

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2022**

Alabama



PART B DUE February 1, 2024

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

Additional information related to data collection and reporting

Number of Districts in your State/Territory during reporting year

149

General Supervision System:

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

SPP/APR: The State Performance Plan/Annual Performance Report (SPP/APR) focuses on a balance between compliance and improving results for children and youth with individualized education programs (IEPs). As needed, with stakeholder input, review and revisions are made to the SPP/APR, including targets, to ensure that all are designed to be specific, measurable, achievable, realistic, and timely. Annual performance on the SPP/APR indicators is essential to the accountability system. Annual public reporting on the SPP/APR is accomplished by posting on the Alabama State Department of Education (ALSDE) website along with the OSEP State Determination, through dissemination to the Special Education Advisory Panel (SEAP). The state also reports annually to the public on the performance of local education agencies (LEAs) compared to the state targets via the LEA Performance Profiles, which are posted on the ALSDE website no later than 120 days after submission of the APR each year.

Policies, Procedures, and Practices: The Alabama Administrative Code (AAC) is the policy document that sets forth the state rules and requirements for implementing Part B of the IDEA. The AAC is updated as needed and undergoes State Board of Education and broad stakeholders review to ensure compliance with federal and state regulations. It is made available for public comment and then posted on the ALSDE website; copies are provided to LEA staff at meetings throughout the year. Mastering the Maze is the procedural document that assists LEAs and service providers and provides guidance to complete the required forms through detailed explanations of each form required for the provision of FAPE to all students with IEPs in Alabama, ages 3-21. Procedural compliance with state and federal requirements is monitored through the ALSDE, Special Education Services (SES) Section, integrated monitoring process.

Data Processes and Results: To ensure the data systems used for official reporting purposes by the ALSDE and LEAs are valid, error-free, and accurate, the state has multi-level validations in place. These include school- and system-level validations, state-level collection processes, and state-level validation processes. The ALSDE has implemented an approval process to ensure timely, complete, and accurate data submissions for reporting purposes. The SES provides LEAs with data analysis and planning tools utilizing the LEA Performance Profile to examine state and local data. The goal is to assist LEAs in identifying barriers to improving performance on all SPP/APR indicators and to support sustained improvement.

Integrated Monitoring Activities: The SES Section participates in a cyclical monitoring process (i.e., a five-year cycle) that is conducted through self-assessment or onsite activities facilitated by the SES. The monitoring process provides an effective system of general supervision to support practices that improve educational results and functional outcomes; uses multiple methods in identifying and correcting noncompliance within one year; and uses mechanisms (e.g., tiered monitoring) to encourage and support improvement and enforce compliance. The specific monitoring activities are linked to systemic change and utilize integrated, continuous feedback and support within a risk-based framework. Activities are determined and organized in the priority areas identified in OSEP QA 23-01 Integrated Monitoring Activities. Cyclical monitoring begins with reviewing the LEA's data to determine the intensity of monitoring and the level of support an LEA may receive. When warranted, the SES may conduct monitoring activities due to a credible allegation that may occur outside the five-year monitoring cycle. When the SES identifies noncompliance with IDEA through monitoring activities, the LEA receives a written finding(s) of noncompliance within a three-month period of the finding. As soon as possible, but no later than one year from notification, the LEA is required to correct any instances of noncompliance for individual students; review and revise (if applicable) policies, procedures, or practices; and demonstrate correct implementation of the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, consistent with OSEP QA 23-01. The SES provides ongoing support to ensure the implementation of IDEA requirements. If there is a failure to demonstrate correction of noncompliance, the SES notifies the LEA of sanctions and enforcement actions, such as providing technical assistance tailored to address an LEA's area(s) of need, increasing reporting requirements when not corrected, conducting additional onsite monitoring; imposing special conditions on an LEA's IDEA subgrant award(s); and directing the use of or withholding an LEA's IDEA funds.

Targeted Technical Assistance and Professional Development: The ALSDE developed a plan that uses the SPP/APR indicators as a system of improvement to determine the short-term, intermediate, and long-term results of the department's improvement activities. This plan will utilize a variety of evaluation methodologies, including surveys, focus groups, and triangulation of data from extant sources. The results direct the technical assistance and professional development provided to LEAs. To ensure that staff continues to build capacity, the SES regularly participates in technical assistance calls/webinars and meetings provided by the OSEP and the funded Technical Assistance and Dissemination (TA&D) Centers.

Dispute Resolution: Alabama's dispute resolution process is linked to its system of general supervision to ensure effective oversight/implementation of the IDEA Part B requirements that improve results for students with IEPs and their families. The system of dispute resolution includes facilitated IEPs, mediations, and written state and due process complaints. The SES tracks timelines, investigates formal written complaints and due process hearing requests, and tracks corrective actions that may result from the findings. The AAC details the state policy and procedures for the formal dispute resolution processes. Training is conducted for the SES, mediators, and impartial due process hearing officers. The dispute resolution data are reviewed to determine if patterns or trends exist to inform issues that may be occurring that impact the provision of FAPE for students. These data inform both onsite/off-site monitoring activities, as appropriate.

Responsible Fiscal Management System: Alabama's fiscal management requirements are based on the IDEA and the U.S. Education Department General Administrative Regulations (EDGAR), which are the general administration requirements applied to all federal funds and the state's general supervision requirements under the IDEA. The ALSDE has established policies and procedures for calculating and allocating flow-through funds and reporting and verifying the use of IDEA Part B flow-through funds. The ALSDE follows required procurement procedures when using state set-aside funds. As part of the SES' general supervision system, the SES Fiscal Management Team works closely with the SES Integrated Monitoring Team, the SES Performance & Data Accountability Team, and ALSDE Accounting to assist with monitoring the LEA budgets for allowable costs; monitoring LEAs for maintenance of effort and requiring the LEAs to use 15% of their Part B and preschool budgets if the LEA has been identified as having significant disproportionality in any of the areas listed in the regulations; reviewing time and effort documentation; monitoring contracts that have been developed as part of state set-aside activities; etc. The SES Fiscal Management Team provides technical assistance to the LEAs, SES staff, and other state agencies annually. Staff also provide technical assistance documents and present at state conferences to ensure an accurate understanding of fiscal compliance.

Technical Assistance System:

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

The SES recognizes that a process for delivering technical assistance (TA) to LEAs, families, and other agencies is an integral component of an effective system of general supervision. The SES has developed a process for delivering TA that is directly linked with other components of its general supervision system, including the SPP/APR indicators, to improve both compliance and results. The TA structure is designed according to three types: universal, targeted, and intensive. Moreover, the TA process consists of several delivery options, including onsite, teleconferences, webinars, and through electronic means, such as a learning management system (i.e., Schoology).

Universal TA: The universal type of TA includes mass electronic information dissemination to address identified areas of needed TA. The SES Program Director regularly issues News You Can Use informational topic briefs to provide information and resources via mass e-mail to the LEAs. In addition, the SES developed "one-pagers" to provide information and assistance in multiple areas posted on the ALSDE website and the LiveBinder platform to be accessed by the public and school personnel. Other examples of universal TA include statewide conferences with content designed to address common areas of need (e.g., the Council of Administrators in Special Education (CASE) Fall and Spring Conferences, the Early Intervention and Preschool Conference, the Alabama Educational Technology Conference (AETC), the MEGA Conference (Special Education Strand) conducted each July, the Back-to-School Conference for Special Education Coordinators in preparation for the school year, and Novice Coordinators Meeting conducted monthly for Special Education Coordinators with three years or less of experience serving in their role). Moreover, the SES Section hosts monthly "SES shorts," one-hour webinars, and other regional professional development on topics such as dispute resolution, disproportionate representation, creating compliant IEPs, secondary transition, fiscal management, preschool transition, etc., for LEA staff. Lastly, virtual office hours (e.g., PowerSchool migration, Preschool, Child Count, Dispute Resolution) are held monthly by the SES staff to answer questions and assist LEAs.

Targeted TA: The targeted type of TA consists primarily of regionally provided TA, such as training across the state to address specific areas in both general and special education (e.g., co-teaching and co-planning, behavior). Examples of targeted TA include those delivered in response to needs identified from monitoring data, such as IEP training or secondary transition training. Targeted TA is delivered by the SES staff in each region of the state and attended by personnel from LEAs primarily within that region. Some training efforts, however, are conducted in conjunction with other agencies, such as Alabama's Parent Training and Information (PTI) Center.

Intensive TA: The intensive type of TA is delivered to specific LEAs with needs identified through monitoring, dispute resolution, and/or the special education information system to correct an identified area of non-compliance or to address another training need to improve the provision of FAPE in the least restrictive environment for children with IEPs. Capacity-building activities can be implemented through multiple means, such as coaching, mentoring, direct training, and asynchronous training from ALSDE staff, state and/or regional TA/PD providers, and/or national TA/PD providers. The purpose of intensive TA is to build the capacity of educators to improve outcomes for students with disabilities.

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.

Professional Development (PD) for special education is designed to improve the ability of practitioners to ensure that each child receives a FAPE in the LRE through the appropriate implementation of evidence-based practices that are delivered with fidelity according to the principles of Implementation Science and Adult Learning. Through a network of multiple venues, PD is offered and includes statewide and regional conferences, dissemination of promising practices, online coursework through the IRIS Center, and statewide initiatives, such as the Alabama Reading Initiative (ARI), the Alabama Numeracy Act, and the Alabama Math, Science, and Technology Initiative (AMSTI). Professional Development is also conducted in coordination with state agencies, such as the Alabama Department of Mental Health, the Alabama Department of Rehabilitation Services, Alabama's Early Intervention System, advocacy centers, and state institutions of higher education. Training and PD regarding low-incidence disability areas, behavioral management, discipline, preschool special education, assistive technology, autism spectrum disorders, high-leverage practices, secondary transition, and special education recruitment and retention are provided by content-specific specialists.

The SES has operated a State Personnel Development Grant (SPDG) since approximately 2000. In 2022, a new SPDG was awarded to Alabama. The new SPDG focuses on providing evidence-based professional development in reading as applied to a Multi-Tiered System of Supports (MTSS) in AL-MTSS schools, improving the reading achievement of students in grades 4-8, and expanding transition services for toddlers and elementary, middle, and high school students. For Goal 1, the SPDG will partner with AL-MTSS to provide training, coaching, and support for educators around the application of reading in an MTSS framework. For Goal 2, the SPDG will offer professional learning to improve transitions from each education level.

The data and results yielded by the SPDG projects are being utilized to inform professional development and technical assistance activities throughout Alabama. Additionally, the Alabama SPDG's project design provided the research base to develop the Alabama State Systemic Improvement Plan (SSIP). Multiple demonstration sites that employ evidence-based practices rooted within the framework of Implementation Science are operated throughout the state. School and district staff participate regularly in high-quality professional development and receive ongoing coaching from trained and experienced instructional coaches.

Stakeholder Engagement:

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

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2),

Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

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

YES

Number of Parent Members:

15

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.

The SEAP continues to be an integral part of the development and input on the SPP/APR. The SES provided opportunities for parents, special educators, general educators, school-level leaders, and LEA-level leaders to participate in the SPP/APR 2020-2025 input process.

The SEAP was trained by the SES regarding SPP/APR content and relevant data sources throughout this reporting period. The panel members were given the opportunity to review and discuss data trends and provide input and recommendations on revising and setting targets and developing improvement strategies. During a quarterly SEAP meeting, the SES presented on family engagement, ways to improve communication with a child's special education team, and how to decrease conflict. The SES also reviewed dispute resolution options and provided visuals of the updated dispute resolution forms and how to access the forms on the ALSDE website. The panel was allowed to review dispute resolution trend data and provide input on methods to increase meaningful parental involvement in schools in their community.

Beyond the SEAP, the ALSDE also partnered with the Alabama Parent Education Center (APEC) 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 SES hosted family focus groups on various days and times, including evening hours, to ensure parent accessibility and participation. The SES discussed secondary transition services and encouraged feedback from parents regarding their experiences with the implementation of transition services in the LEAs. In collaboration with the APEC, the SES also provided linkages to available state and local resources for parents and families. Moreover, the SES sought stakeholder feedback on the need to better align family engagement and developed improvement strategies, which also helped inform the SPP/APR process.

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.

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 SES offered virtual options for three family focus groups. These virtual options were offered and made accessible to families in rural, urban, and suburban areas across the state at various days and times, including evening hours, which not only increased participation but also increased diversity by targeting stakeholders in those areas, particularly in the central part of the state. The focus groups allowed the SES to hear family members' concerns, suggestions, and needs. At the suggestion of the SEAP, information was posted to the SES Section YouTube channel for parents to access easily. In addition, input was gathered from parents at middle and high school SSIP/SPDG sites through the Foundations Survey, which asked parents to rate the behavior, safety, and climate of schools. Moreover, parents of students of transition age were asked to complete a satisfaction survey of transition services and resources and the SSIP-developed Planning for Life After School Survey. These survey results will be used to determine areas for follow-up training and product development. The ALSDE plans to redistribute a flyer to solicit SEAP members to broaden the scope to include more diverse parents on the advisory panel. The ALSDE will continue to collaborate with APEC to ensure that the stakeholders represent the diversity of the state.

In a continued effort 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 ALSDE will offer family engagement virtual training designed to build the capacity of diverse groups of parents and guardians to assist with homework in the areas of literacy and mathematics. Conducting live, virtual training that is recorded will allow the information to be accessible to a wide range of families from diverse backgrounds around the state.

Soliciting Public Input:

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

The SES continues to collaborate with the National Center on Systemic Improvement (NCSI) to establish a mechanism with timelines to seek public input from the SEAP members, LEA Special Education Coordinators/Directors, APEC, advocacy groups, and institutions of higher education. The NCSI served as a thought partner with the SES to identify mechanisms to engage stakeholders, including state advisory panel members, and to offer their consultation services to the state and the panel. As a result, the SES established a calendar based on this partnership in which ongoing work sessions were scheduled. The work sessions involved panel members reviewing indicators, discussing data and indicator slippage, developing reasons for slippage when necessary, recommending improvement strategies, and evaluating progress. The panel members were allowed to engage with the SES to address their questions about the data. The panel members were also encouraged to provide feedback and recommendations after reflecting on the data.

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.

After reviewing the SEAP members' recommendations and conducting internal discussions, the SEAP members were given a draft of the FFY 2022 SPP/APR to review and asked to provide further feedback to the SES before submission, as necessary.

Reporting to the Public

How and where the State reported to the public on the FFY 2021 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2021 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, is available.

The SPP/APR is primarily shared with the public and media via the ALSDE's website. The FFY 2021 SPP/APR can be found on the ALSDE's website at www.alabamaachieves.org and via the following path: Reports & Data > Student Data > Special Education Reports > scroll down to SPP/APR, FFY 2021 SPP/APR.

The direct link is www.alabamaachieves.org/wp-content/uploads/2023/05/RD_SER_2023510_AL-01-SPP-PART-B-FFY-2021-22_V1.0.pdf. Once the SPP/APR has been posted, a media news release is sent to forums statewide, including the state board members, ALSDE staff members, LEAs, public information officers, education organizations, news outlets, and press secretaries for the governor and the Alabama congressional delegation.

The LEA Performance Profiles may also be accessed on the ALSDE website at www.alabamaachieves.org and via the following path: Reports & Data > Student Data > Special Education Reports > LEA Reports - Performance Profiles. The direct link is www.alabamaachieves.org/reports-data/student-data/special-education-reports/.

Both the SPP/APR and LEA Performance Profiles are posted no later than 120 days following the State's APR submission on the OSEP required submission date, generally on February 1st.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	73.31%

FFY	2017	2018	2019	2020	2021
Target >=	55.82%	57.59%	57.59%	73.31%	73.56%
Data	67.00%	68.04%	69.64%	73.31%	74.90%

Targets

FFY	2022	2023	2024	2025
Target >=	73.81%	74.06%	74.31%	74.56%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,556
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	668
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	74
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	177

FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
3,556	4,475	74.90%	73.81%	79.46%	Met target	No Slippage

Graduation Conditions

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

To qualify for the Alabama High School Diploma (AHSD), all students must pass a minimum of 24 credits of coursework—Mathematics (4), Science (4), Social Studies (4), English (4), Physical Education (1), Health Education (0.5), Career Preparedness (1), Career and Technical Education and/or Foreign Language and/or Arts Education (3), and Electives (2.5). Additional credits may be added at the discretion of each LEA’s board of education.

The AHSD provides youth with multiple pathways to graduate: the General Education Pathway, the Essentials Pathway, or the Alternate Achievement Standards (AAS) Pathway. Only youth completing core courses that are fully aligned to the General Education Pathway are counted in the federal graduation rate.

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

NO

Provide additional information about this indicator (optional)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2013	12.71%

FFY	2017	2018	2019	2020	2021
Target <=	11.71%	11.46%	10.00%	6.29%	6.19%
Data	5.98%	6.18%	5.46%	4.07%	5.70%

Targets

FFY	2022	2023	2024	2025
Target <=	6.09%	5.99%	5.89%	5.79%

Targets: Description of Stakeholder Input

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The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (ED Facts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,556

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	668
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	74
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	177

FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
177	4,475	5.70%	6.09%	3.96%	Met target	No Slippage

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

Alabama utilizes 618 exiting data (i.e., EdFacts file specification FS009) as the definition for a dropout. A dropout is where a student was enrolled at the start of the reporting period but was not enrolled at the end of the reporting period and did not exit special education through any of the other means. This includes dropouts, runaways, General Education Diploma (GED) recipients (in cases where students are required to drop out of the secondary educational program in order to pursue the GED certificate), expulsions, status unknown, students who moved but are not known to be continuing in another educational program, and other exiters from special education.

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

NO

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

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	95.08%
Reading	B	Grade 8	2020	90.72%
Reading	C	Grade HS	2020	77.43%
Math	A	Grade 4	2020	94.77%
Math	B	Grade 8	2020	90.17%
Math	C	Grade HS	2020	85.75%

Targets

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

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

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

Date:

01/10/2024

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	8,524	7,725	5,425
b. Children with IEPs in regular assessment with no accommodations (3)	1,814	1,778	1,322
c. Children with IEPs in regular assessment with accommodations (3)	5,908	4,980	2,761
d. Children with IEPs in alternate assessment against alternate standards	734	755	632

Data Source:

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

Date:

01/10/2024

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	8,529	7,725	5,425
b. Children with IEPs in regular assessment with no accommodations (3)	1,775	1,735	1,430
c. Children with IEPs in regular assessment with accommodations (3)	5,935	5,005	3,022
d. Children with IEPs in alternate assessment against alternate standards	735	754	632

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

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

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

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	8,456	8,524	98.76%	95.00%	99.20%	Met target	No Slippage
B	Grade 8	7,513	7,725	96.85%	95.00%	97.26%	Met target	No Slippage
C	Grade HS	4,715	5,425	83.75%	95.00%	86.91%	Did not meet target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	8,445	8,529	98.70%	95.00%	99.02%	Met target	No Slippage
B	Grade 8	7,494	7,725	96.61%	95.00%	97.01%	Met target	No Slippage
C	Grade HS	5,084	5,425	92.66%	95.00%	93.71%	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.

The 2022-2023 Proficiency and Participation Data of Students with IEPs can be found on the ALSDE website at www.alabamaachievers.org and via the following path: Reports Data > School Performance > scroll down to Proficiency, 2022-2023.

The direct link is www.alabamaachievers.org/reports-data/school-performance/#2022-2023

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response

3A - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	19.09%
Reading	B	Grade 8	2020	11.83%
Reading	C	Grade HS	2020	4.45%
Math	A	Grade 4	2020	8.36%
Math	B	Grade 8	2020	1.81%
Math	C	Grade HS	2020	2.74%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	19.09%	19.09%	19.09%	28.59%
Reading	B >=	Grade 8	11.83%	11.83%	11.83%	17.75%
Reading	C >=	Grade HS	4.45%	4.45%	4.45%	6.68%
Math	A >=	Grade 4	8.36%	8.36%	8.36%	12.54%
Math	B >=	Grade 8	1.81%	1.81%	1.81%	2.72%
Math	C >=	Grade HS	2.74%	2.74%	2.74%	4.11%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the

indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

FFY 2022 Data Disaggregation from ED Facts

Data Source:

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

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	7,722	6,758	4,083
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	709	343	40
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	665	490	153

Data Source:

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

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	7,710	6,740	4,452
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	454	96	34
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	388	102	97

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

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	1,374	7,722	18.19%	19.09%	17.79%	Did not meet target	No Slippage
B	Grade 8	833	6,758	12.50%	11.83%	12.33%	Met target	No Slippage
C	Grade HS	193	4,083	4.93%	4.45%	4.73%	Met target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	842	7,710	9.93%	8.36%	10.92%	Met target	No Slippage
B	Grade 8	198	6,740	2.33%	1.81%	2.94%	Met target	No Slippage
C	Grade HS	131	4,452	2.71%	2.74%	2.94%	Met target	No Slippage

Regulatory Information

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

Public Reporting Information

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

The 2022-2023 Proficiency and Participation Data of Students with IEPs can be found on the ALSDE website at www.alabamaachieves.org and via the following path: Reports Data > School Performance > scroll down to Proficiency, 2022-2023.

The direct link is www.alabamaachieves.org/reports-data/school-performance/#2022-2023

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

None

3B - OSEP Response**3B - Required Actions**

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	24.57%
Reading	B	Grade 8	2020	23.94%
Reading	C	Grade HS	2020	37.01%
Math	A	Grade 4	2020	19.81%
Math	B	Grade 8	2020	13.44%
Math	C	Grade HS	2020	28.84%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	24.57%	24.57%	24.57%	36.86%
Reading	B >=	Grade 8	23.94%	23.94%	23.94%	35.91%
Reading	C >=	Grade HS	37.01%	37.01%	37.01%	55.52%
Math	A >=	Grade 4	19.81%	19.81%	19.81%	29.72%
Math	B >=	Grade 8	13.44%	13.44%	13.44%	20.16%
Math	C >=	Grade HS	28.84%	28.84%	28.84%	43.26%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

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

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	734	755	632
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	190	185	257

Data Source:

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

Date:

01/10/2024

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	735	754	632
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	107	90	41

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	190	734	19.67%	24.57%	25.89%	Met target	No Slippage
B	Grade 8	185	755	22.38%	23.94%	24.50%	Met target	No Slippage
C	Grade HS	257	632	39.04%	37.01%	40.66%	Met target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	107	735	19.19%	19.81%	14.56%	Did not meet target	Slippage
B	Grade 8	90	754	6.16%	13.44%	11.94%	Did not meet target	No Slippage
C	Grade HS	41	632	31.52%	28.84%	6.49%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

The ALSDE acknowledges the slippage in the Alabama Comprehensive Assessment Program (ACAP) Alternate performance of students with IEPs against alternate academic achievement standards. New math standards were implemented for SY 2022-23, which may have caused a regression in student proficiency. The Alabama Math, Science, and Technology Initiative (AMSTI) provides professional learning, instructional materials, and educator support in math through a multi-tiered system of support (MTSS). The ALSDE will continue to monitor student proficiency in mathematics and looks forward to reporting improvements in mathematics for all students, including those with IEPs.

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 2022-2023 Proficiency and Participation Data of Students with IEPs can be found on the ALSDE website at www.alabamaachieves.org and via the following path: Reports Data > School Performance > scroll down to Proficiency, 2022-2023.

The direct link is www.alabamaachieves.org/reports-data/school-performance/#2022-2023

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

3C - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2022-2023 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2022-2023 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

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

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

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2022-2023 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2022-2023 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	32.79
Reading	B	Grade 8	2020	39.84
Reading	C	Grade HS	2020	23.81
Math	A	Grade 4	2020	15.55
Math	B	Grade 8	2020	12.45
Math	C	Grade HS	2020	20.61

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A <=	Grade 4	26.23	22.95	19.67	16.40
Reading	B <=	Grade 8	31.88	27.90	23.92	19.92
Reading	C <=	Grade HS	19.05	16.67	14.29	11.91
Math	A <=	Grade 4	12.49	10.39	9.37	7.78
Math	B <=	Grade 8	9.97	8.73	7.49	6.22
Math	C <=	Grade HS	16.49	14.43	12.37	10.31

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI); 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

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

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	52,213	55,478	46,789
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	7,722	6,758	4,083
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	27,129	27,047	13,560
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,387	1,021	655
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	709	343	40
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	665	490	153

Data Source:

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

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	52,552	55,719	48,032
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	7,710	6,740	4,452
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	17,614	11,515	11,309
d. All students in regular assessment with accommodations scored at or above proficient against grade level	878	325	523
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	454	96	34

f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	388	102	97
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(1)The term “regular assessment” is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	17.79%	54.61%	35.09	26.23	36.82	Did not meet target	Slippage
B	Grade 8	12.33%	50.59%	40.68	31.88	38.27	Did not meet target	No Slippage
C	Grade HS	4.73%	30.38%	24.49	19.05	25.65	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

The ALSDE acknowledges the slippage and regression in the proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards. The ALSDE established an improvement plan that includes the addition of several new sections in the department (i.e., Alabama Multi-Tier System of Supports, Office of Math Improvement) to work with existing initiatives (i.e., School Improvement, Alabama Math, Science, and Technology Initiative, Alabama Reading Initiative) to support all students, including those with IEPs. The ALSDE will continue to monitor and evaluate the effectiveness of the state initiatives. The ALSDE looks forward to reporting improvements in reading and math for all students, including those with IEPs.

Provide reasons for slippage for Group C, if applicable

The ALSDE acknowledges the slippage and regression in the proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards. The ALSDE established an improvement plan that includes the addition of several new sections in the department (i.e., Alabama Multi-Tier System of Supports, Office of Math Improvement) to work with existing initiatives (i.e., School Improvement, Alabama Math, Science, and Technology Initiative, Alabama Reading Initiative) to support all students, including those with IEPs. The ALSDE will continue to monitor and evaluate the effectiveness of the state initiatives. The ALSDE looks forward to reporting improvements in reading and math for all students, including those with IEPs.

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	10.92%	35.19%	21.69	12.49	24.27	Did not meet target	Slippage
B	Grade 8	2.94%	21.25%	16.04	9.97	18.31	Did not meet target	Slippage
C	Grade HS	2.94%	24.63%	20.73	16.49	21.69	Did not meet target	No Slippage

Provide reasons for slippage for Group A, if applicable

The ALSDE acknowledges the slippage and regression in the proficiency rate for children with IEPs scoring at or above proficient against grade-level academic achievement standards. The ALSDE established an improvement plan that includes the addition of several new sections in the department (i.e., Alabama Multi-Tier System of Supports, Office of Math Improvement) to work with existing initiatives (i.e., School Improvement, Alabama Math, Science, and Technology Initiative, Alabama Reading Initiative) to support all students, including those with IEPs. The ALSDE will continue to monitor and evaluate the effectiveness of the state initiatives. The ALSDE looks forward to reporting improvements in reading and math for all students, including those with IEPs.

Provide reasons for slippage for Group B, if applicable

The ALSDE acknowledges the slippage and regression in the proficiency rate for children with IEPs scoring at or above proficient against grade-level academic achievement standards. The ALSDE established an improvement plan that includes the addition of several new sections in the department (i.e., Alabama Multi-Tier System of Supports, Office of Math Improvement) to work with existing initiatives (i.e., School Improvement, Alabama Math, Science, and Technology Initiative, Alabama Reading Initiative) to support all students, including those with IEPs. The ALSDE will continue to monitor

and evaluate the effectiveness of the state initiatives. The ALSDE looks forward to reporting improvements in reading and math for all students, including those with IEPs.

Provide additional information about this indicator (optional)

The 2022-2023 Proficiency and Participation Data of Students with IEPs can be found on the ALSDE website at www.alabamaachieves.org and via the following path: Reports Data > School Performance > scroll down to Proficiency, 2022-2023.

The direct link is www.alabamaachieves.org/reports-data/school-performance/#2022-2023

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

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

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	14.00%

FFY	2017	2018	2019	2020	2021
Target <=	5.50%	5.00%	4.00%	2.18%	2.18%
Data	0.73%	2.17%	2.16%	1.41%	0.00%

Targets

FFY	2022	2023	2024	2025
Target <=	2.18%	2.18%	2.18%	2.10%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

FFY 2022 SPP/APR Data

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

NO

Number of LEAs that have a significant discrepancy	Number of LEAs in the State	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2	146	0.00%	2.18%	1.37%	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 ALSDE examines the rate of suspensions and expulsions for children with IEPs among LEAs within the state. An LEA is determined to have a significant discrepancy when its suspension/expulsion rate for children with IEPs is at least two percentage points more than the state's suspension/expulsion rate for children with IEPs. The state's suspension/expulsion rate for this reporting period is 0.45%; as such, the state bar for this reporting period is 2.45%. The state calculates the rates of suspensions and expulsions greater than ten days in a school year for children with IEPs for each LEA within the state. No minimum "n" size is used. The methodology utilized by the ALSDE is the use of a single state bar to calculate one state-level suspension/expulsion rate and compare that rate to the district-level suspension/expulsion rate for children with IEPs on an annual basis.

The ALSDE changed the methodology based on stakeholder feedback. The revised methodology will be evident in the next APR.

The ALSDE engaged multiple stakeholder groups for guidance regarding a change in methodology, the use of a single state bar, and our process for reviewing policies, procedures, and practices 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.

As a result of feedback from multiple stakeholder groups, the ALSDE has revised its methodology for this indicator. The revised methodology states that an LEA has a significant discrepancy when its suspension/expulsion rate for children with IEPs is at least one and a half percentage point (1.5%) more than the state's suspension/expulsion rate for children with IEPs and more than one student is suspended/expelled. This change reflects a decrease from two percentage points to one and a half percentage point. The ALSDE will begin using the revised methodology for FFY 2023 (using SY 2022-2023 data) because the FFY 2022 (using SY 2021-2022 data) calculations were already completed before stakeholder input was available. The ALSDE will continue to use a single state bar to calculate one state-level suspension/expulsion rate for all LEAs and all racial/ethnic groups.

The ALSDE and its stakeholder groups believe that the revision 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.

Provide additional information about this indicator (optional)

Although the total number of districts is 149 as reported in the introduction for this reporting period, when using SY 2021-22 data as required, the state had a total of 146 districts during SY 2021-22.

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

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

The ALSDE has implemented a tiered approach for corrective actions based on an LEA's year of identification. In year one of identification, an LEA must review its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards using a state-provided template. In year two, an LEA must complete a discipline self-assessment, participate in PBIS training, and provide monthly progress reports documenting the total number of suspensions/expulsions of children with IEPs and develop an improvement plan outlining its procedures for monitoring the rate of suspensions and expulsions of children with IEPs based on data analyses and identification of patterns. In year three and subsequent years, an LEA must complete all Tiers 1 and 2 activities and participate in Success Gaps training provided by the ALSDE.

For the two LEAs that the ALSDE identified as having a significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, the State required both LEAs to review and revise (if applicable) their 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 these policies, procedures, and practices comply with IDEA. Next, the ALSDE reviewed the LEAs' self-review responses regarding the LEAs' policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. Noncompliance was not identified as a result of the review.

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 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

4A - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

The ALSDE engaged multiple stakeholder groups for guidance regarding a change in methodology, the use of a single state bar, and our process for reviewing policies, procedures, and practices 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.

As a result of feedback from multiple stakeholder groups, the ALSDE has revised its methodology for this indicator. The revised methodology states that an LEA has a significant discrepancy when its suspension/expulsion rate for children with IEPs is at least one and a half percentage point (1.5%) more than the state's suspension/expulsion rate for children with IEPs and more than one student is suspended/expelled. This change reflects a decrease from two percentage points to one and a half percentage point. The ALSDE will begin using the revised methodology for FFY 2023 (using SY 2022-2023 data) because the FFY 2022 (using SY 2021-2022 data) calculations were already completed before stakeholder input was available. The ALSDE will continue to use a single state bar to calculate one state-level suspension/expulsion rate for all LEAs and all racial/ethnic groups.

The ALSDE and its stakeholder groups believe that the revision 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.

4A - OSEP Response

The State reported it is planning to revise its methodology for determining 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, to be reported in a future SPP/APR. OSEP appreciates the State's efforts. However, for the FFY 2022 SPP/APR, the State's chosen methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspension and expulsion rates of children with IEPs that falls above the median of thresholds used by all States.

4A - Required Actions

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

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

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

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

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	0.00%

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

Targets

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

FFY 2022 SPP/APR Data

Has the state established a minimum n/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.

0

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1	0	146	0.00%	0%	0.00%	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

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

The ALSDE examines the rate of suspensions and expulsions for children with IEPs among LEAs within the state. An LEA is determined to have a significant discrepancy when its suspension/expulsion rate for children with IEPs is at least two percentage points more than the state's suspension/expulsion rate for children with IEPs and more than one student is suspended/expelled. The state calculates the rates of suspensions and expulsions greater than ten days in a school year for children with IEPs from a racial/ethnic group for each LEA within the state; then, using the minimum "n" size of one, excludes any LEA that had one or less student suspended or expelled. The methodology utilized by the ALSDE is the use of a single state bar to calculate one state-level suspension/expulsion rate for all LEAs and all racial/ethnic groups.

The state's suspension/expulsion rate for this reporting period is 0.45%; as such, the state bar for this reporting period is 2.45%. An LEA was determined to have a significant discrepancy if its rate of suspensions/expulsions for children with IEPs by race or ethnicity was greater than 2.45%. A minimum "n" size of one was used, yielding the exclusion of zero LEAs from the calculations.

The ALSDE changed the methodology based on stakeholder feedback. The revised methodology will be evident in the next APR.

The ALSDE engaged multiple stakeholder groups for guidance regarding a change in methodology, the use of a single state bar, and our process for reviewing policies, procedures, and practices 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.

As a result of feedback from multiple stakeholder groups, the ALSDE has revised our methodology for this indicator. The revised methodology states that an LEA has a significant discrepancy when its suspension/expulsion rate for children with IEPs is at least one and a half percentage point (1.5%) more than the state's suspension/expulsion rate for children with IEPs and more than one student is suspended/expelled. This change reflects a decrease from two percentage points to one and a half percentage point. The ALSDE will begin using the revised methodology for FFY 2023 (using SY 2022-2023 data) because the FFY 2022 (using SY 2021-2022 data) calculations were already completed before stakeholder input was available. The ALSDE will continue to use a single state bar to calculate one state-level suspension/expulsion rate for all LEAs and all racial/ethnic groups.

The ALSDE and our stakeholder groups believe that the revision 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.

Provide additional information about this indicator (optional)

Although the total number of districts is 149 as reported in the introduction for this reporting period, when using SY 2021-22 data as required, the state had a total of 146 districts during SY 2021-22.

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

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

The ALSDE has implemented a tiered approach for corrective actions based on an LEA's year of identification. In year one of identification, an LEA must review its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards using a state-provided template. In year two, an LEA must complete a discipline self-assessment, participate in PBIS training, and provide monthly progress reports documenting the total number of suspensions/expulsions of children with IEPs and develop an improvement plan outlining its procedures for monitoring the rate of suspensions and expulsions of children with IEPs based on data analyses and identification of patterns. In year three and subsequent years, an LEA must complete all Tiers 1 and 2 activities and participate in Success Gaps training provided by the ALSDE.

For the one LEA that the ALSDE identified as having a significant discrepancy by race/ethnicity in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, the State required the LEA to review and revise (if applicable) 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 these policies, procedures, and practices comply with IDEA. Next, the ALSDE reviewed the LEA's self-review responses regarding the LEA's policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. Noncompliance was not identified as a result of the review.

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 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

4B - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

The ALSDE engaged multiple stakeholder groups for guidance regarding a change in methodology, the use of a single state bar, and our process for reviewing policies, procedures, and practices 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.

As a result of feedback from multiple stakeholder groups, the ALSDE has revised our methodology for this indicator. The revised methodology states that an LEA has a significant discrepancy when its suspension/expulsion rate for children with IEPs is at least one and a half percentage point (1.5%) more than the state's suspension/expulsion rate for children with IEPs and more than one student is suspended/expelled. This change reflects a decrease from two percentage points to one and a half percentage point. The ALSDE will begin using the revised methodology for FFY 2023 (using SY 2022-2023 data) because the FFY 2022 (using SY 2021-2022 data) calculations were already completed before stakeholder input was available. The ALSDE will continue to use a single state bar to calculate one state-level suspension/expulsion rate for all LEAs and all racial/ethnic groups.

The ALSDE and our stakeholder groups believe that the revision 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.

4B - OSEP Response

The State reported it is planning to revise its methodology for determining 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, to be reported in a future SPP/APR. OSEP appreciates the State's efforts. However, for the FFY 2022 SPP/APR, the State's chosen methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspension and expulsion rates of children with IEPs that above the median of thresholds used by all States.

4B- Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2017	2018	2019	2020	2021
A	2020	Target >=	75.00%	77.75%	77.75%	83.92%	83.92%
A	83.92%	Data	83.65%	83.59%	83.62%	83.92%	83.81%
B	2020	Target <=	6.25%	6.00%	6.00%	7.21%	6.96%
B	7.21%	Data	7.23%	7.18%	7.19%	7.21%	7.39%
C	2020	Target <=	2.55%	2.50%	2.50%	2.26%	2.26%
C	2.26%	Data	2.51%	2.45%	2.42%	2.26%	2.09%

Targets

FFY	2022	2023	2024	2025
Target A >=	83.92%	83.92%	83.92%	84.42%
Target B <=	6.71%	6.46%	6.21%	5.96%
Target C <=	2.26%	2.26%	2.26%	2.21%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	95,252
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	78,723
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	7,817
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,132
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	440
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	419

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

NO

FFY 2022 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	78,723	95,252	83.81%	83.92%	82.65%	Did not meet target	Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	7,817	95,252	7.39%	6.71%	8.21%	Did not meet target	Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	1,991	95,252	2.09%	2.26%	2.09%	Met target	No Slippage
Part	Reasons for slippage, if applicable						
A	The state has observed an increase in the number of students returning to in-person learning since the COVID-19 pandemic. The LEAs have requested technical assistance regarding the complexity of students' academic and behavioral needs, which may contribute to the decrease in students receiving services inside the regular class 80% or more of the day.						

Part	Reasons for slippage, if applicable
B	The state has observed an increase in the number of students returning to in-person learning since the COVID-19 pandemic. The LEAs have requested technical assistance regarding the complexity of students' academic and behavioral needs, which may contribute to the increase in students receiving services inside the regular class 40% of the day.

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data (Inclusive) – 6A, 6B, 6C

Part	FFY	2017	2018	2019	2020	2021
A	Target >=	49.00%	53.00%	53.00%	52.70%	52.70%
A	Data	52.55%	53.47%	52.09%	52.70%	54.59%
B	Target <=	5.70%	5.50%	5.50%	4.28%	4.28%
B	Data	2.57%	3.12%	3.31%	4.28%	3.49%
C	Target <=				2.71%	2.71%
C	Data				2.71%	2.52%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the

indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

Targets

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

Inclusive Targets

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

Target Range not used

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

Part	Baseline Year	Baseline Data
A	2020	52.70%
B	2020	4.28%
C	2020	2.71%

Inclusive Targets – 6A, 6B

FFY	2022	2023	2024	2025
Target A >=	52.70%	52.70%	52.70%	52.95%
Target B <=	4.28%	4.28%	4.28%	4.08%

Inclusive Targets – 6C

FFY	2022	2023	2024	2025
Target C <=	2.71%	2.71%	2.71%	2.61%

Prepopulated Data

Data Source:

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

Date:

08/30/2023

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	1,515	2,530	624	4,669
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	780	1,430	386	2,596
b1. Number of children attending separate special education class	80	88	26	194
b2. Number of children attending separate school	18	22	4	44
b3. Number of children attending residential facility	2	4	1	7
c1. Number of children receiving special education and related services in the home	52	60	6	118

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

NO

FFY 2022 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	2,596	4,669	54.59%	52.70%	55.60%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	245	4,669	3.49%	4.28%	5.25%	Did not meet target	Slippage
C. Home	118	4,669	2.52%	2.71%	2.53%	Met target	No Slippage

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

The state has observed an increase in the number of students returning to in-person learning since the COVID-19 pandemic. The LEAs have requested technical assistance regarding the complexity of students' academic and behavioral needs, which may contribute to the increase in students receiving services in a separate special education class, separate school, or residential facility.

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 [General Instructions](#) on page 3 for additional instructions on sampling.)

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2017	2018	2019	2020	2021
A1	2008	Target >=	91.30%	91.55%	91.55%	93.09%	93.09%
A1	85.50%	Data	93.15%	94.27%	94.77%	94.27%	93.29%

A2	2008	Target >=	83.30%	83.55%	83.55%	76.30%	76.30%
A2	59.60%	Data	78.89%	78.22%	76.30%	76.08%	76.89%
B1	2008	Target >=	91.20%	91.45%	91.45%	92.31%	92.31%
B1	80.60%	Data	92.63%	92.43%	93.83%	92.96%	92.23%
B2	2008	Target >=	65.60%	65.85%	65.85%	57.20%	57.20%
B2	29.20%	Data	63.97%	63.56%	61.89%	59.44%	61.42%
C1	2008	Target >=	89.60%	89.85%	89.85%	91.57%	91.57%
C1	85.10%	Data	90.73%	92.57%	93.47%	92.13%	91.93%
C2	2008	Target >=	88.70%	88.95%	88.95%	75.40%	75.40%
C2	72.20%	Data	85.94%	86.16%	85.40%	83.16%	83.31%

Targets

FFY	2022	2023	2024	2025
Target A1 >=	93.09%	93.09%	93.09%	93.34%
Target A2 >=	76.30%	76.30%	76.30%	76.55%
Target B1 >=	92.31%	92.31%	92.31%	92.56%
Target B2 >=	57.20%	57.20%	57.20%	57.45%
Target C1 >=	91.57%	91.57%	91.57%	91.82%
Target C2 >=	75.40%	75.40%	75.40%	75.65%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

FFY 2022 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

2,811

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	87	3.09%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	145	5.16%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	577	20.53%

Outcome A Progress Category	Number of children	Percentage of Children
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,146	40.77%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	856	30.45%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,723	1,955	93.29%	93.09%	88.13%	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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,002	2,811	76.89%	76.30%	71.22%	Did not meet target	Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	79	2.81%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	230	8.18%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	869	30.91%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,196	42.55%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	437	15.55%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	2,065	2,374	92.23%	92.31%	86.98%	Did not meet target	Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,633	2,811	61.42%	57.20%	58.09%	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	111	3.95%

Outcome C Progress Category	Number of Children	Percentage of Children
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	168	5.98%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	386	13.73%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	966	34.36%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,180	41.98%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,352	1,631	91.93%	91.57%	82.89%	Did not meet target	Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,146	2,811	83.31%	75.40%	76.34%	Met target	No Slippage

Part	Reasons for slippage, if applicable
A1	<p>The ALSDE recognizes slippage within Indicator 7A1, 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. The ALSDE continues to analyze the data to discern the contributing factors associated with the slippage in this indicator.</p> <p>A potential contributing factor is the limited access of preschool children with disabilities to typically developing peers during the COVID-19 quarantine. Another contributing factor may be the new preschool outcomes measurement tool, Teaching Strategies GOLD. Children exiting preschool at the pilot sites entered on the ELPP and exited on the GOLD, resulting in a mix of data assessment(s) and ratings. To address this issue, the ALSDE will only use the GOLD to assess preschool outcomes in the future. Additionally, to ensure fidelity with implementation, the ALSDE will continue to ensure that all staff (i.e., case managers and special education coordinators) in the districts are trained by the Teaching Strategies staff in the administration of the GOLD.</p>
A2	<p>The ALSDE recognizes slippage within Indicator 7A2, the percentage of preschool children who were functioning within age expectations in Outcome A (positive social-emotional skills including social relationships) by the time they exited preschool special education services. The ALSDE continues to analyze the data to discern the contributing factors associated with the slippage in this indicator.</p> <p>A potential contributing factor is the limited access of preschool children with disabilities to typically developing peers during the COVID-19 quarantine. Another contributing factor may be the new preschool outcomes measurement tool, Teaching Strategies GOLD. Children exiting preschool at the pilot sites entered on the ELPP and exited on the GOLD, resulting in a mix of data assessment(s) and ratings. To address this issue, the ALSDE will only use the GOLD to assess preschool outcomes in the future. Additionally, to ensure fidelity with implementation, the ALSDE will continue to ensure that all staff (i.e., case managers and special education coordinators) in the districts are trained by the Teaching Strategies staff in the administration of the GOLD.</p>
B1	<p>The ALSDE recognizes slippage within Indicator 7B1, 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. The ALSDE continues to analyze the data to discern the contributing factors associated with the slippage in this indicator.</p> <p>A potential contributing factor is the limited access of preschool children with disabilities to typically developing peers during the COVID-19 quarantine. Another contributing factor may be the new preschool outcomes measurement tool, Teaching Strategies GOLD. Children exiting preschool at the pilot sites entered on the ELPP and exited on the GOLD, resulting in a mix of data assessment(s) and ratings. To address this issue, the ALSDE will only use the GOLD to assess preschool outcomes in the future. Additionally, to ensure fidelity with implementation, the ALSDE will continue to ensure that all staff (i.e., case managers and special education coordinators) in the districts are trained by the Teaching Strategies staff in the administration of the GOLD.</p>
C1	<p>The ALSDE recognizes slippage within Indicator 7C1, 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. The ALSDE continues to analyze the data to discern the contributing factors associated with the slippage in this indicator.</p>

Part	Reasons for slippage, if applicable
	A potential contributing factor is the limited access of preschool children with disabilities to typically developing peers during the COVID-19 quarantine. Another contributing factor may be the new preschool outcomes measurement tool, Teaching Strategies GOLD. Children exiting preschool at the pilot sites entered on the ELPP and exited on the GOLD, resulting in a mix of data assessment(s) and ratings. To address this issue, the ALSDE will only use the GOLD to assess preschool outcomes in the future. Additionally, to ensure fidelity with implementation, the ALSDE will continue to ensure that all staff (i.e., case managers and special education coordinators) in the districts are trained by the Teaching Strategies staff in the administration of the GOLD.

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

NO

If no, provide the criteria for defining “comparable to same-aged peers.”

The criteria for defining "comparable to same-aged peers" used by the ALSDE is based on categories 6 and 7 in the Child Outcomes Summary (COS) Form. As noted in the FFY 2013 APR, the ALSDE converted to a seven-point scale COS form to allow for delineating children who entered and exited in the "comparable to same-aged peers" category and to clearly define "comparable to same-aged peers." The delineations for measuring progress on the Early Learning Progress Profile (ELPP) standards align with the seven-point scale of the COS form.

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

In preparation for the transition to the Teaching Strategies GOLD® (GOLD) tool for collecting preschool outcomes data, twenty-five pilot LEAs used different procedures for gathering data. Pilot LEAs used a conversion instrument (GOLD Jumpstart tool) to convert entry ELPP scores to a COS score for each of the three outcomes areas. The COS scores were entered into the GOLD as the entry checkpoint. For children exiting preschool and transitioning to kindergarten who had received at least six months of special education and related services, pilot LEAs completed the GOLD tool for the exit checkpoint.

The instrument used to gather data for indicator 7 (Preschool Outcomes) is the ELPP, which is a spreadsheet data collection system that employs components of the COS form.

The procedures for gathering the ELPP data involved LEA personnel completing the entry document based on information collected through the eligibility process, teacher observations, and reports for every child receiving special education services within 60 days of the date special education services begin. The exit document must be completed within 30 days of anticipated or actual exit from preschool special education services and for every child who will transition to kindergarten or who exits from preschool special education services for any other reason. Preschool children must have received at least six months of special education services before the case manager completes the exit document.

The LEAs are required to complete the exit ELPP annually during the specified window of April 15 through May 1 for all children exiting preschool programs and transitioning to kindergarten. The ELPP may be completed prior to each annual IEP review date or other intervals at the discretion of the LEA and results may be used in reporting progress and developing the present level of academic achievement and functional performance and annual goals. Additionally, the ALSDE compares the data by entry and exit levels of each child by LEA to determine progress in the three outcomes areas. The LEAs are trained to use this information to examine the effectiveness of curricula, instructional settings, and specially designed instruction (SDI) to improve outcomes for preschool children with IEPs.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 3 for additional instructions on sampling.)

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

Provide the actual numbers used in the calculation.

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

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

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

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

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

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

8 - Indicator Data

Question	Yes / No
Do you use a separate data collection methodology for preschool children?	NO

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

During the FFY 2022 reporting year, the Alabama State Department of Education (ALSDE) sought input on increasing parent involvement to improve services for students with disabilities. Strategies included:

1) Presenting on the State Systemic Improvement Plan (SSIP) at the SEAP meetings. The ALSDE SES Section staff presented information about the state Performance Plan/Annual Performance Report (SPP/APR) and SSIP activities at the state's SEAP meetings and sought feedback from SEAP members on targets.

- 2)Partnering with the Alabama Parent Education Center (APEC) to lead three family focus groups. The focus groups, conducted virtually and representing the three regions of the state, gathered input from family members of students in grades 6-12 or recent leavers. The focus groups allowed SES Section staff to hear concerns, suggestions, and needs from family members.
- 3)Partnering with APEC to gather family input. The SES staff presented on the SSIP during the three family focus groups to gather input from family members regarding the SSIP activities and data.
- 4)Gathering input from parents through an SSIP/SPDG survey. AL SPDG/SSIP parents of students of transition age were asked to complete a satisfaction survey of transition services and resources and the SSIP-developed Planning for Life After School survey. These surveys were used to determine areas for follow-up training and product development.

Historical Data

Baseline Year	Baseline Data
2010	74.90%

FFY	2017	2018	2019	2020	2021
Target >=	76.13%	76.38%	76.38%	76.99%	77.24%
Data	78.02%	76.70%	72.96%	72.29%	71.37%

Targets

FFY	2022	2023	2024	2025
Target >=	77.49%	77.74%	77.99%	78.24%

FFY 2022 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
16,100	22,031	71.37%	77.49%	73.08%	Did not meet target	No Slippage

Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.

The Alabama Parent Survey was designed for all parents of students with disabilities ages 3-21 to rate the facilitation of parent involvement at their children’s schools. One survey was administered to both groups.

The survey dissemination process was the same for both preschool and school-age children. School staff, district staff, and APEC staff collected surveys from parents of both preschool and school-age children. Surveys were collected either online or through paper-and-pencil format. Surveys were translated and available in 11 different languages, although school districts only requested online surveys in English, Spanish, Korean, and Vietnamese.

The data analysis methodology was the same for both groups. Data from parents of preschool and school-age children are reported in aggregate, although to determine differences, separate analyses were conducted to compare results between preschool and school-age groups. The percentage of parent involvement among parents of preschool children was 79.41%. The percentage of parent involvement among parents of school-age children was 72.51%. The response rates were 40.52% among parent of preschool children and 22.23% among parents of school-age children.

The number of parents to whom the surveys were distributed.

99,921

Percentage of respondent parents

22.05%

Response Rate

FFY	2021	2022
Response Rate	21.61%	22.05%

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

The ALSDE has adopted the standard of +/- 3.0% from the representative sample as considered “important differences” for sampling (LaPier, Bullis, & Falls, 2007). Differences within +/- 3.0% were considered representative of the population.

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

The ALSDE collects race/ethnicity data for responding parents and their students on the Alabama Parent Survey. The data presented below includes the race/ethnicity of the parents who responded to the Alabama Parent Survey, children of responding parents, the 2022 Child Count race/ethnicity data of students ages 3-21 (i.e., students receiving special education services), and the 2022 Alabama race/ethnicity data per the 2022 Alabama Census. Due to rounding, percentages may not equal 100%.

American Indian or Native Alaskan

Responding Parent Sample: 0.66%, Children of Responding Parents: 0.72%, AL Child Count: 0.66%, AL Adult Census Data: 0.70%

Asian

Responding Parent Sample: 0.83%, Children of Responding Parents: 0.99%, AL Child Count: 0.77%, AL Adult Census Data: 1.60%

Black or African American

Responding Parent Sample: 27.05%, Children of Responding Parents: 27.17%, AL Child Count: 34.35%, AL Adult Census Data: 26.80%

Hispanic/Latino

Responding Parent Sample: 6.23%, Children of Responding Parents: 6.30%, AL Child Count: 8.03%, AL Adult Census Data: 4.90%

More Than One Race

Responding Parent Sample: 3.01%, Children of Responding Parents: 6.14%, AL Child Count: 3.25%, AL Adult Census Data: 2.00%

Native Hawaiian or Other Pacific Islander

Responding Parent Sample: 0.22%, Children of Responding Parents: 0.13%, AL Child Count: 0.09%, AL Adult Census Data: 0.10%

White

Responding Parent Sample: 62.02%, Children of Responding Parents: 58.55%, AL Child Count: 52.85%, AL Adult Census Data: 64.70%

When comparing the 2022 Child Count data with the responding sample, responding parents who are Black or African American were 7.30% underrepresented and parents who are White were 9.17% overrepresented. When looking at the Alabama Census data, however, race/ethnicity data were within +/- 3.0% for all race/ethnicity categories. As the Alabama Census data includes the entire adult population, these results may better reflect the responding parent sample race/ethnicity percentages.

The responding student sample was compared to 2022 Child Count data. As indicated in the data above, there were two student races/ethnicities that were not representative of the target population obtained from the 2022 Child Count data: Black or African American (7.18% underrepresented) and White (5.70% overrepresented). Alabama has devised eight strategies to address the underrepresented Black or African American student category and the overrepresentation of White student category in the future.

Another demographic measure, location, found that among the 149 school districts and charter schools included in the survey distribution, 149 were represented. Therefore, 100% of districts and charter schools were represented in survey responses showing geographic representation.

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

NO

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

The responding sample was compared to 2022 Child Count data. Differences between the responding sample and the population were compared for three demographic categories (gender, race/ethnicity, and primary disability) and 22 indices within these categories.

The ALSDE has adopted the standard of +/- 3.0% from the representative sample as considered "important differences" for sampling (LaPier, Bullis, & Falls, 2007). Differences within +/- 3.0% were considered representative of the population.

The data below demonstrates the percentages for the FFY 2022 Alabama Parent Survey responding sample, the percentages from the 2022 Child Count data (ages 3-21), and the differences between the two.

Total Population, Responding Sample, Difference

Gender

Male 65.74%, 63.83%, -1.91%

Female 34.26%, 36.17%, 1.91%

Race/Ethnicity

American Indian or Native Alaskan 0.66%, 0.72%, 0.06%

Asian 0.77%, 0.99%, 0.22%

Black or African American 34.35%, 27.17%, -7.18%

Hispanic/Latino 8.03%, 6.30%, -1.73%

More than One Race 3.25%, 6.14%, 2.89%

Native Hawaiian or Other Pacific Islander 0.09%, 0.13%, 0.04%

White 52.85%, 58.55%, 5.70%

Disability Category

Autism 10.94%, 16.49%, 5.55%

Deaf-Blindness 0.02%, 0.24%, 0.22%

Developmental Delay 5.48%, 10.60%, 5.12%

Emotional Disability 1.13%, 1.76%, 0.63%

Hearing Impairment 0.89%, 0.71%, -0.18%

Intellectual Disability 7.02%, 6.73%, -0.29%

Multiple Disabilities 1.34%, 4.29%, 2.95%

Orthopedic Impairment 0.47%, 0.38%, -0.09%

Other Health Impairment 13.85%, 5.78%, -8.07%

Specific Learning Disability 39.79%, 28.31%, -11.48%

Speech/Language Impairment 18.36%, 23.84%, 5.48%

Traumatic Brain Injury 0.24%, 0.38%, 0.14%

Visual Impairment 0.50%, 0.49%, -0.01%

As indicated in the data above, there were seven indices that were not representative of the target population obtained from the 2022 Child Count data:

- Black or African American (7.18% underrepresented);
- White (5.70% overrepresented);
- Autism (5.55% overrepresented);
- Developmental Delay (5.12% overrepresented);
- Other Health Impairment (8.07% underrepresented);
- Specific Learning Disability (11.48% underrepresented); and
- Speech/Language Impairment (5.48% overrepresented).

As the Alabama Parent Survey was more widely disseminated online and through paper-and-pencil compared to previous years, there was more opportunity for response error. For example, respondents were asked to identify demographic information, including disability. In FFY 2022, there were 2,002 missing responses to the primary disability question or 8.6% of the sample. Response error was also noted in disability responses. For example, responses to the primary disability question indicate that a percentage of parents do not know the disability category (e.g., parents have written "Attention Deficit Disorder" in the margin but checked "Intellectual Disabilities"). The ALSDE will consider ways to increase survey completion and awareness of a student's primary disability.

Additionally, results suggest errors in the administration of the survey. For example, Deaf-Blindness had more responses than the number of students identified with Deaf-Blindness in the state (a 347% response rate). These findings suggest parents may be responding more than once to the survey or they are listing the incorrect primary disability. Either option demonstrates errors in sampling or measurement, which may be broader in scope than the Deaf-Blindness category.

There were seven indices that were not representative in FFY 2022, but there were nine in FFY 2021. Furthermore, all but one of those nine indices had lower percentage deviations than in the prior reporting year.

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

To address deviations in the representativeness of future Indicator 8 samples, the ALSDE will implement the following strategies for all groups:

- The ALSDE will continue working to increase the response rate. While there were over 22,000 responses to the survey, the ALSDE will continue efforts to increase the response rate. The SES staff reviewed response rate data for districts twice during the data collection window, and this step will continue for FFY 2023. Furthermore, the SES will continue to communicate with districts with low response rates to ensure family members can be represented.
- To promote the online survey, the state will continue to share the survey weblink on the SES page and at statewide conferences with parent participants.
- The ALSDE will continue to work closely with APEC to reach parents through APEC's outreach activities. The ALSDE will ask APEC to include the survey weblink in materials shared with families.

In addition to the strategies listed in the prior paragraph, for the underrepresented group Black or African American, the ALSDE will implement the following strategies:

- Increase the sharing of the survey link and QR code on social media. Specifically, the SES staff will post the online survey information on their Twitter account and website. They will also encourage LEAs to share the survey link and QR code on their social media pages.
- The SES staff will continue to monitor the response rates monthly, although the process will begin earlier to allow sufficient time to disseminate and

collect paper surveys. The Data Manager will send an email to all LEAs with response rates lower than the state's FFY 2022 results, reminding them of the processes and data collection window. For LEAs with very low response rates, the SES Regional Specialists will call the LEA's special education coordinators to discuss their process. LEAs that continue to report low response rates after the second response rate analysis (approximately 2.5 months into the data collection period) and are in districts with high percentages of students who are Black or African American will be contacted again by their SES Regional Specialists to identify strategies to improve data collection.

- The SES staff will communicate to LEAs the importance of offering assistance if needed, as well as alternative strategies for collecting data (e.g., outside of an IEP meeting).
- For the FFY 2023 data collection period, the SES staff have discussed printing posters and flyers with QR codes and survey links and mailing a few paper surveys to each LEA. The LEAs will be asked to display the posters in a visible area in the school and place the flyers and paper surveys in an accessible location for parents.
- The ALSDE SEAP contact will develop and distribute packets to parents who are SEAP members. Packets will include online access information, a few paper surveys, and contact information for the ALSDE. Parents will be asked to distribute the information to others in their community.

Although Hispanic was not an underrepresented group as noted by the criteria, the ALSDE will employ the same steps for students who are Hispanic as for students who are Black or African American. Additionally, the ALSDE has a contract with a language interpreter service. The interpreter service will be available for any LEA to use for the Indicator 8 Parent Survey.

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

The SES staff combined the paper surveys submitted and the online, direct-entry surveys (in English, Korean, Vietnamese, and Spanish) to create its dataset. The SES staff have established the following internal decision rules: 1) Any surveys with responses to the 11 parent involvement items are included in the dataset; 2) Any surveys with open-ended comments are included; and 3) For surveys with no responses to any of the 12 parent involvement items and no open-ended responses, the surveys must have three or more responses to demographic questions to be included.

After applying these decision rules, there were a total of 23,308 responses in FFY 2022. Among these responses, there were 22,031 responses to the parent involvement items. Therefore, 5.48% of respondents completed only demographic questions or provided open-ended responses. The SES Section staff counted only responses to the parent involvement items toward the numerator of the response rate.

The final formula was the number of parents responding to the parent involvement items (22,031) divided by the 2022 Child Count (99,921). In FFY 2022, the response rate was 22.05%.

The impact of nonresponse bias was examined. Each of the 22 indices was assigned proportionate weights, and the data were reanalyzed to determine the expected values. The data below shows Indicator 8 parent involvement by weighted demographic categories.

Indicator, Actual Responding Values, Weighted Gender, Weighted Race, Weighted Disability
 Indicator 8 73.1%, 73.2%, 73.0%, 73.8%

All three expected values for gender, race, and disability were within 0.7% of the actual value. Furthermore, gender and disability were slightly higher than the actual values. These results suggest the actual values were likely representative of the population and nonresponse bias did not have a significant impact on the results.

The ALSDE will continue to take steps to improve response rates, sample from a broader pool of students, and increase completion rates. To address the potential issue of non-response bias and promote responses from a broad cross-section of youths, the SES staff have implemented, and will continue to implement, the following steps to reach a broader sample of families: 1) Monitor response rate; 2) Contact districts with no or low response rates during the data collection window to encourage participation; 3) Share the Parent Survey weblink with APEC and the Alabama Parent Training and Information Center; 4) Provide translations of the survey in 11 languages; and 5) Disseminate the survey as both a weblink and in paper-and-pencil format via the local districts and schools.

In FFY 2023, extra efforts will be made to increase the response rate of parents of students with Other Health Impairment or a Specific Learning Disability or students who are Black or African American, including sharing the link with parent groups and referencing the low response rate in communications with districts.

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?	YES
If yes, provide a copy of the survey.	2022-2023 Parent Survey_Alabama 508

Provide additional information about this indicator (optional)

8 - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

The demographics of the parents responding are not representative of the demographics of children receiving special education services. There were seven indices that were not representative of the target population obtained from the 2022 Child Count data:

- Black or African American (7.18% underrepresented);
- White (5.70% overrepresented);
- Autism (5.55% overrepresented);
- Developmental Delay (5.12% overrepresented);
- Other Health Impairment (8.07% underrepresented);
- Specific Learning Disability (11.48% underrepresented); and
- Speech/Language Impairment (5.48% overrepresented).

To address deviations in the representativeness of future Indicator 8 samples, the ALSDE will implement the following strategies for all groups:

- The ALSDE will continue working to increase the response rate. While there were over 22,000 responses to the survey, the ALSDE will continue efforts to increase the response rate. The SES Section staff reviewed response rate data for districts twice during the data collection window, and this step will continue for FFY 2023. Furthermore, the SES Section will continue to communicate with districts with low response rates to ensure family members can be represented.
- To promote the online survey, the state will continue to share the survey weblink on the SES page and at statewide conferences with parent participants.
- The ALSDE will continue to work closely with APEC to reach parents through APEC's outreach activities. The ALSDE will ask APEC to include the survey weblink in materials shared with families.

In addition to the strategies listed in the prior paragraph, for the underrepresented group Black or African American, the ALSDE will implement the following strategies:

- Increase the sharing of the survey link and QR code on social media. Specifically, the SES Section staff will post the online survey information on their Twitter account and website. They will also encourage LEAs to share the survey link and QR code on their social media pages.
- The SES Section staff will continue to monitor the response rates monthly, although the process will begin earlier to allow sufficient time to disseminate and collect paper surveys. The Data Manager will send an email to all LEAs with response rates lower than the state's FFY 2022 results, reminding them of the processes and data collection window. For LEAs with very low response rates, the SES Regional Coordinators will call the LEA's special education coordinators to discuss their process. LEAs that continue to report low response rates after the second response rate analysis (approximately 2.5 months into the data collection period) and are in districts with high percentages of students who are Black or African American will be contacted again by their SES Regional Coordinator to identify strategies to improve data collection.
- The SES Section staff will communicate to LEAs the importance of offering assistance if needed, as well as alternative strategies for collecting data (e.g., outside of an IEP meeting).
- For the FFY 2023 data collection period, the SES Section staff have discussed printing posters and flyers with QR codes and survey links and mailing a few paper surveys to each LEA. The LEAs will be asked to display the posters in a visible area in the school and place the flyers and paper surveys in an accessible location for parents.
- The ALSDE SEAP contact will develop and distribute packets to parents who are SEAP members. Packets will include online access information, a few paper surveys, and contact information for the ALSDE. Parents will be asked to distribute the information to others in their community.

Although Hispanic was not an underrepresented group as noted by the criteria, the ALSDE will employ the same steps for students who are Hispanic as for students who are Black or African American. Additionally, the ALSDE has a contract with a language interpreter service. The interpreter service will be available for any LEA to use for the Indicator 8 Parent Survey.

The ALSDE collects race/ethnicity data for responding parents on the Alabama Parent Survey. The table presented below includes the race/ethnicity of responding parents, the 2022 Child Count race/ethnicity data of students ages 3-21, and the 2022 Alabama race/ethnicity data per the United States Census (United States Census Bureau, 2022). Due to rounding, percentages may not equal 100%.

Race/Ethnicity, Responding Parent Sample, Alabama Child Count Data, Alabama Adult Census Data

American Indian or Native Alaskan	0.66%	0.66%	0.70%
Asian	0.83%	0.77%	1.60%
Black or African American	27.05%	34.35%	26.80%
Hispanic/Latino	6.23%	8.03%	4.90%
More Than One Race	3.01%	3.25%	2.00%
Native Hawaiian or Other Pacific Islander	0.22%	0.09%	0.10%
White	62.02%	52.85%	64.70%

When comparing the 2022 Child Count data with the responding sample, responding parents who are Black or African American were 7.30% underrepresented and parents who are White were 9.17% overrepresented. When looking at the Census data, however, race/ethnicity data were within +/- 3.0% for all race/ethnicity categories. As the census includes the entire adult population, these data may more accurately reflect the responding parent sample race/ethnicity percentages.

Another demographic measure, location, found that among the 149 school districts and charter schools included in the survey distribution, 149 were represented. Therefore, 100% of districts and charter schools were represented in survey responses showing geographic representation.

8 - OSEP Response

In its description of its FFY 2022 data, the State did not address whether the response group was representative of the demographics of children receiving special education services in the State. Specifically, the State reported, "The ALSDE collects race/ethnicity data for responding parents on the Alabama Parent Survey. The data presented below includes the race/ethnicity of responding parents, the 2022 Child Count race/ethnicity data of students ages 3-21, and the 2022 Alabama race/ethnicity data per the United States Census (United States Census Bureau, 2022)." Additionally, the State reported, "Another demographic measure, location, found that among the 149 school districts and charter schools included in the survey distribution, 149 were represented. Therefore, 100% of districts and charter schools were represented in survey responses showing geographic representation." The State must include the extent to which the demographics of the children for whom parents responded are representative of the children receiving special education services, as required by the Measurement Table.

8 - Required Actions

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2022 reporting period (i.e., after June 30, 2023).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	1.40%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	50.00%	1.40%	4.14%

Targets

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

FFY 2022 SPP/APR Data

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

YES

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

4

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
7	4	145	4.14%	0%	2.76%	Did not meet 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 ALSDE uses the risk ratio, and if necessary, the alternate risk ratio, to calculate disproportionate representation for racial and ethnic groups. An LEA is considered to have disproportionate representation for Indicator 9 when the risk ratio is greater than 2.25. The calculation for disproportionate representation is based on one year of data. The ALSDE has established a minimum cell-size of less than or equal to ten for the numerator; a minimum n-size for the denominator has not been established when defining disproportionate representation under Indicator 9.

Using the OSEP Disproportionality Template, all 149 LEAs were included in an initial examination of data and calculation of disproportionate representation. Based on the data for all 149 LEAs, 7 LEAs had a risk ratio greater than 2.25 and met the state's minimum cell-size of ten. The ALSDE excluded 4 LEAs from the calculation of disproportionate representation due to not meeting the minimum cell-size.

Data for all racial and ethnic groups were used in the review and analysis for disproportionate representation for each LEA and include the following: American Indian or Alaska Native, Asian, Black or African American, Hispanic/Latino, Native Hawaiian or Pacific Islander, White, and Two or More Races.

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.

The ALSDE examined LEA child find, evaluation, eligibility, and other related policies, procedures, and practices for each LEA identified with disproportionate representation. The ALSDE created a disaggregated list of students by racial/ethnic group for each LEA identified for disproportionate representation.

Next, for each LEA that exceeds the risk ratio of 2.25 with disproportionate representation of racial/ethnic groups in special education and related services, the ALSDE Integrated Monitoring Team (IMT) reviewed individual student records from the disaggregated list who were part of the racial/ethnic group identified for disproportionate representation. The IMT determined if evaluation and eligibility requirements were met according to the requirements of the Alabama Administrative Code (AAC) and the IDEA, Part B. If a student record was determined to have noncompliance (e.g., not meeting evaluation and eligibility requirements according to the AAC and the IDEA, Part B) as a result of inappropriate identification, the ALSDE made a finding of noncompliance and required correction of the individual student instance no later than one year from the notification of the findings. Additionally, when an LEA was identified as having disproportionate representation due to inappropriate identification, the LEA was required to review and revise (if applicable) the policies, practices, and procedures used in their identification processes. Lastly, the ALSDE reviewed the LEAs' self-review of the policies, procedures, and practices related to their identification processes.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The ALSDE verified that all LEAs identified as having noncompliance were correctly implementing the regulatory requirements (i.e., achieved 100% compliance). The state's database was accessed to view updated data (i.e., new student evaluation records) to determine that the LEA correctly included the minimum requirements for eligibility determination for all students who went through the eligibility determination process for a period of time following the findings of noncompliance.

As such, the ALSDE has verified that all LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement. All reviews of updated data for FFY 2021 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02 and OSEP QA 23-01. Additionally, the review of updated data did not reveal any continued noncompliance for all LEAs identified.

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

For each individual case of noncompliance, the ALSDE accessed each student's record in the state's database to determine if the minimum requirements for eligibility determination were corrected. The ALSDE verified that each individual instance of noncompliance was corrected for FFY 2021 within one year, consistent with OSEP Memo 09-02 and OSEP QA 23-04, unless the child was no longer within the jurisdiction of the LEA. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

9 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the six districts identified in FFY 2021 with disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP 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 (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

The ALSDE verified that the six LEAs identified as having noncompliance in FFY 2021 were correctly implementing the regulatory requirements (i.e., achieved 100% compliance). The ALSDE database was accessed to view updated data (i.e., new student evaluation records) to determine that the LEA correctly included the minimum requirements for eligibility determination for all students who went through the eligibility determination process for a period of time following the findings of noncompliance. As such, the ALSDE has verified that all LEAs with noncompliance reflected in the FFY 2021 data reported for this indicator are correctly implementing the specific regulatory requirement. All reviews of updated data for FFY 2021 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02 and OSEP QA 23-01. Additionally, the review of updated data did not reveal any continued noncompliance for all LEAs identified.

For each individual case of noncompliance, the ALSDE accessed each student's record in the state's database to determine if the minimum requirements for eligibility determination were corrected. The ALSDE verified that each individual instance of noncompliance was corrected for FFY 2021 within one year, consistent with OSEP Memo 09-02 and OSEP QA 23-04, unless the child was no longer within the jurisdiction of the LEA. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2022 reporting period (i.e., after June 30, 2023).

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	4.96%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	55.77%	4.96%	6.25%

Targets

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

FFY 2022 SPP/APR Data

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

YES

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

3

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
18	5	146	6.25%	0%	3.42%	Did not meet 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 ALSDE uses the risk ratio, and if necessary, the alternate risk ratio, to calculate disproportionate representation for racial and ethnic groups in specific disability categories. An LEA is considered to have disproportionate representation for Indicator 10 when the risk ratio is greater than 2.50. The calculation for disproportionate representation is based on one year of data. The ALSDE has established a minimum cell-size of less than or equal to ten for the numerator; a minimum n-size for the denominator has not been established when defining disproportionate representation under Indicator 10.

Using the OSEP Disproportionality Template, all 149 LEAs were included in an initial examination of data and calculation of disproportionate representation. Based on the data for all 149 LEAs, 18 LEAs had a risk ratio greater than 2.50 and met the state’s minimum cell-size of ten. The ALSDE excluded 3 LEAs from the calculation of disproportionate representation due to not meeting the minimum cell-size.

Data for all racial and ethnic groups were used in the review and analysis for disproportionate representation for each LEA and include the following: American Indian or Alaska Native, Asian, Black or African American, Hispanic/Latino, Native Hawaiian or Pacific Islander, White, and Two or More Races. Additionally, the following disability categories were used in the review and analysis for disproportionate representation for each LEA: Autism, Emotional Disability, Intellectual Disability, Other Health Impairment, Specific Learning Disability, and Speech or Language Impairment.

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

The ALSDE examined LEA child find, evaluation, eligibility, and other related policies, procedures, and practices for each LEA identified with disproportionate representation. The ALSDE created a disaggregated list of students by racial/ethnic group in specific disability categories for each LEA identified for disproportionate representation.

Next, for each LEA that exceeds the risk ratio of 2.50 with disproportionate representation of racial/ethnic groups in specific disability categories, the ALSDE Integrated Monitoring Team (IMT) reviewed individual student records from the disaggregated list who were part of the racial/ethnic group in specific disability categories identified for disproportionate representation. The IMT determined if evaluation and eligibility requirements were met according to the requirements of the Alabama Administrative Code (AAC) and the IDEA, Part B. If a student record was determined to have noncompliance (e.g., not meeting evaluation and eligibility requirements according to the AAC and the IDEA, Part B) as a result of inappropriate identification, the ALSDE made a finding of noncompliance and required correction of the individual student instance no later than one year from the notification of the findings. Additionally, when an LEA was identified as having disproportionate representation due to inappropriate identification, the LEA was required to review and revise (if applicable) the policies, practices, and procedures used in their identification processes. Lastly, the ALSDE reviewed the LEAs’ self-review of the policies, procedures, and practices related to their identification processes.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	9	0	0

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The ALSDE verified that all LEAs identified as having noncompliance were correctly implementing the regulatory requirements (i.e., achieved 100% compliance). The ALSDE database was accessed to view updated data (i.e., new student evaluation records) to determine that the LEA correctly included the minimum requirements for eligibility determination for all students who went through the eligibility determination process for a period of time following the findings of noncompliance.

As such, the ALSDE has verified that all LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement. All reviews of updated data for FFY 2021 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02 and OSEP QA 23-01. Additionally, the review of updated data did not reveal any continued noncompliance for all LEAs identified.

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

For each individual case of noncompliance, the ALSDE accessed each student's record in the state's database to determine if the minimum requirements for eligibility determination were corrected. The ALSDE verified that each individual instance of noncompliance was corrected for FFY 2021 within one year, consistent with OSEP Memo 09-02 and OSEP QA 23-04, unless the child was no longer within the jurisdiction of the LEA. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

10 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the nine districts identified in FFY 2021 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP 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 (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

The ALSDE verified that the nine LEAs identified as having noncompliance in FFY 2021 were correctly implementing the regulatory requirements (i.e., achieved 100% compliance). The state's database was accessed to view updated data (i.e., new student evaluation records) to determine that the LEA correctly included the minimum requirements for eligibility determination for all students who went through the eligibility determination process for a period of time following the findings of noncompliance. As such, the ALSDE has verified that all LEAs with noncompliance reflected in the FFY 2021 data reported for this indicator are correctly implementing the specific regulatory requirement. All reviews of updated data for FFY 2021 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02 and OSEP QA 23-01. Additionally, the review of updated data did not reveal any continued noncompliance for all LEAs identified.

For each individual case of noncompliance, the ALSDE accessed each student's record in the state's database to determine if the minimum requirements for eligibility determination were corrected. The ALSDE verified that each individual instance of noncompliance was corrected for FFY 2021 within one year, consistent with OSEP Memo 09-02 and OSEP QA 23-04, unless the child was no longer within the jurisdiction of the LEA. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

10 - OSEP Response

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.

Measurement

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

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

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

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

Instructions

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	82.00%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.77%	99.70%	99.71%	99.60%	99.74%

Targets

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

FFY 2022 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
26,129	25,954	99.74%	100%	99.33%	Did not meet target	No Slippage

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

175

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.

Given that the number of children included in (a) but not included in (b) is 175, the following numbers indicate the range of days beyond the 60-day initial evaluation timeline when evaluations were completed for children: 1-15 days - 64 ; 16-30 days - 31 ; 31-45 days - 26; 46-60 days - 10; and 60+ days - 44. The reasons for delays include students' failed vision and hearing tests, school delays, central office delays (psychometrist/testing personnel not notified), shortage of qualified testing personnel, practices and procedures, and delay of evaluation processes.

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.

The ALSDE utilizes the state database to generate a report to collect data for Indicator 11 for each LEA. The LEAs submit data one time each year for reporting data in the APR. Reported data are for the entire reporting period, and all LEAs in the state are included and evaluated for compliance with the timelines. The actual numbers used in the calculation are provided under Actual Target Data.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
60	57		3

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The ALSDE verified that all but three LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The state's database was accessed to view each LEA's Indicator 11 report to determine whether all students for whom parental consent to evaluate was received and evaluated within the 60-day timeline with 100% accuracy for a period of time following the findings of noncompliance. As such, the ALSDE has verified that all but three LEAs with noncompliance reflected in the data reported for the FFY 2021 reporting period for this indicator are correctly implementing the specific regulatory requirement (i.e., achieved 100% compliance) based on a review of updated data.

All reviews of updated data were conducted within one year from the notification of noncompliance. The findings in all but three LEAs identified as having noncompliance with Indicator 11 for FFY 2021 were corrected within one year of notification, consistent with OSEP Memo 09-02 and OSEP QA 23-01.

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

For each individual student whose evaluation was not completed within 60 days, the ALSDE accessed the database to determine whether the evaluations had been completed, although late, for all students still within the jurisdiction of the LEA. Within the database, the ALSDE verified that the students received their required evaluations even though late, consistent with OSEP Memo 09-02 and OSEP QA 23-01, and all individual noncompliance was corrected for FFY 2021 within one year. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The ALSDE could not verify that three LEAs identified as having noncompliance with Indicator 11 for FFY 2021 were correctly implementing the regulatory requirements. LEAs report a shortage of personnel contributes to not correcting the noncompliance within one year. As such, the state conducted required technical assistance with the three LEAs that were not in compliance. The state also required the three LEAs to provide a narrative of their procedures for the Child Find process. Additionally, the LEAs must provide a monthly log to the ALSDE of student referrals to special education and completion dates of evaluations. Lastly, subsequent record reviews will be conducted to bring all three LEAs into compliance by FFY 2023. If the state is unable to verify compliance after the subsequent record reviews, the state will require the LEAs to develop a corrective action plan to address the Child Find process.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

11 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

For each individual student whose evaluation was not completed within 60 days, the ALSDE accessed the database to determine whether the evaluations had been completed, although late, for all students still within the jurisdiction of the LEA. Within the database, the ALSDE verified that the students received their required evaluations even though late, consistent with OSEP Memo 09-02 and OSEP QA 23-01, and all individual noncompliance was corrected for FFY 2021 within one year. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

The ALSDE verified that all but three LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view each LEA's Indicator 11 report to determine whether all students for whom parental consent to evaluate was received and evaluated within the 60-day timeline with 100% accuracy for a period of time following the findings of noncompliance. As such, the ALSDE has verified that all but three LEAs with noncompliance reflected in the data reported for the FFY 2021 reporting period for this indicator are correctly implementing the specific regulatory requirement (i.e., achieved 100% compliance) based on a review of updated data. All reviews of updated data were conducted within one year from the notification of noncompliance. The findings in all but three LEAs identified as having noncompliance with Indicator 11 for FFY 2021 were corrected within one year of notification, consistent with OSEP Memo 09-02 and OSEP QA 23-01.

For the three LEAs in which the state was unable to verify that they were correctly implementing the regulatory requirements, the state conducted required technical assistance with the LEAs and required the three LEAs to provide a narrative of their procedures for the Child Find process. Additionally, the LEAs must provide a monthly log to the ALSDE of student referrals to special education and completion dates of evaluations. Lastly, subsequent record reviews will be conducted to bring all three LEAs into compliance by FFY 2023. If the state is unable to verify compliance after the subsequent record reviews, the state will require the LEAs to develop a corrective action plan to address the Child Find process.

11 - OSEP Response

11 - Required Actions

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

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

Targets must be 100%.

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

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	76.30%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.83%	99.92%	99.70%	99.54%	99.66%

Targets

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

FFY 2022 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	1,874
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	380

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	1,291
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.	199
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	0
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	1,291	1,295	99.66%	100%	99.69%	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

4

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.

Given that the number of children in (a) but not included in b, c, d or e is 4, the following numbers indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed: 1-15 Days - 1 and 60+ Days - 3. The reason for delays includes central office delays.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

The ALSDE utilizes the state database to generate a report to collect data for Indicator 12 for each LEA. The LEAs submit data one time each year for reporting in the APR. Reported data are for the entire reporting period, and all LEAs in the state are included.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The ALSDE conducted a verification to ensure that LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view each LEA's report to determine whether all students who have been served in Part C and referred to Part B for Part B eligibility determination had an IEP developed and implemented by their third birthdays with 100% accuracy following the findings of noncompliance. During this reporting period, the ALSDE has verified that all LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement (i.e., achieved 100% compliance) based on a review of updated data. All reviews were conducted within one year from the notification of noncompliance. The findings in all LEAs identified as having noncompliance with Indicator 12 for FFY 2021 were corrected within one year of notification, consistent with OSEP Memo 09-02 and OSEP QA 23-01.

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

For each individual case where a student who had been served in Part C and referred to Part B for Part B eligibility determination, the ALSDE accessed the database to determine whether the evaluations had been completed, although late, for all students still within the jurisdiction of the LEA. The ALSDE has verified that the students received their required evaluations (even though late and consistent with OSEP Memo 09-02 and OSEP QA 23-01), and all individual noncompliance was corrected for FFY 2021 within one year. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

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

12 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

For each individual case where a student who had been served in Part C and referred to Part B for Part B eligibility determination, the ALSDE accessed the database to determine whether the evaluations had been completed, although late, for all students still within the jurisdiction of the LEA. The ALSDE has verified that the students received their required evaluations (even though late and consistent with OSEP Memo 09-02 and OSEP QA 23-01), and all individual noncompliance was corrected for FFY 2021 within one year. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

The ALSDE conducted a verification to ensure that LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view each LEA's report to determine whether all students who have been served in Part C and referred to Part B for Part B eligibility determination had an IEP developed and implemented by their third birthdays with 100% accuracy following the findings of noncompliance. During this reporting period, the ALSDE has verified that all LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement (i.e., achieved 100% compliance) based on a review of updated data. All reviews were conducted within one year from the notification of noncompliance. The findings in all LEAs identified as having noncompliance with Indicator 12 for FFY 2021 were corrected within one year of notification, consistent with OSEP Memo 09-02 and OSEP QA 23-01.

12 - OSEP Response

12 - Required Actions

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2022 SPP/APR, the data for FFY 2021), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	99.93%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.77%	99.95%	99.99%	99.98%	99.93%

Targets

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

FFY 2022 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
22,807	22,857	99.93%	100%	99.78%	Did not meet 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.

The ALSDE utilizes the state database to generate a report to collect data for Indicator 13 for each LEA. The LEAs submit data one time each year for reporting in the APR. Reported data are for the entire reporting period, and all LEAs in the state are included.

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?	NO

If no, please explain

The state's policies and procedures provide that public agencies must address transition for all students entering 9th grade, regardless of their age. The state requires the IEP Team to address: Age Appropriate Transition Assessments, Long-Term Postsecondary Education/Training, Employment/Occupation/Career, and Community/Independent Living Transition Goals, Anticipated Date of Exit, Pathway to the Alabama High School Diploma, Program Credits to be Earned, Total Number of Electives, Measurable Annual Goals for Postsecondary Education/Training, Employment/Occupation/Career and Community/Independent Living, Transition Services, and Transition Activities for each annual transition goal.

However, the Transition Verification report (the report in the state database that collects the Indicator 13 data) only includes students that are 16 years of age or older during the duration dates of the student's current IEP. Therefore, the ALSDE does not include youth at an age younger than 16 in its data for this indicator.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
15	14		1

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The ALSDE verified that all but one LEA identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view each LEA's Indicator 13 report to determine whether all students aged 16 and above with IEPs contained each of the required components for secondary transition with 100% accuracy for a period of time following the findings of noncompliance. As such, the ALSDE has verified that all but one LEA with noncompliance reflected in the data reported for the FFY 2021 reporting period for this indicator are correctly implementing the specific regulatory requirement (i.e., achieved 100% compliance) based on a review of updated data.

All reviews of updated data were conducted within one year from the notification of noncompliance. The findings in all but one LEA identified as having noncompliance with Indicator 13 for FFY 2021 were corrected within one year of notification, consistent with OSEP Memo 09-02 and OSEP QA 23-01.

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

For noncompliance identified in FFY 2021, the ALSDE accessed the state database to determine that the students' IEPs contained each of the required components for secondary transition, unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02 and OSEP QA 23-01.

Based on a review of updated data within the state database, the ALSDE verified that each individual case of noncompliance (i.e., each student's IEP) contained the required components for secondary transition. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

FFY 2021 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The ALSDE could not verify that one LEA identified as having noncompliance with Indicator 13 for FFY 2021 was correctly implementing the regulatory requirements. As such, the state conducted required technical assistance with the one LEA that was not in compliance. The state also required the LEA to provide a narrative of its procedures for writing compliant secondary transition plans.

Additionally, subsequent record reviews will be conducted to bring the LEA into compliance by FFY 2023. If the state is unable to verify compliance after the subsequent record reviews, the state will require the LEA to develop a corrective action plan for writing compliant secondary transition plans.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

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

13 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

For noncompliance identified in FFY 2021, the ALSDE accessed the state database to determine that the students' IEPs contained each of the required components for secondary transition unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02 and OSEP QA 23-01. Based on a review of updated data within the state database, the ALSDE verified that each individual case of noncompliance (i.e., each student's IEP) contained the required components for secondary transition. Additionally, the ALSDE verified that no outstanding corrective action exists under a State complaint or due process hearing for each individual student.

The ALSDE verified that all but one LEA identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view each LEA's Indicator 13 report to determine whether all students aged 16 and above with IEPs contained each of the required components for secondary transition with 100% accuracy for a period of time following the findings of noncompliance. As such, the ALSDE has verified that all but one LEA with noncompliance reflected in the data reported for the FFY 2021 reporting period for this indicator are correctly implementing the specific regulatory requirement (i.e., achieved 100% compliance) based on a review of updated data.

All reviews of updated data were conducted within one year from the notification of noncompliance. The findings in all but one LEA identified as having noncompliance with Indicator 13 for FFY 2021 were corrected within one year of notification, consistent with OSEP Memo 09-02 and OSEP QA 23-01.

For one LEA in which the state was unable to verify the correct implementation of the regulatory requirements, the state conducted required technical assistance and required the LEA to provide a narrative of its procedures for writing compliant secondary transition plans. Additionally, subsequent record reviews will be conducted to bring the LEA into compliance by FFY 2023. If the state is unable to verify compliance after the subsequent record reviews, the state will require the LEA to develop a corrective action plan for writing compliant secondary transition plans.

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

Instructions

Sampling of youth who had IEPs and are no longer in secondary school is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See [General Instructions](#) on page 3 for additional instructions on sampling.)

Collect data by September 2023 on students who left school during 2021-2022, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2021-2022 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. Definitions

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

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

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

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

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

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

II. Data Reporting

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

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

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

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

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

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

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

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

III. Reporting on the Measures/Indicators

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

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

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

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

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

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

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2009	Target >=	23.24%	23.49%	23.49%	22.54%	22.54%
A	13.77%	Data	26.37%	26.86%	24.67%	22.54%	21.99%
B	2009	Target >=	63.35%	63.60%	60.29%	63.78%	63.78%
B	45.41%	Data	60.02%	64.73%	60.29%	64.75%	57.83%
C	2009	Target >=	77.36%	77.61%	70.62%	71.17%	71.17%
C	63.48%	Data	70.50%	75.60%	70.62%	71.17%	68.12%

FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A >=	22.54%	22.54%	22.54%	22.79%
Target B >=	63.78%	63.78%	63.78%	64.03%
Target C >=	71.17%	71.17%	71.17%	71.42%

Targets: Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work

sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

In 2021, the ALSDE SES Section staff established new Indicator 14 targets. These targets were determined through input from the SEAP and approved by OSEP. During the FFY 2022 reporting year, the ALSDE sought input on how to better serve students transitioning from high school. Strategies included:

- 1) Gathering input from the SEAP members and participants while attending SEAP meetings.
- 2) Partnering with the APEC to lead three family focus groups. The focus groups, conducted virtually and representing the three regions of the state, gathered input from family members of students in grades 6-12 or recent leavers. The focus groups allowed SES Section staff to hear family members' concerns, suggestions, and needs. At these meetings, SES Section staff presented on the State Systemic Improvement Plan (SSIP) to gather feedback on secondary transition and post-school outcomes.
- 3) Presenting on transition and post-school outcomes at several meetings. The SES staff presented information about the state Performance Plan/Annual Performance Report (SPP/APR) and SSIP transition activities at the SEAP meetings and sought feedback from the SEAP. The SES staff also presented at the MEGA Conference regarding the transition work and the SES Back to School Conference meetings with district leaders.
- 4) Gathering input from parents through an SPDG/SSIP survey. AL SPDG/SSIP parents of students of transition age were asked to complete a satisfaction survey of transition services and resources and the SSIP-developed Planning for Life After School survey. These surveys were used to determine areas for follow-up training and product development.

FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	2,309
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,544
Response Rate	66.87%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	390
2. Number of respondent youth who competitively employed within one year of leaving high school	621
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)	33
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).	97

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Enrolled in higher education (1)	390	1,544	21.99%	22.54%	25.26%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,011	1,544	57.83%	63.78%	65.48%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training	1,141	1,544	68.12%	71.17%	73.90%	Met target	No Slippage

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
program; or competitively employed or in some other employment (1+2+3+4)							

Please select the reporting option your State is using:

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

Response Rate

FFY	2021	2022
Response Rate	65.84%	66.87%

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

The ALSDE has adopted the standard of +/- 3.0% from the representative sample as considered “important differences” for sampling (LaPier, Bullis, & Falls, 2007). Differences within +/- 3.0% were considered representative of the population.

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.

The total number of FFY 2022 Indicator 14 sample of leavers was 2309, and 1544 leavers responded to the Alabama Post School Outcome Survey. Therefore, the state’s response rate for the FFY 2022 was 66.9%. The response rate was 1.1% higher than in FFY 2021. Demographic data for the FFY 2022 responding sample was compared to the state’s Child Count data and leaver data. Gender and race/ethnicity were compared to the state’s 2021 Child Count. Since primary disability percentages vary with age (e.g., Developmental Delay), the primary disability for leavers was compared to the percentages of total leavers ages 16-21.

The data below demonstrate: 1) the demographics for the population; 2) the demographics for the FFY 2022 responding sample, and 3) the difference between the two samples.

Demographic Indices for FFY 2022 Total Sample and Responding Sample

Total Alabama SWD, Responding Sample, Difference*

Gender

Male 66.0%, 65.3%, -0.7%
 Female 34.0%, 34.7%, 0.7%

Race/Ethnicity

American Indian or Alaska Native 0.7%, 1.4%, 0.7%
 Asian 0.8%, 0.3%, -0.5%
 Black or African American 34.7%, 36.5%, 1.8%
 Hispanic/Latino 7.6%, 6.0%, -1.6%
 More Than One Race 2.8%, 1.9%, -0.8%
 Native Hawaiian or Pacific Islander 0.1%, 0.1%, 0.0%
 White 53.4%, 53.8%, 0.4%

Disability Category (ages 16-21)

Autism 10.9%, 11.9%, 0.9%
 Deaf-Blindness 0.0%, 0.0%, 0.0%
 Developmental Delay 0.0%, 0.0%, 0.0%
 Emotional Disability 1.4%, 1.2%, -0.2%
 Hearing Impairment 1.2%, 1.3%, 0.1%
 Intellectual Disability 9.5%, 9.7%, 0.2%
 Multiple Disabilities 1.7%, 1.7%, -0.1%
 Orthopedic Impairment 0.7%, 0.6%, 0.0%
 Other Health Impairment 14.4%, 14.5%, 0.1%

Specific Learning Disability 57.4%, 56.7%, -0.7%
Speech/Language Impairment 1.4%, 1.1%, -0.3%
Traumatic Brain Injury 0.7%, 0.6%, -0.1%
Visual Impairment 0.6%, 0.6%, 0.1%

*Due to rounding, numbers may not add up to 100%. Also, rounding may affect the value in the Difference column.

A comparison of the 22 indices for representativeness showed the responding sample was within +/-3.0 for all indices. Therefore, the responding sample was representative of the state's 2021 Child Count data.

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

YES

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

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

Alabama's Indicator 14 response rate for FFY 2022 was 66.9%, which was 1.1% higher than FFY 2021. A meta-analysis of over 1600 refereed published articles found the average response rate when surveying individuals was 52.7% (Baruch & Holtom, 2008). Alabama's FFY 2022 results were well-above this average and would be considered a "high" response rate. The state's average Indicator 14 response rate for the six prior years was over 65%.

Alabama has continued to improve its response rate and will focus on ensuring underrepresented students are included. The ALSDE will take the following three actions to improve the Indicator 14 response rate: 1) Emphasize to districts the importance of reminding students before leaving they will be contacted one year out; 2) Ensure districts have the student's correct contact information via the student's academic and functional performance plan. External verification data found out-of-state phone numbers without area codes, business numbers, and phone numbers with missing digits. Establishing two points of contact with students should further increase the response rate; and 3) Ask districts to attempt at least one student contact after 5:00 p.m. Beginning in FFY 2023, the SES will require districts to make the third attempt (or at least one attempt) after 5:00 p.m. to increase the reach of leavers who are employed during the day.

For students who are traditionally underrepresented, the SES will implement the three strategies in the paragraph above as well as implement the following:

- While the data collection window is open, the SES staff will conduct a random sample of districts and check individual student records of completers within those districts. The SES staff will verify whether the percentage of students who are American Indian or Alaska Native, Black or African American, or Hispanic are: 1) proportionate to the number of students from the race/ethnicity percentages within the district and 2) completing the survey proportionately to students of other race/ethnicities. Any districts who have a disproportionately low number of survey completers who are from a traditionally underrepresented group will be contacted by their SES Section Regional Specialist to discuss strategies for increasing response rates.
- The SES will contract with a language interpreter service. The interpreter service will be available for any LEA to use for conducting the Post School Outcomes Survey.

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

The SES staff use the Alabama Post-School Outcomes Survey for Indicator 14. LEA staff are provided with step-by-step directions for obtaining these data. LEA staff contact former students or a proxy (parent, grandparent, etc.) during the data collection window and interview the student (or proxy) using the survey protocol. The SES staff asks LEAs to have local staff with an established relationship with the students, such as a former teacher, conduct the interviews. Responses, as well as contact attempts, are recorded and reported to the state. Demographic variables for each student were matched to the corresponding responses via the student's unique identifier number.

Submitted data were reviewed and assessed for the following internal decision rules: 1) Any surveys with at least one response to a question that determines Indicator 14 (e.g., type of employment, enrolled in college) were included in the sample; and 2) Any surveys where the participant was marked as "contacted" but did not have subsequent responses were excluded from the sample. Using these decision rules, there were a total of 1,544 responses in FFY 2022.

To calculate the response rate, the final formula was the number of students responding to at least one Indicator 14-determining question (1,544) divided by the number of students with an IEP at the time they left school in the cohort sample (2,309). The FFY 2022 response rate was 66.9%. All but one of the LEAs in the FFY 2022 cohort were represented. These results demonstrate Alabama had a high response rate among FFY 2022 leavers.

Nonresponse bias was likely among former students who either did not have a phone or other current contact information. Students without a phone may be less likely to be competitively employed, although it is difficult to ascertain if the former student does not have a phone or if the contact information was simply not up-to-date.

Contact attempts by LEAs were logged, and when reviewing a sample of contact attempts, most were conducted during school hours and before 5:00 PM. Furthermore, external verification calls conducted during various times of the day, including evening, have found former students who were competitively employed were more easily contacted during evening hours. The data collection process favors former students and/or their family members who are home during the school day, which may affect the final results.

While response rates are important, Alabama seeks to further improve completion rates of the Alabama Post-School Outcomes Survey. For example, a student who responds to the initial questions about competitive employment may not complete the questions about college enrollment. As a result, the student is marked as "no response" for college enrollment, but because the student responded to employment questions, s/he is included as a responder. The SES staff have found missing values for critical questions pertaining to length of employment, minimum wage, and duration of enrollment in higher education have negatively impacted the final Indicator 14 results. Furthermore, external verification calls have found similar difficulties in gathering responses. While in-person interviews would likely result in higher completion rates, this strategy is not feasible and would lower the response rate.

The ALSDE will continue to take steps to improve response rates, sample from a broader pool of students, and increase completion rates. To address

the potential issue of non-response bias and promote responses from a broad cross-section of youths, the SES will implement the following steps:

- Ensure districts have the student's correct contact information via the student's academic and functional performance plan. Districts are asked to verify contact information for the student, and in the future, the SES staff will also ask districts to verify a student's (or parent's) preferred social media account, if available.
- Ask districts to attempt at least one student contact after 5:00 p.m. Beginning in FFY 2023, the SES will require districts to make the third attempt (or at least one attempt) after 5:00 p.m. to increase the reach of leavers who are employed during the day. If district personnel contracts and/or budgets do not allow staff to work after general business hours, districts may be offered an independent, state-level contractor to conduct interviews after 5:00 p.m.
- Offer language interpretation service to any district for conducting the Post School Outcomes Survey. The SES will contract with a service to provide interpretation for several languages.
- Post on social media (e.g., Twitter, ALSDE website) information about the upcoming Post School Outcomes Survey. The ALSDE will also encourage districts to post information on their social media channels.

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

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

The ALSDE uses a representative sample of students with IEPs one year after leaving high school. The representative sample is divided into two cohorts, and therefore half of the LEAs are represented each year. The two cohorts were selected based on their equivalent number of students with disabilities, number of LEAs, and three index percentages (gender, ethnicity, and disability). The sampling plan reflects the Alabama 2013 Child Count demographics.

The following steps outline the methodology used to create a representative sample, in alignment with the OSEP Part B SPP/APR Measurement Table.

Step 1: Stratify districts by size. To achieve equivalent size samples, districts were stratified into two groups, based on their student enrollment. Following OSEP's interpretation, the first group was comprised of the largest districts with an average daily membership (ADM) of 50,000 or greater. In Alabama, only the Mobile County School System qualified. The remaining systems with an ADM less than 50,000 comprised the remaining group.

Step 2: Select equivalent-size samples. Two equivalent annual sample groups were selected across the two size-stratified groups to create samples that were equivalent in their number of districts and the number of students with disabilities, per the December 2013 Child Count. For Mobile County, the only Alabama district in the largest size group, its schools were divided among the two annual sample groups to preserve their size equivalency.

Step 3: Adjust samples for indices equivalency. Once the annual sample groups were selected to have equivalency in number of districts and students with disabilities, their equivalency regarding the sample factors (student gender, ethnicity, and disability) was evaluated. To increase the factors' equivalence between sample group percentages and the state population percentages, districts were selected and moved between groups, according to the impact of their factor's percentages on the sample group percentages.

The sampling includes three factors with 22 indices:

- 1) Gender (Male/Female);
- 2) Race/Ethnicity (American Indian or Native Alaska, Asian, Black, Hispanic/Latino, Native Hawaiian or Pacific Islander, White, and More Than One Race); and
- 3) Primary Disability (Autism; Deaf-Blindness; Developmental Delay; Emotional Disability; Hearing Impairment; Intellectual Disability; Multiple Disabilities; Orthopedic Impairment; Other Health Impairment; Specific Learning Disability; Speech/Language Impairment; Traumatic Brain Injury; Visual Impairment).

The responding sample was compared to the population of students with IEPs one-year post-school for these 22 indices. According to LaPier, Bullis and Falls (September 2007), the former National Post-School Outcomes Center indicated those responses +/-3.0% are considered "important differences." The ALSDE has adopted this standard for representativeness.

FFY 2022 is the last year of the current sampling plan. A new plan was approved by OSEP in summer 2023, although due to the timing of the data collection period, the new sampling plan will be enacted in FFY 2023.

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

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 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, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2021 SPP/APR

The FFY 2022 Indicator 14 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. All demographics were between 0.0% to 1.8%, within the +/- 3.0% target.

The total number of FFY 2022 Indicator 14 sample of leavers was 2309, and 1544 leavers responded to the Alabama Post School Outcome Survey. Therefore, the state's response rate for the FFY 2022 was 66.9%. The response rate was 1.1% higher than in FFY 2021.

Demographic data for the FFY 2022 responding sample was compared to the state's Child Count data and leaver data. Gender and race/ethnicity were compared to the state's 2021 Child Count. Since primary disability percentages vary with age (e.g., Developmental Delay), the primary disability for leavers was compared to the percentages of total leavers ages 16-21.

The data below demonstrate: 1) the demographics for the population; 2) the demographics for the FFY 2022 responding sample, and 3) the difference between the two samples.

Demographic Indices for FFY 2022 Total Sample and Responding Sample

Total Alabama SWD, Responding Sample, Difference*

Gender

Male 66.0%, 65.3%, -0.7%

Female 34.0%, 34.7%, 0.7%

Race/Ethnicity

American Indian or Alaska Native 0.7%, 1.4%, 0.7%

Asian 0.8%, 0.3%, -0.5%

Black or African American 34.7%, 36.5%, 1.8%

Hispanic/Latino 7.6%, 6.0%, -1.6%

More Than One Race 2.8%, 1.9%, -0.8%

Native Hawaiian or Pacific Islander 0.1%, 0.1%, 0.0%

White 53.4%, 53.8%, 0.4%

Disability Category (ages 16-21)

Autism 10.9%, 11.9%, 0.9%

Deaf-Blindness 0.0%, 0.0%, 0.0%

Developmental Delay 0.0%, 0.0%, 0.0%

Emotional Disability 1.4%, 1.2%, -0.2%

Hearing Impairment 1.2%, 1.3%, 0.1%

Intellectual Disability 9.5%, 9.7%, 0.2%

Multiple Disabilities 1.7%, 1.7%, -0.1%

Orthopedic Impairment 0.7%, 0.6%, 0.0%

Other Health Impairment 14.4%, 14.5%, 0.1%

Specific Learning Disability 57.4%, 56.7%, -0.7%

Speech/Language Impairment 1.4%, 1.1%, -0.3%

Traumatic Brain Injury 0.7%, 0.6%, -0.1%

Visual Impairment 0.6%, 0.6%, 0.1%

*Due to rounding, numbers may not add up to 100%. Also, rounding may affect the value in the Difference column.

A comparison of the 22 indices for representativeness showed the responding sample was within +/-3.0 for all indices. Therefore, the responding sample was representative of the state's 2021 Child Count data.

14 - OSEP Response

14 - Required Actions

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

15 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	155
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	12

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

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

Historical Data

Baseline Year	Baseline Data
2005	47.00%

FFY	2017	2018	2019	2020	2021
Target >=	29.72%	29.97%	29.97%	18.68%	18.93%
Data	27.78%	7.45%	6.45%	9.00%	7.20%

Targets

FFY	2022	2023	2024	2025
Target >=	19.18%	19.43%	19.68%	19.93%

FFY 2022 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
12	155	7.20%	19.18%	7.74%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	45
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	9
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	27

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

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

Historical Data

Baseline Year	Baseline Data
2005	62.50%

FFY	2017	2018	2019	2020	2021
Target >=	87.11%	87.36%	87.36%	85.55%	85.80%
Data	91.84%	82.86%	76.47%	88.89%	80.56%

Targets

FFY	2022	2023	2024	2025
Target >=	86.05%	86.30%	86.55%	86.80%

FFY 2022 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
9	27	45	80.56%	86.05%	80.00%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2023). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

17 - Indicator Data

Section A: Data Analysis

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

In 2014, the ALSDE, SES staff, and stakeholders developed the Theory of Action as the core of Alabama's SSIP: "Students with IEPs will be prepared to transition effectively and achieve improved post-school outcomes (PSOs) [i.e., students will be able to achieve positive PSO and engage in higher education and competitive employment opportunities]."

Through the development of the Theory of Action, the SES and stakeholders identified the SiMR as Indicator 14b: The percentage 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.

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 ALSDE uses a representative sample of students with IEPs one year after leaving high school. The representative sample is divided into two cohorts, and therefore half of the LEAs are represented each year. The two cohorts were selected based on their equivalent number of students with disabilities, the number of LEAs, and their three index percentages (gender, ethnicity, and disability). The sampling plan reflects the Alabama (AL) 2013 Child Count demographics.

The following steps outline the methodology used to create a representative sample in alignment with the OSEP Part B SPP/APR Measurement Table.

Step 1: Stratify districts by size. To achieve equivalent size samples, districts were stratified into two groups based on their student enrollment. Following OSEP's interpretation, the first group was comprised of the largest districts with an average daily membership (ADM) of 50,000 or greater. In Alabama, only the Mobile County School System qualified. The remaining systems with an ADM of less than 50,000 comprised the remaining group.

Step 2: Select equivalent-size samples. Two equivalent annual sample groups were selected across the two size-stratified groups to create samples that were equivalent in their number of districts and the number of students with disabilities, per the December 2013 Child Count. For Mobile County, the only Alabama district in the largest size group, its schools were divided among the two annual sample groups to preserve their size equivalency.

Step 3: Adjust samples for indices equivalency. Once the annual sample groups were selected to have equivalency in the number of districts and students with disabilities, their equivalency regarding the sample factors (student gender, ethnicity, and disability) was evaluated. To increase the factors' equivalence between sample group percentages and the state population percentages, districts were selected and moved between groups according to the impact of their factor's percentages on the sample group percentages.

The sampling includes three factors with 22 indices:

- 1) Gender (Male/Female);
- 2) Race/Ethnicity (American Indian or Native Alaska, Asian, Black, Hispanic/Latino, Native Hawaiian or Pacific Islander, White, and More Than One Race); and
- 3) Primary Disability (Autism; Deaf-Blindness; Developmental Delay; Emotional Disability; Hearing Impairment; Intellectual Disability; Multiple Disabilities; Orthopedic Impairment; Other Health Impairment; Specific Learning Disability; Speech/Language Impairment; Traumatic Brain Injury; Visual Impairment).

The responding sample was compared to the population of students with IEPs one year post-school for these 22 indices. According to LaPier, Bullis and Falls (September 2007), the former National Post-School Outcomes Center indicated those responses +/-3.0% are considered "important differences." The ALSDE has adopted this standard for representativeness.

FFY 2022 is the last year of the current sampling plan. A new plan was approved by OSEP in the summer of 2023, although due to the timing of the data collection period, the new sampling plan will be enacted in FFY 2023.

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.

www.alabamaachievers.org/wp-content/uploads/2022/01/REPDATA_SPECED_AlabamaPartBSSIPTheoryofActionfor-FFY2020updated1.13.2022_V1.0.pdf

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2009	45.41%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	63.78%	63.78%	63.78%	64.03%

FFY 2022 SPP/APR Data

Number of respondent youth enrolled in higher education or competitively employed within one year of leaving high school	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,011	1,544	57.83%	63.78%	65.48%	Met target	No Slippage

Provide the data source for the FFY 2022 data.

The SES uses the AL Post-School Outcomes (PSO) Survey as the source of its SiMR. Auburn University and the former National Post-School Outcomes Center (NPSO) assisted in designing the survey. Minor revisions were made and approved by Alabama’s OSEP Project Officer for the SPP/APR.

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

Alabama LEAs are divided into two samples; the methodology for selecting samples can be found above [subset of population response]. Districts in the FFY 2022 cohort conducted interviews with spring 2022 leavers using the AL PSO Survey. The process for collecting data is outlined in the AL PSO Training shared with LEA administrators and posted on the ALSDE website: www.alabamaachieves.org/wp-content/uploads/2021/06/Alabama-Post-School-Outcomes-Spring-2020.pdf

A summary of the steps can be found below:

- Each district designated a Survey Administrator, typically the Special Education Coordinator/Director, to oversee the administration and submission of data. Additionally, interviewers, often a former student’s teacher or staff familiar to the students, were identified for each district.
- Student lists were generated by the state to include students who had an IEP in place at the time they left high school (i.e., leavers). Districts contacted these students at least one year after leaving high school.
- Survey Administrators were responsible for training interviewers. Interviewers conducted the interview using a survey script.
- Interviewers were required to make at least three attempts to contact a student or knowledgeable person. Contact attempts were recorded with the student results.
- Data were submitted for each former student. LEAs were required to have internal verification processes for error checking.

Data for the SiMR were analyzed as indicated in the SPP/APR Part B Measurement Table for Indicator 14b. Student responses were coded, and using the definitions in the SPP/APR Part B Measurement Table, determinations were made for each student regarding the category. All data were analyzed, and disaggregated analyses were conducted for demographic variables.

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

YES

Describe any additional data collected by the State to assess progress toward the SiMR.

Progress made toward the SiMR is outlined in Section B: Implementation, Analysis and Evaluation, although there was no direct data collection aligned with post-school outcomes.

The evaluation plan measures progress toward the SiMR, Indicator 14b, through improved instructional and behavioral outcomes (Goal 1), as well as

improved transition services (Goal 2). As noted in the Theory of Action, progress made toward these goals is designed to increase the likelihood that students with disabilities will have the skills and support to attend school, graduate, and subsequently enroll in college and/or obtain competitive employment.

The AL SSIP evaluation includes both quantitative and qualitative data. Coaches and schools complete an annual Site Form to track individual participants by initiative (e.g., teachers who are co-teaching, Foundations Team members). Site Form data are used for planning fidelity data collection, analyzing data by initiative, and verifying training and coaching log information.

Professional learning (PL) data are captured through training and coaching data. A Participant's Memo outlining training objectives, training information, and expectations for participants is created prior to each training. Training events are tracked through the AL PL Database, and sign-in sheets are used to record individual participation. Pre- and post-evaluations, or retrospective evaluations, are sent to participants to gather training and learning measures data. Following training, coaches and staff use the AL SSIP Activity Log to document coaching and other follow-up activities. A data dashboard for the AL SSIP Activity Log is available to view project progress.

Fidelity data are collected for co-teaching, co-planning, CHAMPS, Foundations, and secondary transition. In FFY 2022, data were collected throughout the year for Foundations and in January through March 2023 for other measures. Details of the fidelity collection are found in Section B.

Other implementation data, such as teaming and structures, were gathered through a Team Functioning Scale Survey, Coaches' Checklist completed by coaches (captured in spring 2022), and Foundations and Implementation Team minutes.

Measures of progress, including assessment of outcomes, were measured through the annual SSIP/SPDG Stakeholder Survey and the Transition SSIP/SPDG Stakeholder Survey. These annual surveys are collected in May and ask project participants to reflect on the prior school year. Additionally, parents/family members participating in the Transition Family Focus Groups completed a survey to gauge progress and provide data on families' transition and post-school planning needs. The parents/family members also participated in a focus group, which provided both outcome and needs assessment data.

Outcome data, including chronic absence data are collected following a school year. Due to COVID-19, data were not collected in FFY 2019 and 2020. The SSIP Team also reviewed AL Report Card data, including academic performance, graduation, and college and career ready data. Lastly, Indicators 8 and 14 data were collected in spring/summer 2023.

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)

YES

Describe any data quality issues, unrelated to COVID-19, specific to the SiMR data and include actions taken to address data quality concerns.

The SES provided guidance on the data collection procedures for the Alabama PSO Survey, which provides data for Indicator 14b (the Alabama SiMR). Local school districts conduct the PSO Survey on a biennial cycle.

The SES has found completion rates within the AL PSO Survey have affected the Indicator 14 results. For example, a student who responds to the initial questions regarding competitive employment may not complete the questions about college enrollment. As a result, the student is marked as "no response" for college enrollment, but because the student responded to employment questions, s/he is included as a responder. In FFY 2022, 3.2% of respondents did not respond to the college enrollment questions. Additionally, the SES has found missing values for critical questions pertaining to length of employment, minimum wage, and duration of enrollment in higher education have negatively impacted the final Indicator 14 results. In FFY 2022, 6.4% of respondents did not answer one or more employment questions. Although the SES could have employed missing values analyses to interpolate the omitted college enrollment and employment questions, it was determined such analyses would compromise the validity of the dataset and the definitions outlined in the Measurement Table.

Additionally, despite its efforts to clarify data collection requirements, the AL SSIP Team continues to find inconsistencies in the processes of individual districts, which likely affected the Indicator 14 results. For example, districts are required to contact each identified student at least three times and log contacts. In prior years, logs would show attempted contacts with a student all within a one-hour window, thus reducing the likelihood of reaching the student or a knowledgeable person. To address this concern, the SES specified that multiple contacts should not be made on the same day, and while the contact attempts have improved, the issue continues to occur.

To address both issues, the SES shared the PSO webinar and written directions with each district in the cohort. Also, an SES staff responded to questions regarding data collection.

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

YES

If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.

The following data concerns may have been influenced by COVID-19:

SIMR: AL's SIMR, Indicator 14b, may have been affected by COVID-19. The state did not meet its target, primarily due to significantly fewer students enrolling in college. COVID-19 has impacted first-year college enrollment, particularly community college enrollment nationally (College Board, 2021) and in AL (Public Affairs Research Council of Alabama, 2021). College Board's data suggest the impact of COVID-19 on first-year enrollment will continue.

External fidelity checks: The SSIP Team typically collects external verification of a sample of teachers (CT/CP or CHAMPS/Discipline in the Secondary Classroom (DSC)). Due to COVID-19, classroom-level external fidelity checks were only conducted for secondary transition classes. For Foundations, SSIP Coaches continued to work with schools to collect Benchmarks of Quality (BoQ) assessment data. Safe and Civil Schools conducted virtual site visits, which were a truncated version of their typical on-site visits.

Outcome data: COVID-19 likely continued to impact several of AL's Indicator 17 outcomes, including academic data, office discipline referrals, and

attendance data. For Goal 1, the state assessment data demonstrated the impact of statewide reductions in academic results for students with and without disabilities.

For Goal 2, the Transition Concepts Student Survey, completed by students with disabilities in transition classes, has not been administered since pre-COVID-19. Instead, the SES added a question about IEP participation, one of the key measures of the Transition Concepts Student Survey, to its (SPP/APR Indicator 8) Alabama Parent Survey.

Section B: Implementation, Analysis and Evaluation

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

www.alabamaachievers.org/wp-content/uploads/2022/01/REPDATA_SPECED_AlabamaPartBSSIPEvaluationPlanFFY-2020updated1.13.2022_V1.0.pdf

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

NO

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

The SES reports on a school-year basis. In FFY 2022, Indicator 17 events report activities and data between 8/1/22 and 7/31/23. The AL SSIP implements 7 improvement strategies under 2 goals and whole-project activities.

Goal 1 (G1) BEHAVIOR & INSTRUCTIONAL SUPPORTS: Improve instruction and school climate through CT/CP, implement behavior supports, and develop implementation teams to support these initiatives. In FFY 2022, 322 teachers received G1 coaching and 813 coaching events. G1 schools averaged 16 coaching events per cohort school during the 2022-23 school year (SY), which was below the target of 40 per school. The average number of individuals coached per school was 7.

STRATEGY 1. Provide high-quality, engaging instruction and co-teaching in the general education classroom.

Activities are designed to increase CT and SDI in SSIP cohort schools through PL (training, coaching, and resources). There were 3 CT/CP and SDI trainings offered during FFY 2022. The number of participating teachers decreased by 14 in the past two years due to teacher shortages and retention (24 teachers in five schools were members of CT dyads). In the current reporting year, 4% of SSIP coaching focused on Strategy 1 (2% for CT/CP; 2% for reading/math interventions).

STRATEGY 2. Offer safe and supportive learning environments to middle schools through the CHAMPS and Foundations evidence-based programs.

In collaboration with the AL SPDG, SSIP cohort districts participate in a 3-year PL cycle on Positive Behavioral Interventions and Supports (PBIS) universal schoolwide strategies using the S&CS Foundations curriculum. Each district and school in a cohort participates in 3 years of Foundations training, coaching by an SSIP Coach, and site reviews by S&CS consultants. As the previous SPDG ended, Cohort 4 schools participated in an abbreviated training cycle. They continued to receive coaching support and attend refresher training events. Cohort districts and schools also participated annually in S&CS' CHAMPS or DSC training, which provides universal behavior strategies at the classroom level and follow-up coaching on CHAMPS/DSC.

No new cohorts were selected for Strategy 2 in FFY 2022. In total, 72 schools in 26 districts participated in Strategy 2 Cohorts 1-4. In FFY 2022, there were 7 training events related to Strategy 2. Training included Foundations (n = 2), CHAMPS (n = 3), and DSC (n = 2). Among the 72 cohort schools, 26 participated in training during the 2022-23 SY. Of the 46 schools not participating, funding/contract, substitute availability, and sustaining the work were factors cited as reasons they did not attend. In FFY 2022, 68% of SSIP coaching focused on Strategy 2: Foundations (28%) and CHAMPS/DSC (40%).

STRATEGY 3. Create a system and culture for supporting students with disabilities, teachers, and administrators.

Activities included creating Foundations Implementation Teams for cohort districts and schools and training to support G1 infrastructure. Training for Implementation Teams occurred through Foundations or CT/CP/SDI, followed by SSIP coaching, and 95% (69 schools) continued their Implementation Teams. In FFY 2022, 19% of coaching focused on Strategy 3: Implementation Teams (1%), Data Systems/Data Use (11%), and Sustainability Planning (7%). There was a 7% increase in Strategy 3 coaching compared to FFY 2021.

Goal 2 (G2) SECONDARY TRANSITION: Improving secondary transition services in cohort districts, schools, and classes and building infrastructure for the entire state to improve transition and post-school outcomes.

STRATEGY 4. Create and publicize a model of comprehensive, research-based transition services for high school SWDs through the development of transition demonstration sites.

Activities included improving transition services in cohort schools, such as developing local transition teams. Teachers and administrators in selected cohort schools participated in training on implementing an evidence-based transition curriculum and developing transition classes. Additional coaching was provided on developing school- and community-based work opportunities, transition teams, and transition planning. No new cohorts were selected for Strategy 4. In total, 49 schools in 19 districts have participated in Cohorts 1-4 for Strategy 4, with 45 schools continuing to participate. In FFY 2022, 97 individuals participated in training, coaching, a transition team, and/or teaching a transition class. Six transition training events were offered, with 82 participants—a 193% increase over FFY 2021. Additionally, 7% of SSIP coaching focused on Strategy 4. A total of 42 individuals were coached during the 2022-23 SY. There were 134 coaching events.

STRATEGY 5. Collaborate with transition groups to coordinate the statewide transition infrastructure and strengthen the delivery of transition services from state to student.

Activities focus on developing infrastructure at the state level to improve secondary transition and PSOs. The SES shared secondary transition resources with APEC and families participating in the transition focus groups. The SES continued to promote the Engage Alabama App to assist transition-age students in Alabama with identifying individual goals, strengths, and preferences. The SES offered 9 state and regional training events for over 88 special education teachers. Participants reported increased knowledge about transition assessments, IEP development, career services and opportunities, and new tools and resources. The SES also sent reminders to districts regarding the PSO survey data collection and the training created previously as part of SSIP Strategy 5. Additionally, the SES Data Team presented at the statewide Back-to-School meeting in August 2022 regarding data collection and data integrity. The AL SPDG provided 35 districts with funds to purchase evidence-based transition curricula. These districts represent each region of the state. Among the 35 evidence-based transition curriculum districts, 12 subsequently became transition cohort schools in Strategy 4.

WHOLE PROJECT ACTIVITIES: Two SSIP strategies focused on the project as a whole, including SSIP management (governance, finance, accountability/monitoring), as well as parent and other stakeholder engagement.

STRATEGY 6. Manage project activities based on the implementation science practices of selection, training, coaching, data/evaluation, and systemic improvement.

Activities focus on the implementation of the project, such as staff hiring and developing contracts, data and evaluation, and PL for SSIP staff and coaches.

The ending of the previous AL SPDG impacted corresponding SSIP activities. During the 2022-23 SY, fewer contracts were executed than in prior years of the SSIP.

SSIP Coaches completed training on topics such as literacy, high-leverage practices, and inclusive practices. Additionally, SSIP Coaches participated in a PL community (Coaches' Meetings) that met 3 times during the current reporting period. The SSIP Team conducted monthly meetings to provide updates on project activities and review evaluation data.

STRATEGY 7. Engage parents and stakeholders in training, information sharing, and feedback for program improvement.

Activities address communication and engagement with stakeholders, including families of SWD. Also, SSIP staff presented to the SEAP to gather input on targets and progress. The SSIP Team met with 3 groups of families of students in grades 6-12 to conduct a focus group and gather input on the SSIP. These focus groups were conducted in coordination with staff from AL's PTI Center, APEC. Additional survey data were collected from focus group participants. APEC led 6 trainings in June 2022. Topics included understanding benefits, self-employment, assistive technology, transition planning, transition resources, independent living, dream-building, and achieving self-support.

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.

G1: BEHAVIOR & INSTRUCTIONAL SUPPORTS

STRATEGY 1. Outcomes focused on quality standards and PL/TA.

Pre/post training learning measure results demonstrated gains in knowledge after training. Average CT/CP and SDI learning measure scores increased from 66% before training to 92% after training (26% gain); learning measure gains increased by 7% compared to FFY 2021. On the SSIP Stakeholder Survey, 82% of CT teachers reported that SSIP PL had increased their skills. CT dyads were able to use PL knowledge to implement CT/CP. On the Coaches' Checklist, CT ratings of implementing CT/CP and applying CHAMPS in co-taught classes averaged 95% with participating cohort schools. Also, teachers demonstrated fidelity for CT (88%) and CP (71%). Among responding SSIP Stakeholder Survey co-teachers, 80% reported more general and special education collaboration, and 85% reported students benefited from the CT. The 2022-23 AL state assessment data were analyzed for SSIP schools with CT/CP dyads. The results showed 46% of all students and 13% of SWD were proficient in English Language Arts, representing a 33% gap. For Math, 23% of all students and 6% of SWD were proficient, representing a 17% gap. Because these outcome data are for all classes and not specific to co-taught classes, results should be interpreted with caution.

STRATEGY 2. Outcomes focused on PL and quality standards.

Strategy 2 learning scores increased from 74% before training to 90% after training (16% gain). Confidence in implementing the behavior initiatives increased by 17% after training, from 73% to 90%. The SSIP Stakeholder Survey showed increased skills/capacity regarding classroom management (85%). On the Coaches' Checklist, ratings of implementation of using data at the school level, providing turnaround training, and participating in training averaged 88% among the cohort schools. Schools implemented Foundations with fidelity (79%), and teachers implemented CHAMPS/DSC with fidelity (89%). Both measures were 3% higher than FFY 2021. Among cohort SSIP Stakeholder Survey participants, 77% reported school climate had improved; 77% reported improved collaboration; 82% reported districts and schools benefitted from being involved; and 79% reported improved social and behavior student outcomes. All of these measures were higher than FFY 2021. Parents of students in Strategy 2 schools participated in a S&CS Parent Survey. Among responding parents, the average rating of parent engagement was 87% (a 4% decrease). Compared to their baseline years, chronic absences in cohort schools showed more improvement than statewide for Cohort 1 for all students and SWD compared to their baseline (-0.52% and -1.46%, respectively). The state had a small increase for all students (0.22%) and a decrease for SWD (-1.13%). Therefore, the Cohort 1 SSIP schools improved their chronic absence data more than the baseline. For Cohorts 2 and 3, however, there were increases in chronic absences compared to baseline for all students (Cohort 2, 0.67%; Cohort 3, 9.65%) and SWD (Cohort 2, 0.98%; Cohort 3, 7.84%). Due to the impact of COVID-19, attendance data should be interpreted with caution.

STRATEGY 3. Outcomes focused on governance, data, and accountability/monitoring.

Coaches' Checklist results averaged 96% for the 5 School Implementation Team elements (16% increase over the past 2 years). As determined from the SSIP Stakeholder Survey, implementation teams were stronger due to the SSIP (79%), a 2% increase over FFY 2021. Survey data suggest structures were improved to support implementation of G1 practices. In fact, 82% reported increased skills/capacity to implement a schoolwide system of behavior supports, and 82% had increased capacity to use data for decision-making. These results were the same as FFY 2021.

G2: SECONDARY TRANSITION

STRATEGY 4. Outcomes focused on governance, accountability and monitoring, quality standards, and PL/TA.

Pre/post-training learning measures showed large gains in learning; the average pre-training score was 68%; the average post-training score was 94% (26% gain). Post-training confidence ratings to use the transition curriculum increased to 93% (22% gain). SSIP Transition Stakeholder Survey results found participants had increased skills/capacity to implement aspects of a transition curriculum (94%), transition program (94%), and use data for decision-making (97%), a 7-10% increase. Outcome measures on the Transition Stakeholder Survey for all cohorts averaged 97% for all measures, including benefits from being involved in the SSIP, and improved student outcomes. Transition Team members in Strategy 4 schools rated their SSIP-developed teams on the Team Functioning Scale (TFS). The average TFS rating was 88%, and domain ratings included Structures (86%), Communication (91%), and Focus of the Group (87%); an overall increase compared to FFY 2021. Furthermore, Transition Stakeholder Survey respondents (97%) felt their Transition Team was stronger due to the SSIP. SWD in SSIP transition cohort schools had improved graduation outcomes. Among Cohort 1 schools, the increase in graduation rates from baseline to 2022-23 was 35%, whereas the increase among Alabama schools was 21%. There were insufficient data for Cohort 2. SWD in transition Cohort 1 schools also saw improved college and career readiness compared to state averages. From baseline to 2022-23, Cohort 1 schools averaged a 35% gain, whereas the state averaged a 30% increase. On the Indicator 8 AL Parent Survey, parents of CWDs were asked if their child attended his/her last IEP meeting and if the child actively participated. An analysis of SSIP G2 districts found 67% of students in grades 9-12 attended their last IEP meeting, and of those, 92% actively participated (targets were 50%). Both percentages increased by 1% compared to FFY 2021.

STRATEGY 5. Outcomes focused on governance, data, and accountability/monitoring.

The progress toward the SiMR (Section A) provides Indicator 14b results. When looking at the same G2 cohort districts, SSIP districts showed a 9.0% gain in Indicator 14b results over 6 years. The state saw a 5.6% increase for the same timeframe. Therefore, SSIP schools participating in G2 had a larger increase in the SiMR than the state average. Special Education Coordinators who received funding to purchase an evidence-based transition curriculum were surveyed about the usage of the funds and 91% of respondents stated they used the transition curriculum purchased to offer a transition class in their districts.

WHOLE PROJECT

STRATEGY 6. Outputs and outcomes focused on governance, data, finance, accountability/monitoring, and PL/TA.

The SSIP Stakeholder Survey asked participants to rate coaching, project implementation measures, and support for the project. The coaching ratings averaged 89% for G1 and 100% for G2. The implementation measures averaged 80% for G1 and 91% for G2. Project participants also rated their support for the project as 86% for G1 and 100% for G2 (targets were 80%). All measures and all averages for coaching, implementation, and support measures met their targets.

STRATEGY 7. Outcomes focused on accountability/monitoring and TA.

Parents/family members who attended the transition focus groups completed the SSIP Resources Survey. Results showed 88% had more knowledge about transition. Among family members, 81% felt confident about helping their child with post-school planning. SPP/APR Indicator 8 data show a slight difference between SSIP districts and all results for FFY 2022. Among the 22,031 respondents, 73.1% of all parents reported schools facilitated parent involvement, whereas 74.3% of parents in SSIP districts reported involvement (a 1.2% difference). Among SSIP G1 schools, 75.8% of parents reported that schools facilitated parent involvement, a 2.7% difference from the state. Among G2 schools, 72.7% of parents reported parent involvement, a -0.4% difference compared to the state.

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

NO

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

The information below includes a summary of Goal 1, Goal 2, and Whole Project Activities organized by themes during this reporting period.

To improve communication and team-building opportunities, the SES will continue to:

- provide opportunities for parent and family stakeholder decision-making and engagement.
- support transition focus groups for parents.
- include parents and counselors in SSIP implementation Teams.
- convene SSIP Instructional Coaches PLC.
- improve parents' access to documents related to transition.
- extend self-determination/self-advocacy training to improve student engagement.

To support PL training, and coaching efforts, the SES will continue to:

- convene joint training for parents and educators about IEP development for transition.
- provide Foundations, co-teaching, and co-planning training for SSIP coaches and administrators at SSIP Project Sites.
- ensure that practitioners and administrators receive ongoing PD in Implementation Science.

To increase community-based experiences, the SES will continue to:

- disseminate funding applications to LEAs, including an opportunity to purchase evidence-based transition curricula.
- provide training for funded LEAs on scheduling and providing transition instruction.

To improve communication for SSIP Project and Site Personnel, the SES will continue to:

- communicate and market efforts between project and site personnel.
- present at ALSDE Curriculum and Instruction meetings and MEGA conference.

The AL SSIP staff, coaches, and consultants will continue to market the SSIP successes throughout the state to encourage other districts to visit cohort sites and adopt the AL SSIP practices.

In addition to the data collection, the AL SSIP Evaluator will work with the AL SSIP staff, consultants, and stakeholders to 1) Continue to identify strategies and opportunities for Goal 1 and 2 teams to review and use data; 2) Monitor outcome data submissions from SSIP and Transition cohort schools; 3) Review data expectations with new staff and administrators submitting data; 4) Develop plans based on disaggregated FFY 2022 Indicator 14 results; 5) Share expectations for data collection, including dates, requirements by school, etc.; and 6) Provide training and TA to sites regarding data usage, as needed.

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

Alabama's Indicator 17 includes three evidence-based practices:

Strategy 1: Co-teaching/co-planning;

Strategy 2: Positive behavior supports through universal schoolwide Foundations and classroom-level CHAMPS and DSC; and

Strategy 4: Implementation of a secondary transition curriculum.

Provide a summary of each evidence-based practices.

The AL SSIP has continued to implement three evidence-based practices: co-teaching and co-planning, PBIS using the Safe and Civil Schools model, and secondary transition curricula.

Co-Teaching/Co-Planning

Co-teaching (Friend & Cook, 2013) and co-planning (Ploessl et al., 2010) are implemented in Strategy 1. Teachers in select cohort schools, primarily Cohorts 1 and 2, have received training on the Friend and Cook co-teaching model from SSIP coaches trained on the model and/or the University of Montevallo faculty. Additional training has been offered on co-planning and SDI.

Following the Friend and Cook model, the training consists of the research behind co-teaching, six approaches to CT, the roles of the general educator and the specialist, communication, how to co-plan and the materials needed, and how to apply SDI in the classroom. Additionally, teachers are able to practice CT/CP. Teachers participating in the training completed pre/post evaluations to gauge content knowledge and confidence gains.

Following training, co-teachers received coaching from SSIP Coaches. Furthermore, the University of Montevallo faculty has provided online coaching with co-teachers and coaches to further assist PL.

During the 2022-2023 school year, three training events were offered for CT/CP and SDI. SSIP Coaches offered the two-day training in June and July 2023. The average satisfaction rating among training participants was 97%, and the average confidence rating increased from 70% before training to 89% after training, representing a 19% gain in confidence to co-teach and co-plan.

PBIS: Foundations and CHAMPS/DSC

The S&CS' model of PBIS, including universal Foundations and CHAMPS/DSC (Sprick, 2009) are implemented in Strategy 2. All but two of the Goal 1 cohort schools have participated in PL for these evidence-based strategies.

For Foundations, schools develop Foundations Teams that are representative of certified and non-certified building staff. Foundations Team members were tasked with attending Foundations training, provided by Safe and Civil Schools consultants, and using the information to implement action plans. The three-year training cycle is based on six modules from the Foundations books. Each cohort of Foundations Team members attends six days of training for a total of 18 days of training. Each year, members attend two days of training three times per year. Between sessions, Foundations Team members applied the information at the school level, including providing turn-around training to all staff. SSIP Cohorts 1-4 Foundations Team members and any new administrators had the opportunity to attend a Foundations refresher training following the three-year training cycle.

CHAMPS and DSC PL focus on individual teachers, as well as school administrators. Teachers and administrators from Strategy 2 cohort schools attend a one or two-day training conducted once per year by Safe and Civil Schools consultants. The training is based on the CHAMPS or Discipline in the Secondary Classroom books, and all participants receive a copy of the book. While only a small number of teachers per school can attend CHAMPS/DSC training each year, many SSIP districts have contracted to offer districtwide CHAMPS training. Like Foundations, SSIP Cohort 1-4 schools had the opportunity to send teachers and administrators to refresher training following the three-year training cycle.

Following training, Foundations Teams, CHAMPS/DSC training participants, and district and school administrators received coaching from SSIP Coaches. Safe and Civil Schools consultants conduct virtual site visits to provide Foundations Teams with feedback.

During the 2022-2023 school year, there were seven behavior training events (two Foundations, three CHAMPS, two DSC events). There were 278 unique attendees at these training events. The average satisfaction rating among training participants was 86% (87% for Foundations, 83% for CHAMPS, and 93% for DSC). The average confidence rating across all behavior trainings increased from 73% before training to 90% after training, representing a 17% gain in confidence to implement Foundations, CHAMPS, or DSC.

Secondary Transition Curricula

The secondary transition curricula strategy focuses on PL based on the transition curriculum selected by each cohort school. The James Stanfield Transitions curriculum, the Council for Exceptional Children's Life Centered Education Transition Curriculum (the LCE), and Education Associates' Project Discovery and Achieve Life Skills have been curricula purchased and used by SSIP schools. SSIP Transition Coaches provide training on using the curriculum, selecting lessons based on students' IEPs, and designing a credit-bearing Transition class. Subsequent coaching also focuses on improving instructional quality when implementing the curriculum.

There were six transition training events during the 2022-2023 school year. Five events were led by national trainers: transition assessment, facilitating student work experiences, stepping up transition, making families and students transition partners, and evidence-based transition practices. One event was transition curricula training led by an SSIP coach. A total of 82 unique teachers and administrators attended the trainings. The average satisfaction rating among training participants was 97%, and the average confidence rating increased by 22% to 93% after training. In 2022-2023, each cohort district averaged five coaching events, and a total of 42 individuals were coached.

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.

When developing the state's Theory of Action, early analyses indicated approximately 85% of Alabama SWD were placed in general education environments for more than 80% of the school day. Yet, proficiency data for SWD remained static. The SSIP Team identified the need to provide additional supports to SWD in the general education classroom.

As noted in the state's Theory of Action, supports with instruction and behavior were needed at the middle school level. Alabama's SSIP initially focused on middle schools, although participating districts quickly recognized the benefit of extending the focus to elementary and high schools to ensure continuity.

Co-Teaching/Co-Planning

Co-teaching (Friend & Cook, 2013) and co-planning (Ploessl et al., 2010) were practices identified to help ensure students are prepared to succeed at coursework, which will improve the likelihood of positive post-school outcomes. CP allows both special and general educators to share their instructional and content expertise when planning for lessons, and having two teachers in the classroom allows for more grouping, SDI, and individualized instruction. CT/CP provide SWD instructional supports that will help them to be successful in classes, remain in the general education classroom, and graduate.

This evidence-based practice is designed to change: 1) school practices through scheduling CT on the class schedule; 2) teacher practices through the changes in approach to instruction (e.g., small groups, lesson planning, ensuring IEP goals are addressed, etc.) and the use of SDI; and 3) child outcomes through a smaller student-teacher ratio and the use of modified instructional practices.

PBIS: Foundations and CHAMPS/DSC

The AL SSIP implements the S&CS' model of PBIS (e.g., Sprick, 2009) through the use of schoolwide Foundations and classroom-level CHAMPS/DSC. State data showed attendance and behavior as two factors that limited instructional time, particularly among SWD. Implementing PBIS efforts allowed the districts and schools to concentrate more time on instruction and creating improved school and classroom climate, which would increase attendance and decrease time out of the classroom for behavior incidents. Like CT/CP, improving school and classroom climate helps students remain in school and graduate.

This evidence-based practice is designed to change: 1) district and school policies, procedures, and practices related to behavior (e.g., attendance policies, office discipline referral policies, daily procedures in common areas, teacher presence in common areas, data-based decision-making, etc.); 2) teacher practices through the changes in addressing behaviors, approaches to instruction, and classroom structures; 3) parent outcomes through parent surveys and engagement in schools; and 4) child outcomes through changes to attendance and discipline policies, school climate, and instruction.

Secondary Transition Curricula

The third evidence-based practice, secondary transition curricula, focuses on providing supports that directly impact post-school preparedness. The AL SSIP provides funding to districts to select and teach an evidence-based transition curriculum, such as the James Stanfield Transitions curriculum, the Council for Exceptional Children's Life Centered Education Transition Curriculum (the LCE), or Education: Associates' Project Discovery. Funding for transition sites was contingent on teaching the curriculum in a credit-bearing transition course and further developing a comprehensive transition program. The AL SSIP provides funding for both middle and high school transition classes. The curricula and courses allow teachers to focus on building knowledge and skills needed for successful post-school outcomes.

This evidence-based practice is designed to change 1) teacher practices through the changes in instructional content, instructional quality, and the development of a transition course (i.e., course structure) and 2) child outcomes through changes in knowledge about transition, transition experiences, and skill development. Although an evidence-based transition curriculum would have less impact on district policies and practices, AL SSIP Strategy 4 also includes the development of transition programs that impact district policies and practices.

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

Fidelity data were collected for co-planning; co-teaching; Foundations; CHAMPS/DSC; and secondary transition for the 2022-2023 school year (August 1, 2022 – July 31, 2023).

Co-Teaching

In March 2023, SSIP co-teaching teachers assessed their co-teaching implementation using the Classroom Fidelity Observation Form [adapted from Friend & Cook (2013) and Murawski & Lochner (2011)]. The performance measure was that 70% of co-teachers would score 75% or greater on the co-teaching fidelity assessment. SSIP Coaches provided an external view of the quality of co-teaching implementation.

For FFY 2022, the results found 88% of co-teachers achieved fidelity with co-teaching, which exceeded the target of 70%. The highest-rated domain was the role of the specialist, and the lowest-rated domain was the co-teaching models.

Co-Planning

In March 2023, SSIP co-teaching teachers assessed their co-planning implementation using the Co-Planning Observation Form (Howard, 2016). The performance measure was that 70% of co-teachers would score 75% or greater on the co-planning fidelity assessment.

For FFY 2022, 71% of teachers demonstrated co-planning fidelity. These results met the 70% target. The highest-rated items were reviewing IEP/504 goals for SDI and accommodations, pre-selecting groups, and the middle/end of the lesson (all 100%); the lowest rated items addressed the co-planning materials (71%).

CHAMPS/DSC

CHAMPS and DSC were assessed together as the core components are the same; while CHAMPS is designed for implementation in kindergarten through 12th grade, DSC concentrates on implementation at the secondary level. CHAMPS/DSC teachers were assessed for fidelity using the STOIC Checklist, developed by Safe & Civil Schools. The performance measure was that 70% of teachers can implement 75% of the core components of the STOIC Checklist.

The FFY 2022 results found 89% of teachers implemented CHAMPS/DSC with fidelity, which exceeded the 70% target. This percentage was 3% higher than the 2021-2022 school year. Teachers in Cohort 1 schools averaged the highest (100% achieved fidelity), 86% of teachers in Cohort 2 schools achieved fidelity, 89% of teachers in Cohort 3 schools achieved fidelity, and 88% of teachers in Cohort 4 schools achieved fidelity. Furthermore, the length of years implementing CHAMPS/DSC was related to fidelity scores: 100% of teachers implementing for four or more years achieved fidelity, whereas 90% of teachers implementing for one to three years met the fidelity target, and 68% of teachers implementing for less than one year met the fidelity target.

Foundations

SSIP Coaches used the Benchmarks of Quality (BoQ) to assess Foundations fidelity. Coaches worked with each school's Foundations Team to score elements on the BoQ. SSIP Coaches submitted the final scores for each school. The performance measure is that 70% of schools can demonstrate fidelity in 75% of the Foundations components after a three-year training cycle. All four cohorts were included in the current report.

For FFY 2022, 83% of the reporting Cohort 1-4 schools demonstrated fidelity with Foundations, which exceeded the 70% target. This percentage reflects a 7% increase compared to the number of schools achieving fidelity in 2021-2022. There were marked differences among cohorts: 100% of Cohort 1 schools, 85% of Cohort 2 schools, 80% of Cohort 3 schools, and 73% of Cohort 4 schools achieved fidelity. Overall, the average rating on the BoQ was 81%.

Secondary Transition

Teachers implementing an evidence-based transition curriculum in SSIP districts completed the Transition Fidelity Form in March 2023. The form was developed to align with the AL SSIP Transition Fidelity Observation Form. Additionally, the external evaluator conducted fidelity checks using the Transition Fidelity Form for five teachers (16%). The performance measure is 70% of teachers score 75% or higher on the assessment of implementation of an evidence-based transition curriculum.

In FFY 2022, 87% of teachers reported fidelity. This percentage was 3% higher than FFY 2021. The average score on the Transition Fidelity Form was 85%. Instructional components of fidelity implementation scored higher (87%) than curriculum components (80%). Cohort scores ranged from 71% to 100% achieving fidelity.

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.

In addition to the fidelity data, outcome data for each evidence-based practice were presented under the infrastructure improvement strategy question listed above: Strategy 1 includes CT/CP; Strategy 2 includes CHAMPS/DSC and Foundations; and Strategy 4 includes secondary transition.

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

The information below includes a summary of Goal 1, Goal 2, and Whole Project Activities organized by themes during this reporting period.

To improve communication and team-building opportunities, the ALSDE will continue to:

- provide opportunities for parent and family stakeholder decision-making and engagement.
- support transition focus groups for parents.
- include parents and counselors in SSIP implementation Teams.
- convene SSIP Instructional Coaches PLC.
- improve parents' access to documents related to transition.
- extend self-determination/self-advocacy training to improve student engagement.
- convene joint training opportunities around transition and self-determination for educators and parents.

To support PD, training, and coaching efforts, the ALSDE will continue to:

- convene joint training for parents and educators about IEP development for transition.
- provide training on evidence-based practices for SSIP coaches and administrators at SSIP Project Sites.
- ensure that practitioners and administrators receive ongoing PD in implementation science.

To increase community-based experiences, the ALSDE will continue to:

- disseminate funding applications to LEAs to purchase evidence-based transition curricula.
- provide training for funded LEAs on scheduling and providing transition instruction.

To improve communication for SSIP Project and Site Personnel, the ALSDE will continue to:

- communicate and market efforts between project and site personnel.
- present at ALSDE Curriculum and Instruction meetings and MEGA conference.

The AL SSIP staff, coaches, and consultants will continue to market the SSIP successes throughout the state to encourage other districts to cohort schools and adopt the AL SSIP practices. Additionally, SSIP Coaches will share the practices with new SPDG schools.

In addition to the data collection and evaluation changes, the AL SSIP Evaluator will work with the AL SSIP staff, consultants, and stakeholders to 1) Continue to identify strategies and opportunities for Goal 1 and 2 teams to review and use data; 2) Monitor outcome data submissions from SSIP cohort schools; 3) Review data expectations with new staff and administrators submitting data; 4) Share expectations for data collection, including dates, requirements by school, etc.; and 5) Provide training and TA to sites regarding data usage, as needed.

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.

Outcome data show positive results and improvement, as noted in prior reports and in Section B below. The state's SiMR, Indicator 14b, has increased over 20% compared to the state's 2009 baseline.

An analysis of SSIP data in SSIP cohort districts suggests the activities are resulting in improvements to the SiMR. For example, in FFY 2016, the state's Indicator 14b results for the state sample were 60.0%, and SSIP Cohort 1 and 2 transition districts were 53.8%. In FFY 2022, the results for the same cohort of Alabama districts in the sample were 65.5% (a 5.5% gain). For SSIP Cohorts 1 and 2 transition districts, the FFY 2022 Indicator 14b data were 64.2% (a 10.4% gain). Even though the SSIP cohort district results were 1.3% less than the state results, the trajectory suggests SSIP cohort districts are improving at a much faster rate (10.4% for SSIP vs. 5.5% for the state).

These data, together with other evaluation data described below, indicate the SSIP improvement strategies are positively impacting the SiMR.

Section C: Stakeholder Engagement

Description of Stakeholder Input

Our state Special Education Advisory Panel (SEAP) is an integral group of stakeholders who provide input on target setting and improvement activities, with meetings being held quarterly. Each meeting provides a forum for the solicitation of feedback regarding SPP/APR targets. During these meetings, the panel members and public participants are provided updates on the previously held stakeholder input sessions and SPP/APR indicators. During this reporting period, the SEAP representation includes Parents (15), Corrections (3), Rehabilitation Services (3), Alabama Parent Education Center (PTI; 2), Foster Care (1), Higher Education (2), LEA Special Education Coordinator/Director (1), McKinney-Vento Administrator (1), Teachers (2), and Individuals with Disabilities (3).

The ALSDE sought broad stakeholder input from the SEAP, LEA staff, and other stakeholders in order to review and revise, as necessary, SPP/APR targets. To continue meaningful work in advisement of the SPP/APR, the SES held work sessions with the SEAP and other stakeholders to request input and recommendations on SPP/APR targets and to provide input and improvement strategies on all indicators demonstrating slippage. The work sessions consisted of video recordings, teleconferences, and face-to-face meetings. Participants were provided with current and trend data for the indicators, informed of target-setting strategies, and given the opportunity to provide feedback in setting the targets. Stakeholder input was also requested from LEA Special Education Coordinators/Directors and other ALSDE staff at two face-to-face meetings regarding the state's definition of significant discrepancy and the methodology used to determine an LEA as having significant discrepancy.

In addition to seeking input, the SES provided training for new and veteran SEAP members and LEA staff (e.g., Special Education Coordinators/Directors, special education teachers) regarding SPP/APR content and relevant data sources. Ongoing training has been conducted and is being planned to ensure that SEAP members and LEA staff are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets, reviewing indicator data, and providing recommendations for improvement strategies.

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

SEAP
In FFY 2022, the ALSDE solicited input and recommendations from SEAP members and participants on SPP/APR indicators, particularly those demonstrating slippage. The SES also provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training is being planned to ensure that SEAP members are kept abreast of SPP/APR reporting requirements and to ensure they are engaged in setting and/or revising indicator targets.

Parents

The ALSDE has partnered with the APEC to lead family focus groups. The focus groups, conducted virtually and representing the three regions of the state, gathered input from family members of students in grades 6-12 or recent leavers. The focus groups allowed the SES to hear family members' concerns, suggestions, and needs. The SES staff presented on the SSIP to gather feedback on secondary transition and post-school outcomes.

Transition

SSIP staff have presented on transition and post-school outcomes at several meetings. The SES staff presented information about the SPP/APR and SSIP transition activities at the SEAP meetings and sought feedback from the SEAP. SSIP Coaches also presented at the Regional Special Education Coordinators' Meetings, the Alabama CEC regarding the transition work, and the ALSDE Back to School meeting with district leaders. SES contractor, Public Consulting Group (PCG), provided transition training for LEA and school staff.

Alabama Alignment and MTSS

Since 2019, the ALSDE has sought to implement evidence-based practices and align systems across ALSDE in order to improve student supports. Staff

from NCSI facilitated the ongoing meetings to develop a multi-tiered system of supports. Representatives from across the ALSDE included the SES section, Alabama Reading Initiative (ARI), Alabama Math and Science Initiative (AMSTI), Instructional Services, and Federal Programs.

SES staff were part of the MTSS planning, presented on SSIP data, and sought feedback from stakeholders to guide the decision-making process. Presentations to the upper level and general education management and staff within the context of the Alabama systems alignment project further the goal to implement MTSS statewide through data sharing. Furthermore, the ALSDE developed an MTSS section to implement a statewide framework. The SES is partnering with the MTSS section to provide academic support and a systems framework that has been successful through the SSIP.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

Family focus group and interview analyses found the three top concerns among participants were:

- Inform and prepare families and SWD regarding post-secondary options and supports;
- Better inform families about transition services and available resources;
- Improve transition preparation and instruction at the middle school level.

These concerns are long-term areas to address. The SES has been addressing these issues by:

- Continuing to gather family feedback through focus groups, interviews, and surveys;
- Working with the ALSDE departments and the SPDG to develop a multi-tiered system of supports (MTSS) framework for the state;
- Partnering with the National Technical Assistance Center on Transition to provide training;
- Providing TA to districts regarding instruction; and
- Providing ongoing training through the SSIP, SPDG, and the partnership with APEC to improve collaboration with families.

Additional Implementation Activities

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

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

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

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

The State did not provide the numerator and denominator descriptions in the FFY 2022 SPP/APR Data table.

17 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role:

Designated by the Chief State School Officer to certify

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

Name:

Shanthia Washington

Title:

Assistant State Superintendent

Email:

shanthia.washington@alsde.edu

Phone:

3346944517

Submitted on:

Determination Enclosures

RDA Matrix

2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results			
Compliance			

2024 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments		
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments		
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress		
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress		
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress		
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress		

Math Assessment Elements

Math Assessment Elements	Performance (%)	Score
Percentage of 4th Grade Children with Disabilities Participating in Regular Statewide Assessments		
Percentage of 8th Grade Children with Disabilities Participating in Regular Statewide Assessments		
Percentage of 4th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress		
Percentage of 4th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress		
Percentage of 8th Grade Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress		
Percentage of 8th Grade Children with Disabilities Included in Testing on the National Assessment of Educational Progress		

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

Exiting Data Elements

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

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

2024 Part B Compliance Matrix

Part B Compliance Indicator (2)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2021 (3)	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.			
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.			
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.			
Indicator 11: Timely initial evaluation			
Indicator 12: IEP developed and implemented by third birthday			
Indicator 13: Secondary transition			
Timely and Accurate State-Reported Data			
Timely State Complaint Decisions			
Timely Due Process Hearing Decisions			
Longstanding Noncompliance			
Specific Conditions			
Uncorrected identified noncompliance			

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

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

Data Rubric

FFY 2022 APR (1)

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

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

APR Score Calculation

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

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

618 Data (2)

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

618 Score Calculation

Subtotal	21
Grand Total (Subtotal X 1.23809524) =	26.00

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

Indicator Calculation

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

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

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 Submission

SPP/APR Data

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

Part B 618 Data

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

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

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

How the Department Made Determinations

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

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