continued exception of secondary transition. As a result of previous technical assistance regarding our secondary transition compliance data, the State changed the process of collecting the data from a review of a sample of IEPs to collection of data from the new state-wide IEP system known as ACHIEVE. This change permits a review of the population of secondary IEPs completed in ACHIEVE. The State has continued to receive technical assistance and support from the National Technical Assistance Center on Transition (NTACT). NTACTs resources on evidence-based practices and tools for data analysis served as the foundation for professional learning materials that will be used in FFY 2022 for districts identified through the monitoring process as needing support in secondary transition. Additionally, the State has participated in numerous activities of the National Center for Systemic Improvement, including their Results Based Accountability and Supports (RBAS) learning collaborative. Participation in the RBAS learning collaborative, as well as ongoing technical support from our state liaison has resulted in the development of a results driven Implementation Support Rubric to identify districts in need of additional support and professional development.

Intro - OSEP Response

The State's determinations for both 2021 and 2022 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2022, determination letter informed the State that it must report with its FFY 2021 SPP/APR submission, due February 1, 2023, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

Intro - 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.

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 2021 SPP/APR, use data from 2020-2021), and compare the results to the target. Provide the actual numbers used in the calculation.

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

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

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

1 - Indicator Data

Historical Data¹

| Baseline Year | Baseline Data |
|---------------|---------------|
| 2020 | 80.43% |

| FFY | 2016 | 2017 | 2018 | 2019 | 2020 |
|-----------|--------|--------|--------|--------|--------|
| Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 83.37% |
| Data | 69.51% | 74.25% | 76.51% | 83.12% | 80.43% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-----------|--------|--------|--------|--------|--------|
| Target >= | 85.42% | 86.57% | 87.72% | 88.87% | 90.00% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

Prepopulated Data

| Source | Date | Description | Data |
|---|------------|--|-------|
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 2,878 |

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

| Source | Date | Description | Data |
|---|------------|--|------|
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 51 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 776 |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|--|---|---------------|-----------------|------------------|------------------------|----------|
| 2,878 | 3,705 | 80.43% | 85.42% | 77.68% | Did not meet target | Slippage |

Provide reasons for slippage, if applicable

The State attributes slippage to effects of the COVID-19 pandemic during the 2020-2021 school year. The 4-year cohort graduation rate in Iowa also decreased for this period for nearly every student group.

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.

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

Measurement

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 data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), 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.

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

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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|-----------|--------|--------|--------|--------|--------|
| Target <= | 20.00% | 19.50% | 19.00% | 19.00% | 18.52% |
| Data | 19.79% | 19.34% | 19.02% | 18.79% | 17.37% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-----------|--------|--------|--------|--------|--------|
| Target <= | 18.28% | 18.02% | 17.77% | 17.51% | 17.25% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

Prepopulated Data

| Source | Date | Description | Data |
|---|------------|--|-------|
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 2,878 |

| Source | Date | Description | Data |
|---|------------|--|------|
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b) | |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c) | |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d) | 51 |
| SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/25/2022 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e) | 776 |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|--|--|---------------|-----------------|------------------|---------------------|----------|
| 776 | 3,705 | 17.37% | 18.28% | 20.94% | Did not meet target | Slippage |

Provide reasons for slippage, if applicable

The State attributes slippage to effects of the COVID-19 pandemic during the 2020-2021 school year, which also affected the overall dropout rate across the state. This pattern was repeated in further examination of the 4-year cohort dropout rates for all students and students with IEPS. In 2019-20 it was 2.2% and 2.9% in 2020-21 for all students. Drop out percentages for students with IEPs was 3.9% in 2019-20 and 4.8% in 2020-21.

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

A 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 | 2021 | 2022 | 2023 | 2024 | 2025 |
|---------|-------|---------------|--------|--------|--------|--------|--------|
| Reading | A >= | Grade 4 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Reading | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | A >= | Grade 4 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | B >= | Grade 8 | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| Math | C >= | Grade HS | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

04/05/2023

Reading Assessment Participation Data by Grade

| Group | Grade 4 | Grade 8 | Grade HS |
|---|---------|---------|----------|
| a. Children with IEPs* | 5,476 | 5,397 | 13,448 |
| b. Children with IEPs in regular assessment with no accommodations | 2,695 | 971 | 2,020 |
| c. Children with IEPs in regular assessment with accommodations | 2,450 | 3,941 | 9,721 |
| d. Children with IEPs in alternate assessment against alternate standards | 250 | 309 | 813 |

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

04/05/2023

Math Assessment Participation Data by Grade

| Group | Grade 4 | Grade 8 | Grade HS |
|---|---------|---------|----------|
| a. Children with IEPs* | 5,475 | 5,396 | 13,448 |
| b. Children with IEPs in regular assessment with no accommodations | 2,697 | 978 | 2,028 |
| c. Children with IEPs in regular assessment with accommodations | 2,456 | 3,951 | 9,787 |
| d. Children with IEPs in alternate assessment against alternate standards | 244 | 303 | 796 |

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

FFY 2021 SPP/APR Data: Reading Assessment

| Group | Group Name | Number of Children with IEPs Participating | Number of Children with IEPs | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|-------|---------------|--|------------------------------|------------------|--------------------|------------------|---------------------------|----------------|
| A | Grade 4 | 5,395 | 5,476 | 98.17% | 95.00% | 98.52% | Met target | No Slippage |
| В | Grade 8 | 5,221 | 5,397 | 93.77% | 95.00% | 96.74% | Met target | No Slippage |
| С | Grade HS | 12,554 | 13,448 | 89.78% | 95.00% | 93.35% | Did not meet target | No Slippage |

FFY 2021 SPP/APR Data: Math Assessment

| Group | Group Name | Number of Children with IEPs Participating | Number of Children with IEPs | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|-------|---------------|--|------------------------------|------------------|--------------------|------------------|---------------------------|----------------|
| Α | Grade 4 | 5,397 | 5,475 | 98.21% | 95.00% | 98.58% | Met target | No Slippage |
| В | Grade 8 | 5,232 | 5,396 | 93.51% | 95.00% | 96.96% | Met target | No Slippage |
| С | Grade HS | 12,611 | 13,448 | 89.31% | 95.00% | 93.78% | Did not meet target | No Slippage |

Regulatory Information

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

Public Reporting Information

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

lowa does not report the number of children without disabilities participating in regular assessments who were provided accommodations. The State, therefore, did not report the number of children with disabilities participating in regular assessments who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State, district and school levels.

The State does not publicly report the number of children with disabilities participating in regular assessments who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State, district and school levels, because 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://educateiowa.gov/pk-12/special-education/special-education-public-reporting#lowa Alternate Assessment Participation Rates

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response

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

3A - Required Actions

Within 90 days of the receipt of the State's 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.

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 | Α | 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 | 2021 | 2022 | 2023 | 2024 | 2025 |
|---------|-------|------------|--------|--------|--------|--------|--------|
| Reading | A >= | Grade 4 | 28.63% | 28.79% | 28.95% | 29.11% | 29.27% |
| Reading | B >= | Grade 8 | 24.55% | 24.82% | 25.09% | 25.36% | 25.63% |
| Reading | C >= | Grade HS | 20.60% | 20.80% | 21.00% | 21.20% | 21.40% |
| Math | A >= | Grade 4 | 30.76% | 31.44% | 32.12% | 32.80% | 33.50% |
| Math | B >= | Grade 8 | 24.50% | 24.97% | 25.44% | 25.91% | 26.38% |
| Math | C >= | Grade HS | 14.36% | 15.36% | 16.36% | 17.36% | 18.36% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

| Group | Grade 4 | Grade 8 | Grade HS |
|--|---------|---------|----------|
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 5,145 | 4,912 | 11,741 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 968 | 338 | 597 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 537 | 981 | 1,995 |

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

| Group | Grade 4 | Grade 8 | Grade HS |
|--|---------|---------|----------|
| a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment | 5,153 | 4,929 | 11,815 |
| b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,060 | 270 | 402 |
| c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 631 | 865 | 1,209 |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---------------|---------------|---|--|------------------|--------------------|------------------|------------|----------------|
| A | Grade 4 | 1,505 | 5,145 | 28.38% | 28.63% | 29.25% | Met target | No Slippage |
| В | Grade 8 | 1,319 | 4,912 | 24.23% | 24.55% | 26.85% | Met target | No Slippage |
| С | Grade HS | 2,592 | 11,741 | 21.88% | 20.60% | 22.08% | Met target | No Slippage |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---------------|---------------|--|--|------------------|--------------------|------------------|---------------------|----------------|
| A | Grade 4 | 1,691 | 5,153 | 30.03% | 30.76% | 32.82% | Met target | No Slippage |
| В | Grade 8 | 1,135 | 4,929 | 24.04% | 24.50% | 23.03% | Did not meet target | Slippage |
| С | Grade HS | 1,611 | 11,815 | 14.19% | 14.36% | 13.64% | Did not meet target | No Slippage |

Provide reasons for slippage for Group B, if applicable

The State attributes slippage to annual fluctuations in the data.

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

None

3B - OSEP Response

The State did not provide a Web link demonstrating that the State reported publicly on the performance of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported, compared with the achievement of all children, including children with disabilities, the performance results of children with disabilities on regular assessments, at the State, district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3B - 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.

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 | Α | Grade 4 | 2020 | 44.04% |
| Reading | В | Grade 8 | 2020 | 19.01% |
| Reading | С | Grade HS | 2020 | 12.04% |
| Math | Α | Grade 4 | 2020 | 16.13% |
| Math | В | Grade 8 | 2020 | 9.30% |
| Math | С | Grade HS | 2020 | 11.02% |

Targets

| Subject | Group | Group Name | 2021 | 2022 | 2023 | 2024 | 2025 |
|---------|-------|------------|--------|--------|--------|--------|--------|
| Reading | A >= | Grade 4 | 44.64% | 45.24% | 45.84% | 46.44% | 47.04% |
| Reading | B >= | Grade 8 | 19.61% | 20.21% | 20.81% | 21.41% | 22.01% |
| Reading | C >= | Grade HS | 14.99% | 15.59% | 16.19% | 16.79% | 17.39% |
| Math | A >= | Grade 4 | 16.73% | 17.33% | 17.93% | 18.53% | 19.13% |
| Math | B >= | Grade 8 | 9.90% | 10.50% | 11.10% | 11.70% | 12.30% |
| Math | C >= | Grade HS | 11.62% | 12.22% | 12.82% | 13.42% | 14.02% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly.

Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

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 | 250 | 309 | 813 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 128 | 106 | 126 |

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

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 | 244 | 303 | 796 |
| b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient | 52 | 66 | 147 |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|-------|------------|--|--|------------------|-----------------|------------------|------------|-------------|
| Α | Grade 4 | 128 | 250 | 44.04% | 44.64% | 51.20% | Met target | No Slippage |
| В | Grade 8 | 106 | 309 | 19.01% | 19.61% | 34.30% | Met target | No Slippage |
| С | Grade HS | 126 | 813 | 12.04% | 14.99% | 15.50% | Met target | No Slippage |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|-------|------------|--|--|------------------|-----------------|------------------|------------|-------------|
| Α | Grade 4 | 52 | 244 | 16.13% | 16.73% | 21.31% | Met target | No Slippage |
| В | Grade 8 | 66 | 303 | 9.30% | 9.90% | 21.78% | Met target | No Slippage |
| С | Grade HS | 147 | 796 | 11.02% | 11.62% | 18.47% | 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 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 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 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 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 | Α | 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 | 2021 | 2022 | 2023 | 2024 | 2025 |
|---------|-------|---------------|-------|-------|-------|-------|-------|
| Reading | A <= | Grade 4 | 43.99 | 43.83 | 43.67 | 43.51 | 43.35 |
| Reading | B <= | Grade 8 | 48.31 | 48.04 | 47.77 | 47.50 | 47.23 |
| Reading | C <= | Grade HS | 51.06 | 50.86 | 50.66 | 50.46 | 50.26 |
| Math | A <= | Grade 4 | 35.52 | 34.84 | 34.16 | 33.48 | 32.80 |
| Math | B <= | Grade 8 | 43.12 | 42.65 | 42.18 | 41.71 | 41.24 |
| Math | C <= | Grade HS | 49.54 | 48.54 | 47.54 | 46.54 | 45.54 |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has

organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

| Group | Grade 4 | Grade 8 | Grade HS |
|--|---------|---------|----------|
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 34,526 | 37,796 | 109,467 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 5,145 | 4,912 | 11,741 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 24,603 | 27,160 | 75,283 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 537 | 981 | 1,995 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 968 | 338 | 597 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 537 | 981 | 1,995 |

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

| Group | Grade 4 | Grade 8 | Grade HS |
|--|---------|---------|----------|
| a. All Students who received a valid score and a proficiency was assigned for the regular assessment | 34,540 | 37,863 | 110,007 |
| b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment | 5,153 | 4,929 | 11,815 |
| c. All students in regular assessment with no accommodations scored at or above proficient against grade level | 23,105 | 23,995 | 64,016 |
| d. All students in regular assessment with accommodations scored at or above proficient against grade level | 631 | 865 | 1,209 |
| e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level | 1,060 | 270 | 402 |
| f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level | 631 | 865 | 1,209 |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|-------|---------------|---|---|------------------|--------------------|------------------|------------|-------------|
| Α | Grade 4 | 29.25% | 72.81% | 44.24 | 43.99 | 43.56 | Met target | No Slippage |
| В | Grade 8 | 26.85% | 74.45% | 48.63 | 48.31 | 47.60 | Met target | No Slippage |
| С | Grade HS | 22.08% | 70.59% | 51.12 | 51.06 | 48.52 | Met target | No Slippage |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|-------|---------------|---|---|------------------|--------------------|------------------|------------------------|-------------|
| A | Grade 4 | 32.82% | 68.72% | 36.24 | 35.52 | 35.90 | Did not meet target | No Slippage |
| В | Grade 8 | 23.03% | 65.66% | 43.57 | 43.12 | 42.63 | Met target | No Slippage |
| С | Grade HS | 13.64% | 59.29% | 47.95 | 49.54 | 45.66 | Met target | No Slippage |

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs 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 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|-----------|-------|-------|-------|-------|-------|
| Target <= | 1.40% | 1.30% | 1.30% | 1.30% | 1.55% |
| Data | 1.52% | 1.61% | 0.92% | 1.54% | 1.55% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-----------|-------|-------|-------|-------|-------|
| Target <= | 1.32% | 1.25% | 1.19% | 1.13% | 1.06% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---|---|---------------|-----------------|------------------|------------|-------------|
| 1 | 321 | 1.55% | 1.32% | 0.31% | 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 both inschool and out-of-school suspensions as well as expulsions in making this calculation. The district's rate of suspensions or expulsions totaling 10 or more days is compared to the State's rate of suspensions or expulsions totaling 10 or more days. The district's rate is calculated by dividing by the number of students with an IEP removed for 10 or more days by the total number of students with an IEP in the district. The calculation for the State's rate is the same. The rate ratio used to determine significant discrepancy is the district's rate divided by the State's rate.

In-school and out-of-school suspension are both defined as an "administrative or school board removal of a student from school classes or activities for disciplinary reasons," with a student still being under the supervision of school officials during an in-school suspension. Expulsion is defined as "a school board removal of a student from school classes and activities for disciplinary reasons," (Collecting and Reporting Juvenile Incident and Discipline Data in Iowa Schools, 2006). A district must have a minimum of 10 students with an IEP to be considered in the analysis.

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.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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 participated 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 Memorandum 09-02, dated October 17, 2008.

The State verified that each LEA is correctly implementing the regulatory requirements by reviewing subsequent data in the State data system of a similar nature to the area of noncompliance identified in the original finding, to determine if the area of noncompliance continued to be a pattern. The State verified, through the State data system and review of the revised policies, procedures and practices that each individual case of noncompliance identified was corrected, and no pattern of noncompliance was found. The State (a) reviewed the revised policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards of the LEA, (b) reviewed the revised practices for giving parents prior written notice for students involved in change of placements consistent with the discipline provisions of IDEA 2005 of the LEA, and (c) reviewed the revised district policies, procedures and practices regarding the discipline provisions of IDEA 2005 of the LEA.

Correction of Findings of Noncompliance Identified in FFY 2020

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

FFY 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 completed a desk audit, using the State data system, 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 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. The State verified that each LEA is correctly implementing the regulatory requirements by reviewing subsequent data in the State data system of a similar nature to the area of noncompliance identified in the original finding.

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

The State verified, through the State data system and review of the revised policies, procedures and practices that each individual case of noncompliance identified was corrected. The State (a) reviewed the revised policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards of the LEA, (b) reviewed the revised practices for giving parents prior written notice for students involved in change of placements consistent with the discipline provisions of IDEA 2005 of the LEA, and (c) reviewed the revised district policies, procedures and practices regarding the discipline provisions of IDEA 2005 of the LEA.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

| Year Findings of Noncompliance Were Identified | Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR | Findings of Noncompliance Verified as Corrected | Findings Not Yet Verified as Corrected |
|--|--|--|---|
| | | | |
| | | | |
| | | | |

4A - Prior FFY Required Actions

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

Response to actions required in FFY 2020 SPP/APR

The State verified that the noncompliance identified in FFY 2019 as a result of the review conducted was corrected. The State verified, through the State data system and review of the revised policies, procedures and practices that each individual case of noncompliance identified was corrected, and that the LEA is correctly implementing regulatory requirements. The State (a) reviewed the revised policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards of the LEA, (b) reviewed the revised practices for giving parents prior written notice for students involved in change of placements consistent with the discipline provisions of IDEA 2005 of the LEA, and (c) reviewed the revised district policies, procedures and practices regarding the discipline provisions of IDEA 2005 of the LEA.

4A - OSEP Response

The State's chosen methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspensions and expulsions of children with IEPs that falls above the median of thresholds used by all States.

4A - 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.

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 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 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 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

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

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|--------|-------|-------|-------|-------|-------|
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.61% | 0.32% | 0.62% | 0.31% | 0.00% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|--------|------|------|------|------|------|
| Target | 0% | 0% | 0% | 0% | 0% |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|--|--|---|------------------|-----------------|------------------|------------|-------------|
| 0 | 0 | 318 | 0.00% | 0% | NVR | Met target | No Slippage |

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, which is set 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 State uses both in-school and out-of-school suspensions as well as expulsions in making this calculation. The district's rate of suspensions or expulsions totaling 10 or more days is compared to the State's rate of suspensions or expulsions totaling 10 or more days for each race/ethnicity category. The district's rate is calculated by dividing by the number of students with an IEP of each race/ethnicity removed for 10 or more days by the total number of students with an IEP of each race/ethnicity in the district. The calculation for the State's rate is the same. The rate ratio used to determine significant discrepancy is the district's rate divided by the State's rate for each race/ethnicity category. In-school and out-of-school suspension are both defined as an "administrative or school board removal of a student from school classes or activities for disciplinary reasons," with a student still being under the supervision of school officials during an in-school suspension. Expulsion is defined as "a school board removal of a student from school classes and activities for disciplinary reasons," (Collecting and Reporting Juvenile Incident and Discipline Data in lowa Schools, 2006). 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 by the total 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.

Provide additional information about this indicator (optional)

The State's original description includes this statement: 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 category for any single year of data.

This has been clarified to: The State's definition of significant discrepancy is a rate ratio that exceeds the threshold of 3.50, which is set 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.

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 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.

When necessary, 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 NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

| 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 2020

| Year Findings of Noncompliance Were Identified | Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR | Findings of Noncompliance Verified as Corrected | Findings Not Yet Verified as Corrected |
|--|--|---|---|
| | | | |
| | | | |
| | | | |

4B - Prior FFY Required Actions

None

4B - OSEP Response

The State did not provide valid and reliable data for FFY 2021. The State reported, "The district's rate is calculated by dividing by the number of students with an IEP of each race/ethnicity removed for 10 or more days by the total number of students with an IEP of each race/ethnicity in the district. The calculation for the State's rate is the same." OSEP reminds the State that its chosen methodology cannot result in different thresholds for different racial and ethnic groups to demonstrate whether an LEA has a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. Therefore, OSEP could not determine whether the State met its target.

Additionally, the State's chosen methodology results in a threshold for measuring significant discrepancy, by race or ethnicity, in the rate of long-term suspensions and expulsions of children with IEPs that falls above the median of thresholds used by all States.

4B- 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.

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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|------|----------|-----------|--------|--------|--------|--------|--------|
| Α | 2020 | Target >= | 65.00% | 65.00% | 65.00% | 65.00% | 72.30% |
| Α | 73.51% | Data | 66.15% | 69.44% | 70.61% | 71.71% | 73.51% |
| В | 2020 | Target <= | 8.00% | 7.50% | 7.00% | 7.00% | 7.00% |
| В | 6.72% | Data | 8.45% | 8.14% | 7.78% | 7.22% | 6.72% |
| С | 2020 | Target <= | 2.70% | 2.60% | 2.50% | 2.50% | 1.70% |
| С | 1.19% | Data | 1.51% | 1.52% | 1.37% | 1.23% | 1.19% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-----------------|--------|--------|--------|--------|--------|
| Targe t A >= | 73.10% | 75.84% | 76.95% | 79.69% | 80.81% |
| Targe t B <= | 6.50% | 6.50% | 6.00% | 6.00% | 6.00% |
| Targe t C <= | 1.60% | 1.50% | 1.40% | 1.30% | 1.15% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

Prepopulated Data

| Source | Date | Description | Data |
|---|------------|--|--------|
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) O7/06/2022 | | Total number of children with IEPs aged 5 (kindergarten) through 21 | 65,982 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 49,310 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 4,272 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools | 505 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities | 138 |
| SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/06/2022 | c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements | 37 |

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 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---|---|--|------------------|--------------------|------------------|------------|-------------|
| A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day | 49,310 | 65,982 | 73.51% | 73.10% | 74.73% | Met target | No Slippage |
| B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day | 4,272 | 65,982 | 6.72% | 6.50% | 6.47% | Met target | No Slippage |
| C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 680 | 65,982 | 1.19% | 1.60% | 1.03% | Met target | No Slippage |

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data - 6A. 6B

| Part | FFY | 2016 | 2017 | 2018 | 2019 | 2020 |
|------|-----------|--------|--------|--------|--------|--------|
| Α | Target >= | 43.00% | 44.00% | 45.00% | 45.00% | 47.49% |
| Α | Data | 33.58% | 32.61% | 32.36% | 33.23% | 47.49% |
| В | Target <= | 6.00% | 5.00% | 4.00% | 4.00% | 4.41% |
| В | Data | 6.42% | 5.68% | 5.32% | 3.64% | 4.41% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 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 | 2021 | 2022 | 2023 | 2024 | 2025 |
|-------------|--------|--------|--------|--------|--------|
| Target A >= | 50.01% | 52.53% | 55.05% | 57.57% | 60.10% |
| Target B <= | 4.12% | 3.84% | 3.55% | 3.27% | 2.98% |

Inclusive Targets - 6C

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 | |
|-------------|-------|-------|-------|-------|-------|--|
| Target C <= | 2.00% | 2.00% | 2.00% | 1.75% | 1.50% | |

Prepopulated Data

Data Source:

SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/06/2022

| Description | 3 | 4 | 5 | 3 through 5 - Total |
|--|-------|-------|-----|---------------------|
| Total number of children with IEPs | 1,441 | 2,194 | 579 | 4,214 |
| 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 | 762 | 1,039 | 213 | 2,014 |
| b1. Number of children attending separate special education class | 80 | 70 | 17 | 167 |
| b2. Number of children attending separate school | 1 | 2 | 2 | 5 |
| b3. Number of children attending residential facility | 0 | 0 | 0 | 0 |
| c1. Number of children receiving special education and related services in the home | 28 | 31 | 8 | 67 |

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 2021 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 2020 Data | FFY 2021 Target | FFY 2021 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 | 2,014 | 4,214 | 47.49% | 50.01% | 47.79% | Did not meet target | No Slippage |
| B. Separate special education class, separate school or residential facility | 172 | 4,214 | 4.41% | 4.12% | 4.08% | Met target | No Slippage |
| C. Home | 67 | 4,214 | 1.68% | 2.00% | 1.59% | Met target | No Slippage |

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:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

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

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

| Part | Baseline | FFY | 2016 | 2017 | 2018 | 2019 | 2020 |
|------|----------|-----------|--------|--------|--------|--------|--------|
| A1 | 2008 | Target >= | 65.00% | 66.00% | 67.00% | 67.00% | 61.50% |
| A1 | 66.25% | Data | 63.03% | 65.06% | 55.92% | 59.01% | 62.35% |

| A2 | 2008 | Target >= | 58.00% | 59.00% | 60.00% | 60.00% | 50.00% |
|----|--------|-----------|--------|--------|--------|--------|--------|
| A2 | 53.54% | Data | 56.72% | 57.60% | 54.33% | 50.95% | 55.83% |
| B1 | 2008 | Target >= | 73.00% | 74.00% | 75.00% | 75.00% | 68.00% |
| B1 | 73.97% | Data | 71.77% | 70.83% | 65.00% | 63.56% | 68.78% |
| B2 | 2008 | Target >= | 33.00% | 34.50% | 36.00% | 36.00% | 33.00% |
| B2 | 34.92% | Data | 32.23% | 37.21% | 33.17% | 25.74% | 33.77% |
| C1 | 2008 | Target >= | 63.00% | 64.00% | 65.00% | 65.00% | 60.00% |
| C1 | 56.67% | Data | 59.19% | 59.27% | 58.22% | 56.49% | 60.81% |
| C2 | 2008 | Target >= | 65.00% | 66.00% | 67.00% | 67.00% | 60.00% |
| C2 | 54.98% | Data | 62.80% | 63.24% | 61.29% | 59.74% | 60.77% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-----------------|--------|--------|--------|--------|--------|
| Target A1 >= | 62.50% | 63.50% | 64.50% | 65.50% | 66.50% |
| Target A2 >= | 51.00% | 52.00% | 53.00% | 54.00% | 55.00% |
| Target B1 >= | 69.00% | 70.00% | 71.50% | 73.00% | 74.00% |
| Target B2 >= | 33.50% | 34.00% | 34.50% | 35.00% | 35.50% |
| Target C1 >= | 60.50% | 61.00% | 61.50% | 62.00% | 62.50% |
| Target C2 >= | 60.50% | 61.00% | 61.50% | 62.00% | 62.50% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

FFY 2021 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

2,319

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 | 66 | 2.85% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 702 | 30.27% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 343 | 14.79% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 762 | 32.86% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 446 | 19.23% |

| Outcome A | Numerator | Denominator | FFY 2020 Data | FFY 2021 Target | FFY 2021 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) | 1,105 | 1,873 | 62.35% | 62.50% | 59.00% | 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) | 1,208 | 2,319 | 55.83% | 51.00% | 52.09% | 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 | 35 | 1.51% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 732 | 31.57% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 773 | 33.33% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 727 | 31.35% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 52 | 2.24% |

| Outcome B | Numerator | Denominator | FFY 2020 Data | FFY 2021 Target | FFY 2021 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) | 1,500 | 2,267 | 68.78% | 69.00% | 66.17% | Did not meet target | Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. Calculation: (d+e)/(a+b+c+d+e) | 779 | 2,319 | 33.77% | 33.50% | 33.59% | 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 | 64 | 2.76% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 666 | 28.72% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 240 | 10.35% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 743 | 32.04% |

| Outcome C Progress Category | Number of Children | Percentage of Children |
|---|--------------------|---------------------------|
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 606 | 26.13% |

| Outcome C | Numerator | Denominator | FFY 2020 Data | FFY 2021 Target | FFY 2021 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) | 983 | 1,713 | 60.81% | 60.50% | 57.38% | 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) | 1,349 | 2,319 | 60.77% | 60.50% | 58.17% | Did not meet target | Slippage |

| Part | Reasons for slippage, if applicable |
|------------|---|
| A 1 | The State attributes slippage to interrupted and inconsistent service delivery models from 2019-2020 to 2021-2022 as a result of the COVID-19 pandemic. |
| B1 | The State attributes slippage to interrupted and inconsistent service delivery models from 2019-2020 to 2021-2022 as a result of the COVID-19 pandemic. |
| C1 | The State attributes slippage to interrupted and inconsistent service delivery models from 2019-2020 to 2021-2022 as a result of the COVID-19 pandemic. |
| C2 | The State attributes slippage to interrupted and inconsistent service delivery models from 2019-2020 to 2021-2022 as a result of the COVID-19 pandemic. |

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

YES

| Sampling Question | Yes / No |
|--------------------|----------|
| Was sampling used? | NO |

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

YES

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

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 data are gathered upon determination of eligibility for special education services. The ECO entry data for the Comparison to Peers are collected as part of the development of the Initial IEP and the ECO exit data for Comparison to Peers and Progress data are collected when the child exits or no longer receives early childhood special education services. These data are reported on the ECO Summary form that was adapted from the Child Outcomes Summary (COS) form developed by the National Early Child Outcomes Center. 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 IEP Team determines the methods for collecting data based upon the unique needs of the child. The test/assessment instruments may include adaptive and developmental scales and curriculum-based, criterionreferenced and norm-referenced assessments. The ECO Summary form 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 Summary form summarizes the analysis of a child's progress based on a triangulation of data such as progress on IEP goals and levels of independence in performance, regardless of the areas addressed on a child's IEP. The ECO Summary form includes a seven-level outcome rating scale that summarizes each child's level of functioning in each of the three ECO areas in relation to same-aged peers. A rating of six or seven indicates the ECO area was achieved at an age-appropriate level across a variety of settings and situations, and a rating of one through five indicates the child's functioning was below age-appropriate skills expected of a child his or her age. 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 on the ECO Summary form.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

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- 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 2 for additional instructions on sampling.)

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

Provide the actual numbers used in the calculation.

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, 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

| o maioator bata | |
|---|----------|
| Question | Yes / No |
| Do you use a separate data collection methodology for preschool children? | NO |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

Historical Data

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

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-------------|--------|--------|--------|--------|--------|
| Target A >= | 89.80% | 90.96% | 92.12% | 93.38% | 94.44% |
| Target B >= | 87.54% | 89.40% | 91.26% | 93.12% | 95.00% |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---------------|--|--|------------------|-----------------|------------------|------------------------|-------------|
| Preschool | 255 | 279 | 88.64% | 89.80% | 91.40% | Met target | No Slippage |
| School age | 2,513 | 3,073 | 85.68% | 87.54% | 81.78% | Did not meet target | Slippage |

Provide reasons for School Age slippage, if applicable

The nature of the satisfaction survey made it difficult to determine whether slippage is due to true decreases in satisfaction or was a natural variance in data. As a result, the State is reexamining its collection of Indicator 8 data, including the survey items.

The number of parents to whom the surveys were distributed.

70,196

Percentage of respondent parents

4.78%

Response Rate

| FFY | 2020 | 2021 |
|---------------|-------|-------|
| Response Rate | 5.81% | 4.78% |

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

Beginning with the survey that will be completed in the spring of 2023, the State will be using its IEP/IFSP data system to send and track the parent survey. The surveys will be sent directly to parents via email. The Part B Data Manager will be 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 African American or Hispanic, and parents of children who are ages 3 and 4), then the Data Manager can send targeted reminder emails to those groups to try to increase the number who are responding.

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 8 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. This survey instrument is optional for LEAs to administer - thus, there may be some parents that did not get the opportunity to respond. Beginning in spring 2023, the survey will be sent directly to all parents in the IEP/IFSP Parent Portal, so that everyone has the opportunity to submit feedback. Parents of students with IEPs made up 12.13% of the total survey responses, which is slightly lower than the statewide IEP identification rate of 12.94% of students in preschool-grade 12. The State's analysis of response rates did not indicate nonresponse bias.

Include the State's analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services. States must include race/ethnicity in their analysis. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

The data of the children for which parents responded were not entirely representative of the demographics of the children in the special education population. An analysis of the data indicates that by race or ethnicity, parents who responded on behalf of children of African American and Hispanic or Latino were underrepresented in the results, while parents who responded on behalf of children who are White were overrepresented. All other races/ethnicities were within +/-3 percentage points in the difference between the responses and the population, the state's chosen metric for determining representation.

See the data below:

Population of Children by Race/Ethnicity

Asian: 1.39%

African American: 9.34%

Hispanic or Latino: 12.17% Two or More Races: 5.84%

American Indian or Alaska Native: 0.58% Native Hawaiian or Other Pacific Islander: 0.34%

White 70.34%

Responses of Parents on Behalf of Children by Race/Ethnicity:

Asian: 1.17%

African American: 3.09% Hispanic or Latino: 4.75% Two or More Races: 6.91%

American Indian or Alaska Native: 0.42% Native Hawaiian or Other Pacific Islander: 0.12%

White: 83.54%

By age, parents who responded on behalf of students ages 6-21 were within -1.53 to 3.93 percentage points of the population for all ages. Parents of children who are 9 years old were the highest overrepresentation at 3.93 percentage points.

For parents who responded on behalf of children ages 3-5, parents of children ages 3 and 4 were underrpresented (-12.23 and -8.21, respectively) and parents of children age 5 were overrepresented (20.44).

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 that are African American and Hispanic or Latino

*Parents of students that are age 3 and 4

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

NO

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

As described previously, lowa's new IEP/IFSP data system will allow for the tracking of responses by the demographics of the child, so that additional reminders and follow up notifications can be sent to those parents specifically, if it can be seen that certain groups are responding at lesser rates.

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 who the parents respond 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.

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

Response to actions required in FFY 2020 SPP/APR

The data of the children for which parents were responding were not entirely representative of the demographics of the children in the special education population. An analysis of the data indicates that by race or ethnicity, parents responding on behalf of children of African American and Hispanic or Latino are underrepresented in the results, while parents responding on behalf of children who are White are overrepresented. All other races/ethnicities were within +/-3 percentage points in the difference between the responses and the population, the state's chosen metric for determining representation. Iowa will be moving the parent survey into its IEP/IFSP data system and parent portal, beginning with the survey completed in the spring of 2023. This data system will allow for the tracking of responses by the demographics of the child, so that additional reminders and follow up notifications can be sent to those parents specifically, if it can be seen that certain groups are responding at lesser rates.

8 - OSEP Response

The State did not analyze the response rate to identify potential nonresponse bias or identify steps taken to reduce any identified bias to promote response from parents of children receiving special education services in the State, as required by the Measurement Table.

8 - 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.

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.

Massuramant

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|--------|-------|-------|-------|-------|-------|
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.31% | 0.00% | 0.00% | 0.00% | 0.00% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|--------|------|------|------|------|------|
| Target | 0% | 0% | 0% | 0% | 0% |

FFY 2021 SPP/APR Data

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

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 | Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification | Number of districts that met the State's minimum n and/or cell size | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|--|---|--|------------------|-----------------|------------------|------------|-------------|
| 2 | 0 | 318 | 0.00% | 0% | 0.00% | Met target | No Slippage |

Were all races and ethnicities included in the review?

YES

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

The 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.).

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

| 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 2020

| Year Findings of Noncompliance Were Identified | Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 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.

Massuramant

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

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

Based on its review of the 618 data for 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, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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

OSEP notes that this indicator is not applicable.

10 - Required Actions

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.

Massuramant

a. # of children for whom parental consent to evaluate was received.

b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

Instructions

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|--------|--------|--------|--------|--------|--------|
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.28% | 99.00% | 98.48% | 89.00% | 96.55% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|--------|------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% | 100% |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---|--|---------------|-----------------|------------------|---------------------|-------------|
| 13,909 | 13,456 | 96.55% | 100% | 96.74% | Did not meet target | No Slippage |

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

453

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 60-day timeline when meeting was held: 1-155

Reasons for delays:

Child's hospitalization/long-term illness - 13

Natural disaster - 5

No valid reason - 148

Parent Failure or Refusal - 200

Public Health Emergency - COVID-19 - 87

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)

lowa uses an IEP data system with real-time data. At the time that lowa pulls the data for Indicator 11, 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 an initial evaluation was held beyond the 60-day timeline, the correction of having the evaluation has already been done. This is in part because the intermediary agencies in lowa (Area Education Agencies) 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 noncompliant IEPs from being created, and uses a timeline system of reminders to further reduce the occurrences of delays beyond 60-days.

Correction of Findings of Noncompliance Identified in FFY 2020

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected |
|---|---|---|---|
| 399 | 399 | 0 | 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 the state database designed to track special education evaluation and placement data. These data are used to determine the extent to which 60-day timelines are being met statewide, and which AEAs had or had not met the regulatory requirement of 100% compliance of evaluations completed within a 60-day timeline. The State continued to emphasize the use of verification reports to help meet the timelines. These data were also included in data reviews conducted on-site with AEAs during the most recent cycle of monitoring.

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 (a) confirmed that 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) confirmed that each AEA that was performing below 100 percent compliance during the prior reporting period is correctly implementing 34 CFR §300.301(c)(1).

Correction of Findings of Noncompliance Identified Prior to FFY 2020

| Year Findings of Noncompliance Were Identified | Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR | Findings of Noncompliance Verified as Corrected | Findings Not Yet Verified as Corrected |
|--|--|--|---|
| | | | |
| | | | |
| | | | |

11 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2020 SPP/APR

The State used data from the state database designed to track special education evaluation and placement data. These data are used to determine the extent to which 60-day timelines are being met statewide, and which AEAs had or had not met the regulatory requirement of 100% compliance of evaluations completed within a 60-day timeline. The State continued to emphasize the use of verification reports to help meet the timelines. These data were also included in data reviews conducted on-site with AEAs during the most recent cycle of monitoring.

The State verified the correction of noncompliance identified during FFY 2020 through a data review that (a) confirmed that every child for whom consent

The State verified the correction of noncompliance identified during FFY 2020 through a data review that (a) confirmed that 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) confirmed that each AEA that was performing below 100 percent compliance during the prior reporting period is correctly implementing 34 CFR §300.301(c)(1).

11 - OSEP Response

11 - 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.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

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

Targets must be 100%

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|--------|--------|--------|--------|--------|--------|
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.65% | 99.48% | 99.54% | 88.84% | 94.43% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|--------|------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% | 100% |

FFY 2021 SPP/APR Data

| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 1,340 |
|---|-------|
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 84 |

| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 1,218 |
|---|-------|
| 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. | 9 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 9 |
| 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 2020 Data | FFY 2021 Target | FFY 2021 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. | 1,218 | 1,238 | 94.43% | 100% | 98.38% | Did not meet target | No Slippage |

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

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:

Public Health Emergency - COVID-19: 2

No valid reason: 18

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. The data reflect all children in Iowa who were referred by Part C prior to age three for determination of eligibility for an IEP, during the current reporting period. The data were entered into the database by trained personnel.

Provide additional information about this indicator (optional)

lowa uses an IEP data system with real-time data. At the time that lowa pulls the data for Indicator 12, 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 intermediary agencies in Iowa (Area Education Agencies) 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 noncompliant IEPs 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 2020

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected |
|---|---|---|---|
| 60 | 60 | 0 | 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 the state database to determine the extent to which early childhood transition requirements were being met in the state, and to determine which AEAs had and had not met 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 SEA continued to promote the use of verification reports in the state's database that alert AEAs to transition requirements. These data were also included in data reviews conducted on-site with AEAs during the most recent cycle of monitoring.

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 (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 34 CFR §300.124(b).

Correction of Findings of Noncompliance Identified Prior to FFY 2020

| Year Findings of Noncompliance Were Identified | Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR | Findings of Noncompliance Verified as Corrected | Findings Not Yet Verified as Corrected |
|--|--|--|---|
| | | | |
| | | | |
| | | | |

12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining six uncorrected findings of noncompliance identified in FFY 2019 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 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Response to actions required in FFY 2020 SPP/APR

The State verified the correction of noncompliance identified during FFY 2020 through a data review 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 34 CFR §300.124(b).

12 - OSEP Response

12 - 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.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), 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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|--------|--------|--------|--------|--------|--------|
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 61.69% | 63.86% | 65.88% | 68.61% | 68.54% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|--------|------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% | 100% |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---|---|---------------|-----------------|------------------|------------|-------------|
| 86 | 86 | 68.54% | 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 began collecting this information through its IEP/IFSP database, ACHIEVE, in 2021-2022. The original launch date of the new system would have resulted in the majority of IEPs of transition-age students being in ACHIEVE during the reporting period. Unfortunately, the launch was delayed until the end of the reporting time frame, so that only 86 IEPs of transition age students were entered into ACHIEVE. The ACHIEVE data system requires that the components of Indicator 13 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 13.

| 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)

Because of the delayed launch of ACHIEVE, there were far fewer secondary IEPs 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 with secondary transition IEPs from the previous year - data will be at normal levels for the next reporting year.

Correction of Findings of Noncompliance Identified in FFY 2020

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected | |
|---|---|---|---|--|
| 1,815 | 1,815 | 0 | 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

Verification of correct implementation of the regulatory requirement was done by analyzing updated data in a sample of IEPs subsequent to the time during which the noncompliance was found, but within the one-year correction period. While the State verified 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 2 1 1.604]

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 process that (a) confirmed that every instance of child-specific noncompliance was subsequently corrected on the IEP, and (b) confirmed that each district that was performing below 100% compliance during the prior reporting period was correctly implementing 34 CFR §§300.320(b) and 300.321(b). Verification of correction of individual noncompliance occurred in the lowa's System to Achieve Results (ISTAR) monitoring system. First, the district verified that for each child for whom the transition requirements were not met, all required corrections had been made on the IEP. Then the Area Education Agency (AEA) verified the same information on the IEP. Child specific noncompliance is considered "verified" when both steps have been completed.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

| Year Findings of Noncompliance Were Identified | Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR | Findings of Noncompliance Verified as Corrected | Findings Not Yet Verified as Corrected |
|--|--|--|---|
| | | | |
| | | | |
| | | | |

13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining 1,815 uncorrected findings of noncompliance identified in FFY 2019 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 2020 and each LEA with remaining noncompliance identified in FFY 2019: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

Response to actions required in FFY 2020 SPP/APR

The State verified the correction of noncompliance identified during FFY 2019 and FFY 2020 through a process that (a) confirmed that every instance of child-specific noncompliance was subsequently corrected on the IEP, and (b) confirmed that each district that was performing below 100% compliance during the prior reporting period was correctly implementing 34 CFR §§300.320(b) and 300.321(b). Verification of correction of individual noncompliance occurred in the Iowa's System to Achieve Results (ISTAR) monitoring system. First, the district verified that for each child for whom the transition requirements were not met, all required corrections had been made on the IEP. Then the Area Education Agency (AEA) verified the same information on the IEP. Child specific noncompliance is considered "verified" when both steps have been completed.

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 2 for additional instructions on sampling.)

Collect data by September 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. Definitions

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

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

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

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

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

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

II. Data Reporting

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

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

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

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, 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 | 2016 | 2017 | 2018 | 2019 | 2020 |
|---------|----------|-----------|--------|--------|--------|--------|--------|
| А | 2018 | Target >= | 46.00% | 48.00% | 50.00% | 50.00% | 20.24% |
| Α | 20.17% | Data | 18.86% | 18.45% | 20.17% | 17.62% | 16.36% |
| В | 2018 | Target >= | 68.00% | 70.00% | 72.00% | 72.00% | 46.57% |
| В | 57.02% | Data | 60.55% | 55.17% | 57.02% | 42.88% | 43.90% |
| С | 2018 | Target >= | 92.00% | 93.00% | 94.00% | 94.00% | 67.48% |
| С | 66.59% | Data | 72.69% | 65.82% | 66.59% | 63.57% | 62.52% |

FFY 2020 Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|----------------|--------|--------|--------|--------|--------|
| Target A >= | 22.86% | 25.48% | 28.10% | 30.72% | 33.34% |
| Target B >= | 50.26% | 53.95% | 57.64% | 61.33% | 65.00% |
| Target C >= | 71.39% | 75.30% | 79.21% | 83.12% | 87.03% |

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

FFY 2021 SPP/APR Data

| Total number of targeted youth in the sample or census | 4,019 |
|--|---------|
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 4,019 |
| Response Rate | 100.00% |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 648 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 1,075 |
| 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) | 11 |
| 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). | 612 |

| 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|--|----------------------------------|--|---------------|--------------------|---------------|------------------------|-------------|
| A. Enrolled in higher education (1) | 648 | 4,019 | 16.36% | 22.86% | 16.12% | Did not meet target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 1,723 | 4,019 | 43.90% | 50.26% | 42.87% | Did not meet target | 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) | 2,346 | 4,019 | 62.52% | 71.39% | 58.37% | Did not meet target | Slippage |

| Part | Reasons for slippage, if applicable | | | |
|------|--|--|--|--|
| В | The State attributes slippage to annual fluctuations in the data. | | | |
| С | The State attributes slippage to levels of any employment not yet returned to pre-pandemic levels, both in employment rates and opportunities. | | | |

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 | 2020 | 2021 |
|---------------|---------|---------|
| Response Rate | 100.00% | 100.00% |

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 2020-2021 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. For the reporting period, 100% of students in the exit file were found in the administrative data sets. 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.

The match rate for the 2020-2021 data was 100%. Given that all students in the population were found in one or both of the administrative data sets, no analysis for nonresponse bias was necessary.

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 all students in the population were found in one or both of the administrative data sets, 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 the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

Given that all students in the population were found in one or both of the administrative data sets, no analysis for representativeness was necessary.

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

Provide additional information about this indicator (optional)

During the data analysis process, an error occurred that resulted in some students being counted twice in measure A or measure B and in measure C. This was found after the data were submitted in the SPP/APR. The correct data have been resubmitted.

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

NO

| Source | Date | Description | Data |
|--|------------|--|------|
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1 Number of resolution sessions | 8 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/02/2022 | 3.1(a) Number resolution sessions resolved through settlement agreements | 7 |

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

Targets: Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

Historical Data

| Baseline Year | Baseline Data |
|---------------|---------------|
| 2005 | 100.00% |

| FFY | 2016 | 2017 | 2018 | 2019 | 2020 |
|-----------|--------|--------|---------|--------|-------|
| Target >= | | | | | |
| Data | 80.00% | 66.67% | 100.00% | 60.00% | 0.00% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-----------|------|------|------|------|------|
| Target >= | | | | | |

FFY 2021 SPP/APR Data

| 3.1(a) Number resolutions sessions resolved through settlement agreements | 3.1 Number of resolutions sessions | FFY 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|---|------------------------------------|------------------|-----------------|---------------|--------|----------|
| 7 | 8 | 0.00% | | 87.50% | N/A | N/A |

Provide additional information about this indicator (optional)

Targets are not required when the number of resolution sessions is than 10 in a year.

15 - Prior FFY Required Actions

None

15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2021. 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 resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

| Source | Date | Description | Data |
|---|------------|---|------|
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1 Mediations held | 5 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/02/2022 | 2.1.b.i Mediations agreements not related to due process complaints | 2 |

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 state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

Historical Data

| Baseline Year | Baseline Data |
|---------------|---------------|
| 2005 | 74.00% |

| FFY | 2016 | 2017 | 2018 | 2019 | 2020 |
|-----------|--------|---------|--------|--------|--------|
| Target >= | 75.00% | 75.00% | 75.00% | 75.00% | 75.00% |
| Data | 85.00% | 100.00% | 87.50% | 88.89% | 66.67% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|-----------|------|------|------|------|------|
| Target >= | | | | | |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|--|--|-------------------------------------|------------------|-----------------|------------------|--------|----------|
| 0 | 2 | 5 | 66.67% | | 40.00% | N/A | N/A |

Provide additional information about this indicator (optional)

Targets are not required when the number of mediations is less than 10 in a year.

16 - Prior FFY Required Actions

None

16 - OSEP Response

The State reported fewer than ten mediations held in FFY 2021. 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) for Children with Disabilities.

<u>Targets:</u> In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2021 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 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2021 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 2021 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., Feb 2022). 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 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023.).

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023)) 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)

NO

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

YES

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

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% |

Targets

| FFY | 2021 | 2022 | 2023 | 2024 | 2025 |
|---------|--------|--------|--------|--------|--------|
| Target> | 50.00% | 49.00% | 48.00% | 47.00% | 46.00% |

FFY 2021 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 2020 Data | FFY 2021 Target | FFY 2021 Data | Status | Slippage |
|--|--|---------------|--------------------|------------------|------------|----------------|
| 608 | 1,352 | 50.56% | 50.00% | 44.97% | Met target | No Slippage |

Provide the data source for the FFY 2021 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 is 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, Iowa Department of Education (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)

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)

NΟ

Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/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 six 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. The two structures established in FFY20 for the effective delivery of technical assistance continued to meet and ensure consistency and continuity of statewide implementation of professional learning materials. The IDEA Support Network consists of AEA administrators responsible for professional learning in each of 9 AEAs and lowa Department of Education (DE) program consultants. 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. The second structure, the SDI Literacy Implementation Network, continued to ensure 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).

A third infrastructure component was added in FFY 2021. This component is 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 packages for each content area (PS, K-6, SD) have been finalized. Professional learning leads (PLLs) have been identified and trained in each of the nine area education agencies (AEAs). 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 was 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 <u>new</u> (newly identified) infrastructure improvement strategies during the reporting period? (yes/no) YES

Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

A third infrastructure component was added in FFY 2021. This component is 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. The short-term outcomes achieved by the PLGC were the development of a statewide website for professional learning trainers and the launch of statewide training regarding IEP development and the SDI Framework.

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

Strategy 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. More AEAs will 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. Working in partnership with AEA leadership, additional PLLs will be trained to assist in the delivery of high-quality professional learning to districts as the scale-up of SDI implementation continues.

Continued next steps: 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. c. Use of professional learning materials and supports for instructional practices and system coaches across the system.

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

Implementation of the SDI project has focused on the following practices: (a) establishing a technical assistance system to effectively implement and support personnel preparation and professional development in the area of SDI; (b) building capacity of lowa's coaching network so that network participants have the capacity to train, coach, and support delivery of SDI with integrity; and (c) delivering high-quality professional development so that SDI is implemented with fidelity and effectively improves learning for a wide range of learners. As we move forward with the scale-up of SDI professional learning, coaching, and technical assistance to additional districts / schools, the focus continues to be on implementation fidelity. As professional learning occurs across the AEAs, it is expected that the materials will be used as designed with teachers as they are brought into the learning. It is expected that coaching will occur at least monthly. The SDI Literacy Implementation Network monitors the fidelity of implementation to ensure that there is consistency in delivery and coaching across the state. Data from the initial group of schools who engage in SDI professional learning and are supported by regular coaching indicated significant change in teacher practice, which also had a positive impact on student outcomes. We believe our plan for scale-up will have 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 supports. See above description of infrastructure strategies.

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 supports.

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

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 supports that teachers need to implement the learning.

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 supports 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.

N/A

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

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. c. Use of professional learning materials and supports 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.

Continue to support AEAs in implementing the SSIP, the current evaluation data sources are identified to be most relevant to SSIP and being collected systematically, they are feasible to track, report and use for evaluation of implementation. Those evaluation data evaluated the progress the AEAs has made on implementing SSIP and indicated that the target of implementation for this year was met.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The state had a number of opportunities throughout the year for stakeholder input on updates and revisions to State targets, as needed, as well as input on the progress of the SSIP. Overall input to the APR includes a review of historical data, baselines, and previous targets, including the SiMr, and updated data. Discussions occur over time regarding the current state of data, whether outcomes are meeting targets, and what activities may contribute to decreases or increases in results. Stakeholder groups included the Area Education Agencies (AEA) special education directors, lowa Department of Education (Department) special education staff and lowa's Special Education Advisory Panel (SEAP).

SEAP is the ultimate mechanism for stakeholder recommendations on targets in the SPP, including revisions. SEAP meets six times a year and has organized those meetings so that discussion regarding indicators occurs throughout the year. IDE staff with responsibility for specific indicators work with relevant stakeholders to develop, implement and refine improvement activities. Depending on the indicator, these groups meet monthly or quarterly. Input and feedback from the stakeholders implementing improvement activities is shared by the State to SEAP for final consideration. Members of SEAP 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 and other state and community organizations.

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

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.

None

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

N/A

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

N/A

Provide additional information about this indicator (optional).

lowa has used a threshold setting for the SSIP targets, so that the data should be less than or equal to the target set. Per instructions from PSC, the targets and current year of data are submitted as intended, and the display will be updated by the technical team after submission.

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.

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

Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Barbara Guy

Title:

State Director of Special Education

Email:

barbara.guy@iowa.gov

Phone:

5156894073

Submitted on:

04/27/23 5:33:05 PM

Determination Enclosures

RDA Matrix

Iowa

2023 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination²

| Percentage (%) | Determination |
|----------------|------------------|
| 72.92% | Needs Assistance |

Results and Compliance Overall Scoring

| | Total Points Available | Points Earned | Score (%) |
|------------|------------------------|---------------|-----------|
| Results | 24 | 15 | 62.50% |
| Compliance | 18 | 15 | 83.33% |

2023 Part B Results Matrix

Reading Assessment Elements

| Reading Assessment Elements | Performance (%) | Score |
|---|-----------------|-------|
| Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments | 94% | 2 |
| Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments | 91% | 2 |
| Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress | 17% | 0 |
| Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress | 94% | 1 |
| Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress | 23% | 0 |
| Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress | 94% | 1 |

Math Assessment Elements

| Math Assessment Elements | Performance (%) | Score |
|---|-----------------|-------|
| Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments | 94% | 2 |
| Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments | 91% | 2 |
| Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress | 41% | 1 |
| Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress | 92% | 1 |
| Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress | 20% | 1 |
| Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress | 91% | 1 |

² 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 2023: Part B."

Exiting Data Elements

| Exiting Data Elements | Performance (%) | Score |
|---|-----------------|-------|
| Percentage of Children with Disabilities who Dropped Out | 21 | 0 |
| Percentage of Children with Disabilities who Graduated with a Regular High School Diploma** | 77 | 1 |

^{**}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."

2023 Part B Compliance Matrix

| Part B Compliance Indicator ³ | Performance (%) | Full Correction of Findings of Noncompliance Identified in FFY 2020 | 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. | NVR | N/A | 0 |
| 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 | 96.74% | NO | 2 |
| Indicator 12: IEP developed and implemented by third birthday | 98.38% | NO | 2 |
| Indicator 13: Secondary transition | 100.00% | YES | 2 |
| Timely and Accurate State-Reported Data | 90.76% | | 1 |
| Timely State Complaint Decisions | 100.00% | | 2 |
| Timely Due Process Hearing Decisions | 100.00% | | 2 |
| Longstanding Noncompliance | | | 2 |
| Specific Conditions | None | | |
| Uncorrected identified noncompliance | None | | |

³ The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/2023_Part-B_SPP-APR Measurement Table.pdf

Data Rubric Iowa

FFY 2021 APR⁴

| | 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 | 0 | 0 | | | | |
| 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 | | | | |
| | Subtotal | 19 | | | | |
| APR Score Calculation | Timely Submission Points - If the FFY 2021 APR was submitted ontime, place the number 5 in the cell on the right. | 5 | | | | |
| | Grand Total - (Sum of Subtotal and Timely Submission Points) = | 24 | | | | |

⁴ 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 Data⁵ | | |
|---|--------|---------------|--|-------|
| Table | Timely | Complete Data | Passed Edit Check | Total |
| Child Count/ Ed Envs Due Date: 4/6/22 | 1 | 0 | 1 | 2 |
| Personnel Due Date: 11/2/22 | 1 | 1 | 1 | 3 |
| Exiting Due Date: 11/2/22 | 1 | 0 | 1 | 2 |
| Discipline Due Date: 11/2/22 | 1 | 0 | 1 | 2 |
| State Assessment Due Date: 12/21/2022 | 1 | 1 | 1 | 3 |
| Dispute Resolution Due Date: 11/2/22 | 1 | 1 | 1 | 3 |
| MOE/CEIS Due Date: 5/4/22 | 1 | 1 | 1 | 3 |
| | | | Subtotal | 18 |
| 618 Score Calculation | | | Grand Total (Subtotal X 1.23809524) = | 22.29 |

⁵ 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 | 24 |
| B. 618 Grand Total | 22.29 |
| C. APR Grand Total (A) + 618 Grand Total (B) = | 46.29 |
| 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*) = | 0.9076 |
| E. Indicator Score (Subtotal D x 100) = | 90.76 |

*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 2023 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 | 1st Wednesday in April |
| Part B Personnel | C070, C099, C112 | 1 st Wednesday in November |
| Part B Exiting | C009 | 1 st Wednesday in November |
| Part B Discipline | C005, C006, C007, C088, C143, C144 | 1 st Wednesday in November |
| Part B Assessment | C175, C178, C185, C188 | Wednesday in the 3 rd week of December (aligned with CSPR data due date) |
| Part B Dispute Resolution | Part B Dispute Resolution Survey in EMAPS | 1 st Wednesday in November |
| Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services | Part B MOE Reduction and CEIS Survey in EMAPS | 1 st Wednesday in May |

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

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

Dispute Resolution



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 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

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