

# **STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B**

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

**For reporting on  
FFY 2020**

**Alabama**



**PART B DUE February 1, 2022**

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

## Introduction

### Instructions

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

### Intro - Indicator Data

#### Executive Summary

#### Additional information related to data collection and reporting

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

143

#### General Supervision System:

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

State Performance Plan/Annual Performance Report

The State Performance Plan/Annual Performance Report (SPP/APR) focuses on a balance between compliance and improving results for children and youths with individualized education programs (IEPs). As needed and with stakeholder input, review and revisions are made to the SPP/APR, including SPP targets, to ensure that all are designed to be SMART: Specific, Measurable, Achievable, Realistic and Timely. Annual state reporting of performance on the SPP indicators through the APR is an essential component of the accountability system. Annual public reporting on the SPP/APR is accomplished by posting on the ALSDE website along with the OSEP State Determination, through dissemination to the Special Education Advisory Panel (SEAP) and through media advisories. The state also reports annually to the public on the performance of LEAs compared to the state targets. The LEA Performance Profiles are posted on the ALSDE website no later than 120 days after submission of the APR each year.

Policies, Procedures and Effective Implementation

The Alabama Administrative Code (AAC) is the policy document that sets forth the state rules and requirements for the implementation of Part B of the Individuals with Disabilities Education Act (IDEA). The AAC is updated as needed and undergoes State Board of Education and broad stakeholders review to ensure compliance with federal and state guidelines. It is made available for public comment and then posted for the public at large on the ALSDE website; hard copies are provided to LEA staff during numerous statewide, regional, and local meetings throughout the year. Mastering the Maze is the procedures document that assists the school and provides personnel to complete the required forms through detailed explanations of each form required for the provision of free appropriate public education (FAPE) to all students with IEPs in Alabama, ages 3-21. Procedural compliance with state and federal requirements is monitored through SES's Continuous Improvement Process (CIP).

Reporting on 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 a district approval process for ensuring timely, complete and accurate data submissions for reporting purposes. The ALSDE provides LEAs with data analysis and planning tools (e.g., LEA Performance Profile, LEA-At-A-Glance) to examine regional and local data. The goal is to assist LEAs to identify barriers to improve performance on all indicators and to support sustained improvement.

Monitoring and Accountability

The SES Section participates with the department's monitoring process, which is a process where multiple sections of the ALSDE monitor LEAs on a cyclical basis. The SES Section conducts a multi-phased process known as the SES Comprehensive Monitoring: Continuous Improvement Process. The monitoring process provides an effective system of general supervision to (1) support practices that improve educational results and functional outcomes; (2) use multiple methods in identifying and correcting noncompliance within one year; and (3) use mechanisms (e.g., focused monitoring) to encourage and support improvement and to enforce compliance. The monitoring process consists of a Self-Assessment; Desk Audit; On-Site Monitoring; High Risk Assessment and Enhanced Self-Monitoring; a System Profile and Fiscal Review; a Student Services Review; and the State Performance Plan/Annual Performance Report Data and Indicator Review. The review is linked to systemic change and utilizes integrated, continuous feedback and support within a risk-based framework. This framework examines the risk potential exhibited by LEAs according to multiple risk elements such as Data Integrity, Results Indicator Data, Fiscal Data, Determination Status, Professional Learning and Coordinator Experience.

Provision of Targeted Technical Assistance and Professional Development

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

Effective System of Dispute Resolution

Alabama's dispute resolution process is linked into all aspects of its system of general supervision to ensure effective oversight and implementation of the IDEA Part B regulations that improve results for students with IEPs and their families. The system of dispute resolution includes processes such as facilitated IEPs, mediations, complaints, and impartial due process hearings. Staff from the SES Section are assigned to track timelines and investigate formal written complaints and due process hearing requests, as well as to track corrective actions that may result from the findings. These staff members schedule contracted trained mediators and impartial due process hearing officers on a random rotation basis. The AAC details the state policy and procedures for the formal dispute resolution processes at 290-8-9.08(9) (a)— 290-8-9.08(9)(c)17.(v)(V). Trainings are conducted on an ongoing basis for Dispute Resolution state staff, contracted mediators, and impartial due process hearing officers. The dispute resolution data for specific LEAs are reviewed to determine whether patterns or trends exist within written state complaints and due process hearings and to determine what issues may be occurring that may impact the provision of FAPE for students in particular school systems. These dispute resolution patterns, trends, and issues inform both on-site and off-site monitoring activities, as appropriate.

## Responsible Fiscal Management System

Alabama's fiscal management requirements are based on the U. S. Education Department General Administrative Regulations (EDGAR), which is 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, as well as 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 Unit works closely with the SES Compliance Monitoring Unit, the SES Performance & Data Accountability Unit, 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 VI-B and Preschool budgets if the LEA has been determined to be significantly disproportionate 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. Staff in the Fiscal Management Unit provide technical assistance daily to the LEAs, staff, other state agencies, etc. 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, evidenced based technical assistance and support to LEAs.**

The ALSDE, SES Section recognizes that a process for delivering technical assistance (TA) to districts, families, and other agencies is an integral component of an effective system of general supervision. The SES Section 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: general, targeted, and intensive. Moreover, the TA process consists of several delivery options, including on-site, teleconferences, webinars, and through electronic means, such as Podcasts and Moodle.

**Universal TA:** The universal type of TA includes mass electronic information dissemination to address identified areas of needed TA. The SES Program Coordinator 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 staff develop "one-pagers" to provide information and assistance in multiple areas that are posted on the ALSDE website in order to be accessed by the public as well as school personnel. Other examples of universal TA include state-wide conferences with specifically-designed content to address common areas of need such as the Council of Administrators in Special Education (CASE) Fall and Spring Conferences, the Alabama Transition Conference, the MEGA Conference (Special Education Strand) conducted each July, and a Back-to-School Conference and Novice Coordinators Meeting designed especially for Special Education Coordinators in preparation for the school year. Also, conducting virtual office hours (e.g., Preschool and PowerSchool migration and Child Count) 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/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. Trainings under targeted TA are delivered by 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 and the Alabama Disabilities Advocacy Program (ADAP).

**Intensive TA:** The intensive type of TA is delivered to specific LEAs with needs identified through monitoring, dispute resolution, and/or the special education database to correct an identified area of non-compliance or to address another training need in order to improve the provision of a FAPE in the least restrictive environment (LRE) for children with IEPs.

### 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 is able to receive a FAPE in the LRE through the appropriate implementation of evidence-based practices that is delivered with fidelity according to the principles of Implementation Science and Adult Learning. Through a network of multiple venues, PD is offered and includes state-wide and regional conferences, dissemination of promising practices, online coursework through LRP Direct Step, and through state initiatives, such as the Alabama Reading Initiative (ARI) 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, and advocacy centers. Training and PD regarding low incidence disability areas, behavioral management, and the autism spectrum disorders are provided by content specific specialists.

The ALSDE and SES has operated a State Personnel Development Grant (SPDG) since approximately 2000. In 2017, a new SPDG was awarded to Alabama. The new SPDG focuses upon providing evidence-based PD in positive behavioral interventions and supports (PBIS) and secondary transition to projects throughout the state. Coaching for both parents and school staff is being provided to sustain effective practice and to disseminate findings through professional development at statewide conferences. The Alabama SPDG's project design is rooted in the foundation principles of Implementation Science (e.g., Dughman et al., 2011; Michigan Implementation Network, 2010; Fixsen et al., 2005; Fixsen & Blase, 2008; Duda et al., 2011). 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 are operated throughout the state that employ evidence-based practices rooted within the framework of Implementation Science. Staff within the schools and districts participate regularly in high quality professional development and receive on-going coaching from trained and experienced instructional coaches.

### Broad Stakeholder Input:

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

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

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

YES

**Number of Parent Members:**

### **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 Special Education Advisory Panel (SEAP), including parent members and parent center staff, were provided training from the SES staff regarding SPP/APR content and relevant data sources. 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.

### **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 staff 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, which not only increased participation, but also increased the diversity by targeting stakeholders in those areas, particularly in the central part of the state. The focus groups allowed SES staff to hear concerns, suggestions, and needs from family members. At the suggestion of the SEAP, information was posted to the ALSDE, SES YouTube channel for parents to easily access. 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 created an advisory panel recruitment flyer to target parents and other designated stakeholders. The flyer was sent on multiple occasions to LEA special education coordinators for distribution across the state. The ALSDE plans to redistribute a flyer to solicit participation of SEAP members to broaden the scope to include more diverse parents on the advisory panel. The ALSDE will continue to collaborate with Alabama Parent Education Center (APEC) to ensure that the stakeholders represent the diversity of 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 staff collaborated with the National Center on Systemic Improvement (NCSI) to establish a mechanism with timelines to solicit public input from the SEAP panel members. 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 SEAP. As a result, the SES staff established a calendar based on this partnership in which on-going work sessions were scheduled. The calendar included timelines of seven bi-weekly work sessions held between August 2021 and January 2022 to solicit input from SEAP. The SES staff held bi-weekly virtual meetings where SEAP members conducted drill down discussions related to the APR indicators. The process involved panel members reviewing a grouping of indicators, discussing data trends, developing improvement strategies and evaluating progress. SEAP members were given the opportunity to engage with SES content experts to address questions they had around the data and improvement strategies. Additionally, after the bi-weekly discussions, the SEAP members were asked to provide feedback and recommendations after having time to reflect on the data. All sessions were recorded and provided to panel members as reference to consider during reflection. The SEAP members were asked to provide additional recommendations to the SES staff prior to the next scheduled bi-weekly meeting. The SES staff created a YouTube recording for SEAP members to access an overview of all the SPP/APR indicators and results based on the FFY 2019 SPP/APR submitted in February 2020. This recording included information on the data sources and the data collection methods for each SPP/APR indicator. The SES staff continues to explore consultation options with NCSI.

### **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' target recommendations and after conducting internal discussions, the SEAP members were given a draft of the FFY 2020 SPP/APR to review and asked to provide further feedback to the SES staff prior to submission, as necessary.

### **Reporting to the Public**

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

The SPP/APR is shared with the public and media primarily via the ALSDE's website. The FFY 2019 SPP/APR can be found on the ALSDE's website at [www.alabamaachieves.org](http://www.alabamaachieves.org) and via the following path: Reports Data > Special Education Reports under Student Data > scroll down to SPP/APR, FFY 2020 SPP/APR. The direct link is: [https://www.alabamaachieves.org/reports-data/student-data/special-education-reports/#SPP\\_APR](https://www.alabamaachieves.org/reports-data/student-data/special-education-reports/#SPP_APR). Once the SPP/APR has been posted, a media news release is sent to forums statewide, including to state board members, LEAs, public information officers, education organizations, 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](http://www.alabamaachieves.org) and via the following path: Reports Data > Special Education Reports under Student Data > LEA Reports - Performance Profiles. The direct link is: <https://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**

The State's IDEA Part B determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

### **Response to actions required in FFY 2019 SPP/APR**

Pursuant to the State's Determination of Needs Assistance for two-consecutive years, the ALSDE is working to improve outcomes for students with disabilities by receiving technical assistance from several national centers. The ALSDE is partnering with the Region Seven Comprehensive Center (R7CC) to expand and strengthen the state and regional literacy coaching cadre; to promote and scale up effective mathematics practices, policies, and procedures; and to improve the academic achievement of English learners (EL), which include children with disabilities. Through the "Grades PK-3 Literacy Project," Alabama will improve student proficiency by building the capacity of educators statewide to deliver instruction grounded in evidence-based literacy practices. As a result of the "Improving Student Excellence in Math Project," the ALSDE will increase knowledge of effective math practices, implement an effective math coaching model with local education agencies (LEAs), and increase the number of Grades K-5 students proficient in math. Another part of Alabama's work with R7CC is the "Improving EL Academic Achievement Project" that has yielded increased guidance, support, and technical assistance to help educators effectively plan for the education of multilingual learners.

Additionally, the ALSDE, Special Education Services (SES) Section, has been working with the National Center for Systemic Improvement (NCSI) to redesign our system of general supervision, shifting the focus of LEA monitoring to create a balance between compliance and results for children with disabilities. The ALSDE, SES, will conduct integrated monitoring based on a cyclical schedule and, starting in the 2021-2022 school year, provide differentiated support to LEAs based on low, medium, and high risk. The LEA risk is identified through results indicator data and the differentiated levels of support are universal, targeted, and intensive. Also, SES staff participates in TA calls with NCSI and accessed tools and resources (e.g., fiscal support team; multi-tier system of support, MTSS; State Systemic Improvement Plan, SSIP). Targeted TA regarding general supervision guidance and the stakeholder engagement were accessed during this reporting period and intensive TA regarding MTSS continued during this reporting period.

Another national center the ALSDE, SES has been working with is the IDEA Data Center (IDC) to document Alabama's process for collecting, validating, analyzing, and submitting data. The ALSDE, SES is engaged in the IDC Data Process Toolkit to create protocols for all data collections, that will refine our process for data collection, analysis, and reporting. This will also help Alabama implement consistent practices that produce valid and reliable data, build the capacity of data stewards, and support a culture of high-quality data. Moreover, the SES staff also participated in TA calls and virtual webinars (e.g., 2021 IDC Institute; Data Quality Peer Group sessions; IDC Data Manager Summit; Significant Disproportionality Peer Group sessions). Finally, the state collaborated with IDC to update the LRE decision flow chart for preschool children.

Other TA accessed during this reporting period include the following:

- Office of Special Education Programs (OSEP) – participated in monthly TA calls and technical/special webinars, especially those related to the DMS 2.0 Monitoring and the new SPP/APR and SSIP package, and the 2021 OSEP Leadership Conference.
- Brustein & Manasevit, PLLC – participated on TA calls and Bru-Man forums for training related to IDEA funding and EDGAR.
- The Center for IDEA Fiscal Reporting (CIFR) – participated in monthly communities of practice (CoP) calls. Also, received targeted technical assistance from CIFR.
- The Center for IDEA Early Childhood Data Systems (DaSy) – participated in TA calls related to adopting a new data collection instrument to gather data for Indicator 7.
- Technical Assistance for Excellence in Special Education (TAESE) – participated in TA calls related to the dispute resolution processes, especially those related to providing oversight and general supervisory responsibilities related to Written State Complaints, mediations, and due process procedures under IDEA and IEP facilitation.

The technical assistance the ALSDE received from these national centers and many of the actions taken are geared toward improving results and outcomes for children with disabilities in Alabama.

## **Intro - OSEP Response**

The State's determinations for both 2020 and 2021 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 24, 2021 determination letter informed the State that it must report with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

## **Intro - Required Actions**

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

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

## Indicator 1: Graduation

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

#### Data Source

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

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

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

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

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

## 1 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2020	73.31%

FFY	2015	2016	2017	2018	2019
Target >=	65.30%	69.20%	55.82%	57.59%	57.59%
Data	72.39%	54.05%	67.00%	68.04%	69.64%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	73.31%	73.56%	73.81%	74.06%	74.31%	74.56%

### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

### Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,441
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	974

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	88
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	191

**FFY 2020 SPP/APR Data**

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
3,441	4,694	69.64%	73.31%	73.31%	N/A	N/A

**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)**

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

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

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

**1 - Required Actions**

## Indicator 2: Drop Out

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

#### Data Source

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

#### Measurement

OPTION 1:

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

OPTION 2 (For FFY 2020 ONLY):

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

#### Instructions

*Sampling is not allowed.*

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

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

OPTION 1:

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

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

OPTION 2:

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

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

Options 1 and 2:

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2013	12.71%

FFY	2015	2016	2017	2018	2019
Target <=	12.21%	11.96%	11.71%	11.46%	10.00%
Data	6.99%	6.85%	5.98%	6.18%	5.46%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	6.29%	6.19%	6.09%	5.99%	5.89%	5.79%

### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP



members. Ongoing training has been conducted and 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.

**Please indicate the reporting option used on this indicator**

Option 1

**Prepopulated Data**

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,441
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	974
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	88
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	191

**FFY 2020 SPP/APR Data**

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
191	4,694	5.46%	6.29%	4.07%	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 drop out. A drop out 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, 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)**

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

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

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

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

**2 - Required Actions**

## Indicator 3A: Participation for Children with IEPs

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3A - Indicator Data

#### Historical Data:

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

**Targets: Description of Stakeholder Input**

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/30/2022

**Reading Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	8,780	7,761	5,667
b. Children with IEPs in regular assessment with no accommodations	2,539	2,140	1,555
c. Children with IEPs in regular assessment with accommodations	5,162	4,241	2,244
d. Children with IEPs in alternate assessment against alternate standards	647	660	589

**Data Source:**

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

**Date:**

03/30/2022

**Math Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	8,783	7,763	5,669
b. Children with IEPs in regular assessment with no accommodations	2,459	2,113	1,744
c. Children with IEPs in regular assessment with accommodations	5,219	4,232	2,531
d. Children with IEPs in alternate assessment against alternate standards	646	655	586

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

**FFY 2020 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	8,348	8,780		95.00%	95.08%	N/A	N/A
B	Grade 8	7,041	7,761		95.00%	90.72%	N/A	N/A
C	Grade HS	4,388	5,667		95.00%	77.43%	N/A	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	8,324	8,783		95.00%	94.77%	N/A	N/A
B	Grade 8	7,000	7,763		95.00%	90.17%	N/A	N/A
C	Grade HS	4,861	5,669		95.00%	85.75%	N/A	N/A

**Regulatory Information**

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

**Public Reporting Information**

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

The 2020-2021 Proficiency and Participation Data of Students with IEPs can be found on the ALSDE website at [www.alabamaachieves.org](http://www.alabamaachieves.org) and via the following path: Reports Data > School Performance > scroll down to Proficiency, 2020-2021. The direct link is: [https://www.alabamaachieves.org/wp-content/uploads/2023/03/RD\\_2023331\\_2020-2021-Proficiency-and-Participation-Data-of-Students-with-IEPs\\_V1.0.xlsx](https://www.alabamaachieves.org/wp-content/uploads/2023/03/RD_2023331_2020-2021-Proficiency-and-Participation-Data-of-Students-with-IEPs_V1.0.xlsx)

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

There was no COVID-19 impact on the completeness, validity and reliability for this indicator. This change in statement is the result of the Alabama, OSEP clarification call and our inadvertent error with making the connection with meaningful access to testing opportunities for children with disabilities due to the pandemic and contributing that to the COVID-19 impact. Through anecdotal information, we learned that some parents of children with disabilities chose to continue to provide instruction via virtual options instead of through on-site means. As a result, the state extended testing windows to mitigate this situation. Nonetheless, the state was able to collect data for this indicator; thus, there was not COVID-19 impact on the completeness, validity and reliability for this indicator.

In reviewing the data rubric for this indicator, it shows a "0" for timely under 618 Data for State Assessments, which were due on December 15, 2021. We have attached screenshots from EDEN with the timestamps showing submission dates for assessment file specifications (FS 175, 178, 185, 188) all between November 3, 2021 and November 10, 2021 and all with transmittal status of OK. Also, please consider a review of the data rubric for SPP/APR Data, Indicator 3. This information has been reported to PSC (ticket number 2205098) and information forwarded.

**3A - Prior FFY Required Actions**

None

**3A - OSEP Response**

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

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

**3A - Required Actions**

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3B - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	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	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	19.09%	19.09%	19.09%	19.09%	19.09%	28.59%
Reading	B >=	Grade 8	11.83%	11.83%	11.83%	11.83%	11.83%	17.75%
Reading	C >=	Grade HS	4.45%	4.45%	4.45%	4.45%	4.45%	6.68%
Math	A >=	Grade 4	8.36%	8.36%	8.36%	8.36%	8.36%	12.54%
Math	B >=	Grade 8	1.81%	1.81%	1.81%	1.81%	1.81%	2.72%
Math	C >=	Grade HS	2.74%	2.74%	2.74%	2.74%	2.74%	4.11%

#### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	7,701	6,381	3,799
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	941	392	58
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	529	363	111

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	7,678	6,345	4,275
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	459	77	43
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	183	38	74

**FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	1,470	7,701		19.09%	19.09%	N/A	N/A
B	Grade 8	755	6,381		11.83%	11.83%	N/A	N/A
C	Grade HS	169	3,799		4.45%	4.45%	N/A	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

<b>Group</b>	<b>Group Name</b>	<b>Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards</b>	<b>Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment</b>	<b>FFY 2019 Data</b>	<b>FFY 2020 Target</b>	<b>FFY 2020 Data</b>	<b>Status</b>	<b>Slippage</b>
<b>A</b>	Grade 4	642	7,678		8.36%	8.36%	N/A	N/A
<b>B</b>	Grade 8	115	6,345		1.81%	1.81%	N/A	N/A
<b>C</b>	Grade HS	117	4,275		2.74%	2.74%	N/A	N/A

## Regulatory Information

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

## Public Reporting Information

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

The 2020-2021 Proficiency and Participation Data of Students with IEPs can be found on the ALSDE website at [www.alabamaachieves.org](http://www.alabamaachieves.org) and via the following path: Reports Data > School Performance > scroll down to Proficiency, 2020-2021. The direct link is: [https://www.alabamaachieves.org/wp-content/uploads/2023/03/RD\\_2023331\\_2020-2021-Proficiency-and-Participation-Data-of-Students-with-IEPs\\_V1.0.xlsx](https://www.alabamaachieves.org/wp-content/uploads/2023/03/RD_2023331_2020-2021-Proficiency-and-Participation-Data-of-Students-with-IEPs_V1.0.xlsx)

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

There was no COVID-19 impact on the completeness, validity and reliability for this indicator. This change in statement is the result of the Alabama, OSEP clarification call and our inadvertent error with making the connection with meaningful access to testing opportunities for children with disabilities due to the pandemic and contributing that to the COVID-19 impact. Through anecdotal information, we learned that some parents of children with disabilities chose to continue to provide instruction via virtual options instead of through on-site means. As a result, the state extended testing windows to mitigate this situation. Nonetheless, the state was able to collect data for this indicator; thus, there was not COVID-19 impact on the completeness, validity and reliability for this indicator.

In reviewing the data rubric for this indicator, it shows a "0" for timely under 618 Data for State Assessments, which were due on December 15, 2021. We have attached screenshots from EDEN with the timestamps showing submission dates for assessment file specifications (FS 175, 178, 185, 188) all between November 3, 2021 and November 10, 2021 and all with transmittal status of OK. Also, please consider a review of the data rubric for SPP/APR Data, Indicator 3. This information has been reported to PSC (ticket number 2205098) and information forwarded.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

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

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

## 3B - Required Actions

OSEP notes that one or more of the Indicator 3B attachment(s) included in the State's FFY 2020 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.



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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3C - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	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	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	24.57%	24.57%	24.57%	24.57%	24.57%	36.86%
Reading	B >=	Grade 8	23.94%	23.94%	23.94%	23.94%	23.94%	35.91%
Reading	C >=	Grade HS	37.01%	37.01%	37.01%	37.01%	37.01%	55.52%
Math	A >=	Grade 4	19.81%	19.81%	19.81%	19.81%	19.81%	29.72%
Math	B >=	Grade 8	13.44%	13.44%	13.44%	13.44%	13.44%	20.16%
Math	C >=	Grade HS	28.84%	28.84%	28.84%	28.84%	28.84%	43.26%

**Targets: Description of Stakeholder Input**

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	647	660	589
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	159	158	218

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	646	655	586
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	128	88	169

**FFY 2020 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	159	647		24.57%	24.57%	N/A	N/A
B	Grade 8	158	660		23.94%	23.94%	N/A	N/A
C	Grade HS	218	589		37.01%	37.01%	N/A	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	128	646		19.81%	19.81%	N/A	N/A
B	Grade 8	88	655		13.44%	13.44%	N/A	N/A
C	Grade HS	169	586		28.84%	28.84%	N/A	N/A

### Regulatory Information

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

### Public Reporting Information

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

The 2020-2021 Proficiency and Participation Data of Students with IEPs can be found on the ALSDE website at [www.alabamaachieves.org](http://www.alabamaachieves.org) and via the following path: Reports Data > School Performance > scroll down to Proficiency, 2020-2021. The direct link is: [https://www.alabamaachieves.org/wp-content/uploads/2023/03/RD\\_2023331\\_2020-2021-Proficiency-and-Participation-Data-of-Students-with-IEPs\\_V1.0.xlsx](https://www.alabamaachieves.org/wp-content/uploads/2023/03/RD_2023331_2020-2021-Proficiency-and-Participation-Data-of-Students-with-IEPs_V1.0.xlsx)

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

There was no COVID-19 impact on the completeness, validity and reliability for this indicator. This change in statement is the result of the Alabama, OSEP clarification call and our inadvertent error with making the connection with meaningful access to testing opportunities for children with disabilities due to the pandemic and contributing that to the COVID-19 impact. Through anecdotal information, we learned that some parents of children with disabilities chose to continue to provide instruction via virtual options instead of through on-site means. As a result, the state extended testing windows to mitigate this situation. Nonetheless, the state was able to collect data for this indicator; thus, there was not COVID-19 impact on the completeness, validity and reliability for this indicator.

In reviewing the data rubric for this indicator, it shows a "0" for timely under 618 Data for State Assessments, which were due on December 15, 2021. We have attached screenshots from EDEN with the timestamps showing submission dates for assessment file specifications (FS 175, 178, 185, 188) all between November 3, 2021 and November 10, 2021 and all with transmittal status of OK. Also, please consider a review of the data rubric for SPP/APR Data, Indicator 3. This information has been reported to PSC (ticket number 2205098) and information forwarded.

### 3C - Prior FFY Required Actions

None

### 3C - OSEP Response

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

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

### 3C - Required Actions

OSEP notes that one or more of the Indicator 3C attachment(s) included in the State's FFY 2020 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

### 3D - Indicator Data

#### Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	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	2020	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	32.79	29.51	26.23	22.95	19.67	16.40
Reading	B <=	Grade 8	39.84	35.86	31.88	27.90	23.92	19.92
Reading	C <=	Grade HS	23.81	21.43	19.05	16.67	14.29	11.91
Math	A <=	Grade 4	15.55	13.99	12.49	10.39	9.37	7.78
Math	B <=	Grade 8	12.45	11.21	9.97	8.73	7.49	6.22
Math	C <=	Grade HS	20.61	18.55	16.49	14.43	12.37	10.31

#### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP

members. Ongoing training has been conducted and 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.

**FFY 2020 Data Disaggregation from EDFacts**

**Data Source:**

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

**Date:**

03/03/2022

**Reading Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	51,140	52,762	45,801
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	7,701	6,381	3,799
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	25,630	26,643	12,588
d. All students in regular assessment with accommodations scored at or above proficient against grade level	901	620	353
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	941	392	58
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	529	363	111

**Data Source:**

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

**Date:**

03/03/2022

**Math Assessment Proficiency Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	51,128	52,643	46,984
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	7,678	6,345	4,275
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	11,880	7,389	10,676
d. All students in regular assessment with accommodations scored at or above proficient against grade level	345	117	293
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	459	77	43
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	183	38	74

**FFY 2020 SPP/APR Data: Reading Assessment**

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	19.09%	51.88%		32.79	32.79	N/A	N/A
B	Grade 8	11.83%	51.67%		39.84	39.84	N/A	N/A
C	Grade HS	4.45%	28.25%		23.81	23.81	N/A	N/A

**FFY 2020 SPP/APR Data: Math Assessment**

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	8.36%	23.91%		15.55	15.55	N/A	N/A
B	Grade 8	1.81%	14.26%		12.45	12.45	N/A	N/A
C	Grade HS	2.74%	23.35%		20.61	20.61	N/A	N/A

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

There was no COVID-19 impact on the completeness, validity and reliability for this indicator. This change in statement is the result of the Alabama, OSEP clarification call and our inadvertent error with making the connection with meaningful access to testing opportunities for children with disabilities due to the pandemic and contributing that to the COVID-19 impact. Through anecdotal information, we learned that some parents of children with disabilities chose to continue to provide instruction via virtual options instead of through on-site means. As a result, the state extended testing windows to mitigate this situation. Nonetheless, the state was able to collect data for this indicator; thus, there was not COVID-19 impact on the completeness, validity and reliability for this indicator.

In reviewing the data rubric for this indicator, it shows a "0" for timely under 618 Data for State Assessments, which were due on December 15, 2021. We have attached screenshots from EDEN with the timestamps showing submission dates for assessment file specifications (FS 175, 178, 185, 188) all between November 3, 2021 and November 10, 2021 and all with transmittal status of OK. Also, please consider a review of the data rubric for SPP/APR Data, Indicator 3. This information has been reported to PSC (ticket number 2205098) and information forwarded.

**3D - Prior FFY Required Actions**

None

**3D - OSEP Response**

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

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

**3D - Required Actions**

## Indicator 4A: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

**Results Indicator:** Rates of suspension and expulsion:

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

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

#### Data Source

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

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

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

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

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

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

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

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

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

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

## 4A - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	14.00%

FFY	2015	2016	2017	2018	2019
Target <=	6.00%	5.75%	5.50%	5.00%	4.00%
Data	3.68%	2.19%	0.73%	2.17%	2.16%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target <=	2.18%	2.18%	2.18%	2.18%	2.18%	2.10%

**Targets: Description of Stakeholder Input**

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

**FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
2	142	2.16%	2.18%	1.41%	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 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 comparing that rate to the district-level suspension/expulsion rate for children with IEPs on an annual basis.

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

Although the total number of districts is 143 as reported in the introduction for this reporting period, when using school year 2019-2020 data as required, the state had a total of 142 districts during school year 2019-2020.

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

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

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 ensured that the LEA reviewed 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. The State also required the LEA to review (1) their procedures for monitoring the rate of suspensions and expulsions of children with IEPs based on data analyses and identification of patterns, and (2) progress reports documenting the total number of suspensions/expulsions of children with IEPs. The State also required the LEAs to review, and as necessary, revise their policies, procedures, and practices. 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 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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



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

**4A - Prior FFY Required Actions**

None

**4A - OSEP Response**

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

### Historical Data

Baseline Year	Baseline Data
2016	0.00%

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

**Targets**

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

**FFY 2020 SPP/APR Data**

**Has the state established a minimum n/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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1	0	142	0.00%	0%	0.00%	Met target	No Slippage

**Were all races and ethnicities included in the review?**

YES

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

The ALSDE examines the rate of suspensions and expulsions for children with IEPs among LEAs within the State. An LEA has 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 children with IEPs for FFY 2020 (using 2019-2020 data) was 0.18%. An LEA was determined to have a significant discrepancy if its rate of suspensions/expulsions for children with IEPs was greater than 2.18%. A minimum "n" size of one was used yielding the exclusion of zero LEAs from the calculations due to the suspension rate greater than 2.18% with zero students suspended/expelled in a racial/ethnic group.

One LEA was determined to have a significant discrepancy by race/ethnicity in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. For the one LEA determined to have a significant discrepancy, it was determined that the LEA did not have policies, procedures, or practices that contributed to the significant discrepancy and the LEA complied with the requirements.

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

Although the total number of districts is 143 as reported in the introduction for this reporting period, when using school year 2019-2020 data as required, the state had a total of 142 districts during school year 2019-2020.

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

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

For the one LEA 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 ensured that the LEA reviewed 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. The State also required the LEA to review (1) their procedures for monitoring the rate of suspensions and expulsions of

children with IEPs based on data analyses and identification of patterns, and (2) progress reports documenting the total number of suspensions/expulsions of children with IEPs. The State also required the LEAs to review, and as necessary, revise their policies, procedures, and practices. 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 2019**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

**4B - Prior FFY Required Actions**

None

**4B - OSEP Response**

**4B- Required Actions**

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

## 5 - Indicator Data

### Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A	2020	Target >=	69.75%	72.25%	75.00%	77.75%	77.75%
A	83.92%	Data	83.56%	83.52%	83.65%	83.59%	83.62%
B	2020	Target <=	6.50%	6.25%	6.25%	6.00%	6.00%
B	7.21%	Data	7.19%	7.16%	7.23%	7.18%	7.19%
C	2020	Target <=	2.65%	2.60%	2.55%	2.50%	2.50%
C	2.26%	Data	2.49%	2.45%	2.51%	2.45%	2.42%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	83.92%	83.92%	83.92%	83.92%	83.92%	84.42%
Target B <=	7.21%	6.96%	6.71%	6.46%	6.21%	5.96%
Target C <=	2.26%	2.26%	2.26%	2.26%	2.26%	2.21%

### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	Total number of children with IEPs aged 5 (kindergarten) through 21	91,312
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	76,625
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	6,585
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,152
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	626
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	286

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

NO

#### FFY 2020 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	76,625	91,312	83.62%	83.92%	83.92%	N/A	N/A
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	6,585	91,312	7.19%	7.21%	7.21%	N/A	N/A
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	2,064	91,312	2.42%	2.26%	2.26%	N/A	N/A

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

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

### 5 - Prior FFY Required Actions

None

### 5 - OSEP Response

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

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

## 5 - Required Actions

## Indicator 6: Preschool Environments

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

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

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

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

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

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

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

## 6 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

#### Historical Data – 6A, 6B

Part	FFY	2015	2016	2017	2018	2019
A	Target >=	47.50%	47.75%	49.00%	53.00%	53.00%
A	Data	50.58%	50.91%	52.55%	53.47%	52.09%
B	Target <=	6.10%	5.90%	5.70%	5.50%	5.50%
B	Data	3.80%	3.57%	2.57%	3.12%	3.31%

#### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

#### 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	2020	2021	2022	2023	2024	2025
Target A >=	52.70%	52.70%	52.70%	52.70%	52.70%	52.95%
Target B <=	4.28%	4.28%	4.28%	4.28%	4.28%	4.08%

**Inclusive Targets – 6C**

FFY	2020	2021	2022	2023	2024	2025
Target C <=	2.71%	2.71%	2.71%	2.71%	2.71%	2.61%

**Prepopulated Data**

**Data Source:**

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

**Date:**

07/07/2021

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	1,217	2,273	387	3,877
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	597	1,241	205	2,043
b1. Number of children attending separate special education class	43	74	20	137
b2. Number of children attending separate school	8	8	4	20
b3. Number of children attending residential facility	1	8	0	9
c1. Number of children receiving special education and related services in the home	56	42	7	105

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

NO

FFY 2020 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	2,043	3,877	52.09%	52.70%	52.70%	N/A	N/A
B. Separate special education class, separate school or residential facility	166	3,877	3.31%	4.28%	4.28%	N/A	N/A
C. Home	105	3,877		2.71%	2.71%	N/A	N/A

Provide additional information about this indicator (optional)

### 6 - Prior FFY Required Actions

None

### 6 - OSEP Response

The State has revised the baseline for Indicator 6A and Indicator 6B, using data from FFY 2020, and OSEP accepts that revision.

The State established baseline for Indicator 6C, and OSEP accepts the Indicator 6C baseline.

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

### 6 - Required Actions

## Indicator 7: Preschool Outcomes

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

State selected data source.

#### Measurement

Outcomes:

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

Progress categories for A, B and C:

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

#### Summary Statements for Each of the Three Outcomes:

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

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

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

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

#### Instructions

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

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

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

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

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

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

## 7 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A1	2008	Target >=	90.80%	91.05%	91.30%	91.55%	91.55%
A1	85.50%	Data	91.77%	91.50%	93.15%	94.27%	94.77%
A2	2008	Target >=	82.80%	83.05%	83.30%	83.55%	83.55%

A2	59.60%	Data	80.40%	80.91%	78.89%	78.22%	76.30%
B1	2008	Target >=	90.70%	90.95%	91.20%	91.45%	91.45%
B1	80.60%	Data	91.25%	91.44%	92.63%	92.43%	93.83%
B2	2008	Target >=	65.10%	65.35%	65.60%	65.85%	65.85%
B2	29.20%	Data	64.45%	64.45%	63.97%	63.56%	61.89%
C1	2008	Target >=	89.10%	89.35%	89.60%	89.85%	89.85%
C1	85.10%	Data	89.48%	91.30%	90.73%	92.57%	93.47%
C2	2008	Target >=	88.20%	88.45%	88.70%	88.95%	88.95%
C2	72.20%	Data	86.96%	88.08%	85.94%	86.16%	85.40%

### Targets

FFY	2020	2021	2022	2023	2024	2025
Target A1 >=	93.09%	93.09%	93.09%	93.09%	93.09%	93.34%
Target A2 >=	76.30%	76.30%	76.30%	76.30%	76.30%	76.55%
Target B1 >=	92.31%	92.31%	92.31%	92.31%	92.31%	92.56%
Target B2 >=	57.20%	57.20%	57.20%	57.20%	57.20%	57.45%
Target C1 >=	91.57%	91.57%	91.57%	91.57%	91.57%	91.82%
Target C2 >=	75.40%	75.40%	75.40%	75.40%	75.40%	75.65%

### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

### FFY 2020 SPP/APR Data

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

2,462

#### 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	11	0.45%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	88	3.58%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	489	19.89%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,140	46.38%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	730	29.70%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A,	1,629	1,728	94.77%	93.09%	94.27%	Met target	No Slippage

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
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>							
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>	1,870	2,458	76.30%	76.30%	76.08%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	8	0.33%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	142	5.78%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	847	34.46%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,133	46.09%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	328	13.34%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,980	2,130	93.83%	92.31%	92.96%	Met target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,461	2,458	61.89%	57.20%	59.44%	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	8	0.33%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	102	4.15%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	304	12.37%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	984	40.03%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,060	43.12%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,288	1,398	93.47%	91.57%	92.13%	Met target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,044	2,458	85.40%	75.40%	83.16%	Met target	No Slippage

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

**Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (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 Form (COSF). As noted in the FFY 2013 APR, the ALSDE converted to a seven-point scale COSF in order 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 to the seven-point scale of the COSF.

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

The instrument used to gather data for indicator 7 (Preschool Outcomes) is the Early Learning Progress Profile (ELPP), which is a spreadsheet data collection system that employs components of the COSF.

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 to improve outcomes for preschool children with IEPs.

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

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

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

## 7 - Required Actions

## Indicator 8: Parent involvement

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

#### Data Source

State selected data source.

#### Measurement

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

#### Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

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

### 8 - Indicator Data

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

#### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

During the FFY 2020 reporting year, the ALSDE sought input on how to increase parent involvement to improve services for students with disabilities. Strategies included:

- 1) 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 Alabama State Department of Education, Special Education Services (ALSDE-SES) staff to hear concerns, suggestions, and needs from family members.
- 2) Partnering with APEC to gather family input. ALSDE-SES staff presented on the State Systemic Improvement Plan (SSIP) during the three family focus groups to gather input from family members regarding the SSIP activities and data.
- 3) Presenting on the State Systemic Improvement Plan (SSIP) at several meetings. The ALSDE-SES staff presented information about the state

Performance Plan/Annual Performance Report (SPP/APR) and SSIP activities at the state's Special Education Advisory Panel (SEAP) meeting and sought feedback from SEAP members.

4) Gathering input from parents through various surveys:

a) Through work on the AL SSIP and AL State Personnel Development Grant (SPDG), the ALSDE gathered input from parents at middle and high school SSIP/SPDG sites through a Foundations Survey. All parents were asked to rate the behavior, safety, climate of schools, and the ALSDE received copies of the results.

b) Additionally, AL SPDG parents of students of transition age were also asked complete a satisfaction survey of transition services and resources and the SSIP-developed Planning for Life After School survey. These surveys will be used to determine areas for follow-up training and product development

**Historical Data**

Baseline Year	Baseline Data
2010	74.90%

FFY	2015	2016	2017	2018	2019
Target >=	75.63%	75.88%	76.13%	76.38%	76.38%
Data	76.54%	80.74%	78.02%	76.70%	72.96%

**Targets**

FFY	2020	2021	2022	2023	2024	2025
Target >=	76.99%	77.24%	77.49%	77.74%	77.99%	78.24%

**FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
15,319	21,191	72.96%	76.99%	72.29%	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 the Alabama Parent Education Center (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, and Korean.

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, disaggregated analyses were also conducted. The percentage of parent involvement among parents of preschool children was 77.2%. The percentage of parents of school-aged children reporting schools facilitated parent involvement was 71.9%. The response rates were 40.0% among parent of preschool children and 21.39% among parents of school-aged children.

**The number of parents to whom the surveys were distributed.**

94,355

**Percentage of respondent parents**

22.46%

**Response Rate**

FFY	2019	2020
Response Rate	13.61%	22.46%

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

While the response rate was 8.9% higher in FFY 2020 than FFY 2019, the state will continue efforts to increase the response rate. The SES staff reviewed response rate data for districts twice during the data collection window and notified



districts with low response rates. This activity will continue for FFY 2021. Furthermore, the SES staff will communicate with districts who have low response rates to ensure family members have an opportunity to be represented.

Due to COVID-19, the ALSDE implemented a census survey again in FFY 2020. The SES staff will examine Child Count data as well as the responding FFY 2020 sample to draw a new sample for FFY 2021. Samples will be stratified to increase representativeness within each sample.

Additionally, to promote the online survey, the state will continue to share the survey weblink on the Special Education Services page, as well as at statewide conferences with parent participants. The ALSDE will continue to work closely with the Alabama Parent Education Center (APEC) to reach parents through APEC's outreach activities. The ALSDE will ask APEC to include the survey weblink.

**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.**

ALSDE-SES staff combined paper surveys submitted plus the online, direct-entry surveys (in English, Korean, and Spanish) to create its dataset. SES staff have established the following internal decision rules: 1) Any surveys with responses to the 12 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 respondent must have three or more responses to demographic questions.

After applying these decision rules, there were a total of 22,626 responses in FFY 2020. Among these responses, there were 21,191 responses to the parent involvement items. Therefore, 6.3% of respondents completed only demographic questions or provided open-ended responses. ALSDE-SES 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 (21,191) divided by the 2020 Child Count among the 143 LEAs participating (94,355). It should be noted that parent responses were collected for 140 LEAs, however the denominator reflects all 143 LEAs. In FFY 2020, the response rate was 22.5%.

The impact of nonresponse bias was examined. The data below shows two sets of analyses:

**Gender; Percentage of Parents Reporting Parent Involvement (Indicator 8); Response Rate Per Category Based on State-Level Counts**

Male; 71.93%; 21.86%  
Female 72.96% 22.62%

**Race/Ethnicity; Percentage of Parents Reporting Parent Involvement (Indicator 8); Response Rate Per Category Based on State-Level Counts**

American Indian or Alaska Native; 60.29%; 19.02%  
Asian; 71.95%; 23.03%  
Black or African American; 72.53%; 17.50%  
Hispanic/Latino; 74.53%; 16.07%  
Multi-Race; 69.05%; 53.24%  
Native Hawaiian or Other Pacific Islander; 88.24%; 21.52%  
White; 72.46%; 24.68%

**Disability Category; Percentage of Parents Reporting Parent Involvement (Indicator 8); Response Rate Per Category Based on State-Level Counts**

Autism; 68.28%; 31.53%  
Deaf-Blindness; 58.93%; 46.67%  
Developmental Delay; 71.83%; 38.81%  
Emotional Disability; 62.60%; 30.16%  
Hearing Impairment; 76.62%; 16.74%  
Intellectual Disability; 71.88%; 19.10%  
Multiple Disabilities; 66.34%; 71.28%  
Orthopedic Impairment; 72.32%; 13.49%  
Other Health Impairment; 80.00%; 8.60%  
Specific Learning Disability; 73.65%; 15.88%  
Speech/Language Impairment; 76.73%; 24.40%  
Traumatic Brain Injury; 74.44%; 34.88%  
Visual Impairment; 70.00%; 19.57%

First, the percentage of parents reporting parent involvement (Indicator 8) values were compared to the 72.29% for the state. Values that were lower than the state percentage were: Males, American Indian, Asian, Multi-Race, Autism, Deaf-Blindness, Developmental Delay, Emotional Disability, Intellectual Disability, Multiple-Disabilities, and Visual Impairment. The lowest values were for American Indian or Alaska Native, Deaf-Blindness, Emotional Disability, and Multiple Disabilities. These Indicator 8 data show lower percentages among parents of students with low-incidence disabilities.

Second, the total number of responses was compared to the number of students with disabilities in the state in each demographic category, per the Alabama 2020 Child Count data. The Alabama Parent Survey response rate was 22.5%, and values with the lowest percentage of non-responders included American Indian or Alaska Native, Black or African American, Hispanic/Latino, Hearing Impairment, Orthopedic Impairment, Other Health Impairment, and Specific Learning Disability.

The intersection of these two analyses identifies whether nonresponse bias artificially inflated Indicator 8 results, causing the percentage of parent involvement to be greater than expected. When looking at these values, however, the only underrepresented group (+/- 3.0% of the response rate) with a lower Indicator 8 rating was American Indian or Alaska Native (60.29% for Indicator 8). In fact, when looking at the disability data, parents of students who reported lower Indicator 8 percentages were more likely to be overrepresented compared to the expected value. For example, there were 56 responses for Deaf-Blindness, but only 12 students in the state were identified with Deaf-Blindness as their primary disability.

When accounting for the proportionate expected race/ethnicity values, Indicator 8 results for race/ethnicity were 72.47%, which was 0.18% greater than the reported value. When accounting for the proportionate expected disability values, Indicator 8 results for disability were 73.10%. Therefore, while the Indicator 8 percentage may have been slightly lower as a result of non-responders, there were no significant difference between the expected and actual overall results.

ALSDE-SES staff have taken steps to increase the response rate and reach a broader sample of families, including:

- 1) Monitoring response rate;
- 2) Contacting districts with no or low response rates during the data collection window to encourage participation;
- 3) Share

the Parent Survey weblink with APEC, 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.

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

In FFY 2020, the ALSDE-SES began collecting race/ethnicity data for responding parents on the Alabama Parent Survey. The table presented below includes the race/ethnicity of responding parents, the 2020 Child Count race/ethnicity data of students ages 3-21 and the July 2021 Alabama race/ethnicity data per the United States Census (United State Census Bureau, 2021). 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; 0.8%; 0.8%; 0.7%  
Asian; 0.7%; 0.8%; 1.5%  
Black or African American; 28.1%; 35.6%; 26.8%  
Hispanic/Latino; 5.3%; 7.3%; 4.6%  
Multi-Race; 2.8%; 2.4%; 1.8%  
Native Hawaiian or Other Pacific Islander; 0.1%; 0.1%; 0.1%  
White; 62.2%; 53.2%; 65.3%

In comparison to the 2020 Child Count data, responding parents who are Black or African American were 7.5% underrepresented on the Alabama Parent Survey, and responding parent who are White were 9.0% overrepresented. When looking at the Census data, however, race/ethnicity data were within +/- 3.0% for all race/ethnicity categories except White (3.1% underrepresented).

Another demographic measure, location, showed among the 143 school districts and charter schools included in the survey distribution, 140 were represented. Therefore, 97.9% of districts and charter schools were represented in survey responses.

Examining the 22 demographic indices used for students, 59% were representative when compared to the 2020 Alabama Child Count data. Percentages below refer to the responding sample, and a deviation of +/-3.0% was used to determine representativeness.

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

NO

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

The responding sample was compared to 2020 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 2020 Alabama Parent Survey responding sample, the percentages from the 2020 Child Count data (ages 3-21), and the differences between the two.

Gender; Total Population; Responding Sample; Difference  
Male; 66.26%; 65.08%; -1.18%  
Female 33.74%; 34.92%; 1.18%

Race/Ethnicity; Total Population; Responding Sample; Difference  
American Indian or Native Alaskan; 0.75%; 0.7%; -0.05%  
Asian; 0.75%; 0.9%; 0.11%  
Black or African American; 35.55%; 28.3%; -7.21%  
Hispanic/Latino; 7.26%; 5.6%; -1.68%  
Multi-Race; 2.43%; 5.8%; 3.33%  
Native Hawaiian or Other Pacific Islander; 0.08%; 0.1%; 0.03%  
White; 53.18%; 58.7%; 5.47%

Disability Category; Total Population; Responding Sample; Difference  
Autism; 9.56%; 14.6%; 5.06%  
Deaf-Blindness; 0.01%; 0.3%; 0.27%  
Developmental Delay; 6.23%; 11.7%; 5.50%  
Emotional Disability; 1.37%; 2.1%; 0.76%  
Hearing Impairment; 0.97%; 0.8%; -0.16%  
Intellectual Disability; 7.24%; 6.6%; -0.61

As indicated in the data above, there were nine indices that were not representative of the target population obtained from the 2020 Child Count data:

- Black (7.2% underrepresented);
- Multi-Race (3.3% overrepresented);
- White (5.5% overrepresented);
- Autism (5.1% overrepresented);
- Developmental Delay (5.5% overrepresented);
- Multiple Disabilities (3.4% overrepresented);
- Other Health Impairment (8.4% underrepresented);
- Specific Learning Disability (9.0% underrepresented); and
- Speech/Language Impairment (3.3% overrepresented).

As the Alabama Parent Survey was more widely disseminated online and through paper-and-pencil, there was more opportunity for response error. For example, respondents were asked to identify demographic information, including disability. In FFY 2020, there were 2,943 missing responses to the primary disability question, or over 13% of the sample. Additionally, there were 1,550 missing responses to the question about a child's race. The missing data may account in part for the non-representativeness of the sample. Furthermore, given the number of handwritten responses to the primary disability question, a percentage of parents do not know the disability category. The ALSDE will consider ways to increase completion of the survey and increase awareness of a student's primary disability.

Seven of the indices that were not representative in FFY 2020 were also not representative in FFY 2019. To address deviations in representativeness of future Indicator 8 samples, the ALSDE will implement the following strategies:

- The ALSDE will continue working to increase the response rate. While the response rate was 8.9% higher in FFY 2020 than FFY 2019, the ALSDE will continue efforts to increase the response rate. ALSDE/SES staff reviewed response rate data for districts twice during the data collection window and notified districts with low response rates. This activity will continue for FFY 2021. Furthermore, the ALSDE-SES will communicate with districts who have low response rates to ensure family members have an opportunity to be represented.
- Due to COVID-19, the ALSDE implemented a census survey again in FFY 2020. ALSDE-SES staff will examine Child Count data as well as the responding FFY 2020 sample to draw a new sample for FFY 2021. Samples will be stratified to increase representativeness within each sample.
- To promote the online survey, the state will continue to share the survey weblink on the Special Education Services page, as well as at statewide conferences with parent participants.
- The ALSDE will continue to work closely with the Alabama Parent Education Center (APEC) to reach parents through APEC's outreach activities. The ALSDE will ask APEC to include the survey weblink.

**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. However, sampling was not used for this indicator.

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.	2020-2021 Parent Survey_English (v.2)

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

**8 - Prior FFY Required Actions**

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

**Response to actions required in FFY 2019 SPP/APR**

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

- The ALSDE will continue working to increase the response rate. While the response rate was 8.9% higher in FFY 2020 than FFY 2019, the ALSDE will continue efforts to increase the response rate. ALSDE, SES staff reviewed response rate data for districts twice during the data collection window and notified districts with low response rates. This activity will continue for FFY 2021. Furthermore, the ALSDE-SES will communicate with districts who have low response rates to ensure family members have an opportunity to be represented.
- Due to COVID-19, the ALSDE implemented a census survey again in FFY 2020. ALSDE-SES staff will examine Child Count data as well as the responding FFY 2020 sample to draw a new sample for FFY 2021. Samples will be stratified to increase representativeness within each sample.
- To promote the online survey, the state will continue to share the survey weblink on the Special Education Services page, as well as at statewide conferences with parent participants.
- The ALSDE will continue to work closely with the Alabama Parent Education Center (APEC) to reach parents through APEC's outreach activities. The ALSDE will ask APEC to include the survey weblink.

**8 - OSEP Response**

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

**8 - Required Actions**

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

the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 8 attachment(s) included in the State's FFY 2020 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

## Indicator 9: Disproportionate Representation

### Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

#### Data Source

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

#### Measurement

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

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

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

#### Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2020	1.40%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	50.00%

#### Targets

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

#### FFY 2020 SPP/APR Data

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

YES

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

0

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
7	2	143	50.00%	0%	1.40%	N/A	N/A

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 143 LEAs were included in an initial examination of data and calculation of disproportionate representation. Based on the data for all 143 LEAs, seven LEAs had a risk ratio of greater than 2.25 and met the state's minimum cell-size of ten. Whereas 143 LEAs met the state's minimum cell size, the ALSDE excluded 0 LEAs from the final determination of overrepresentation due to not only the number of districts identified with disproportionality that did not meet the minimum cell-size, but the total number of districts in the state (those identified with disproportionality and those not identified) did not meet 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.

For each LEA identified with disproportionate representation, the ALSDE examines LEA child find, evaluation, eligibility and other related policies, procedures, and practices. The ALSDE Compliance Monitoring Unit then conducts a review of individual student records to determine if evaluation and eligibility requirements were met according to the Alabama Administrative Code (AAC) and the Part B IDEA requirements. This review is conducted for every LEA with disproportionality as a part of the continuous improvement process, in which an LEA is identified as having disproportionality and must include a review of child find and evaluation policies, practices and procedures to ensure compliance with the IDEA. If an LEA has been identified as having disproportionality, the LEA is notified and, if appropriate, required to review and revise their policies, practices and procedures used in their identification processes.

As a part of Alabama's process towards continuous improvement, pre-staffing meetings are held to discuss LEA data (e.g., Child Count, LEA SPP/APR compliance and performance data, previous monitoring reports, fiscal information) and to determine specific areas of focus and need. Particularly, Child Count related data, which includes disproportionality and placement in the least restrictive environment information, are discussed during the pre-staffing meetings. As a result of the pre-staffing meetings, probing questions are reviewed (modified as necessary) and then are shared with the LEA Special Education Coordinator. The LEA is then required to develop an action plan; the state conducts follow-up activities to ensure implementation of plan and provides technical assistance if needed. If the evidence indicating inappropriate identification includes noncompliance, ALSDE makes the appropriate findings of noncompliance and requires correction no later than one year from the notification of the findings.

Provide additional information about this indicator (optional)

It should be noted that the ALSDE, SES received targeted technical assistance from the IDEA Data Center (IDC) on the calculation method for this indicator. As a result of this TA, the calculation for indicator 9 was corrected.

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

#### Correction of Findings of Noncompliance Identified in FFY 2019

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

#### FFY 2019 Findings of Noncompliance Verified as Corrected

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

The ALSDE verified that all LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view updated data to determine 100% compliance 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 2019 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02.

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

For each individual student whose eligibility criteria for identification was incorrect, the ALSDE accessed the student record to determine that the minimum requirements for eligibility determination was verified as corrected for each individual case of noncompliance for all students still within the jurisdiction of the LEA, which is consistent with OSEP Memo 09-02 . All individual instances of noncompliance was corrected for FFY 2019 within one year.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

**9 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2019 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. The State must demonstrate, in the FFY 2020 SPP/APR, that the five districts identified in FFY 2019 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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2019 SPP/APR**

The ALSDE verified that all LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view updated data to determine 100% compliance 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 2019 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02.

For each individual student whose eligibility criteria for identification was incorrect, the ALSDE accessed the student record to determine that the minimum requirements for eligibility determination was verified as corrected for each individual case of noncompliance for all students still within the jurisdiction of the LEA, which is consistent with OSEP Memo 09-02 . All individual instances of noncompliance was corrected for FFY 2019 within one year.

**9 - OSEP Response**

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

**9 - Required Actions**

Because the State reported less than 100% compliance for FFY 2020 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the two districts identified in FFY 2020 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 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

# Indicator 10: Disproportionate Representation in Specific Disability Categories

## Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

### Data Source

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

### Measurement

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

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

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

### Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

### Historical Data

Baseline Year	Baseline Data
2020	4.96%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	55.77%

### Targets



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

**FFY 2020 SPP/APR Data**

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

YES

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

2

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
40	7	141	55.77%	0%	4.96%	N/A	N/A

**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 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 143 LEAs were included in an initial examination of data and calculation of disproportionate representation. Based on the data for all 143 LEAs, 41 LEAs had a risk ratio of greater than 2.50 and met the state's minimum cell-size of ten. Whereas 141 LEAs met the state's minimum cell size, the ALSDE excluded 2 LEAs from the final determination of overrepresentation due to not only the number of districts identified with disproportionality that did not meet the minimum cell-size, but the total number of districts in the state (those identified with disproportionality and those not identified) did not meet 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.**

For each LEA identified with disproportionate representation, the ALSDE examines LEA child find, evaluation, eligibility and other related policies, procedures, and practices. The ALSDE Compliance Monitoring Unit then conducts a review of individual student records to determine if evaluation and eligibility requirements were met according to the Alabama Administrative Code (AAC) and the Part B IDEA requirements. This review is conducted for every LEA with disproportionality by as a part of the continuous improvement process, in which an LEA is identified as having disproportionality and must include a review of child find and evaluation policies, practices and procedures to ensure compliance with the IDEA. If an LEA has been identified as having disproportionality, the LEA is notified and, if appropriate, required to review and revise their policies, practices and procedures used in their identification processes.

As a part of Alabama's process towards continuous improvement, pre-staffing meetings are held to discuss LEA data (e.g., Child Count, LEA SPP/APR compliance and performance data, previous monitoring reports, fiscal information) and to determine specific areas of focus and need. Particularly, Child Count related data, which includes disproportionality and placement in the least restrictive environment information, are discussed during the pre-staffing meetings. As a result of the pre-staffing meetings, probing questions are reviewed (modified as necessary) and then are shared with the LEA Special Education Coordinator. The LEA is then required to develop an action plan; the state conducts follow-up activities to ensure implementation of plan and provides technical assistance if needed. If the evidence indicating inappropriate identification includes noncompliance, ALSDE makes the appropriate findings of noncompliance and requires correction no later than one year from the notification of the findings.

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

It should be noted that the ALSDE, SES received targeted technical assistance from the IDEA Data Center (IDC) on the calculation method for this indicator. As a result of this TA, the calculation for indicator 10 was corrected.

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
29	29	0	0

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

The ALSDE verified that all LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view updated data to determine 100% compliance 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 2019 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02.

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

For each individual student whose eligibility criteria for identification was incorrect, the ALSDE accessed the student record to determine that the minimum requirements for eligibility determination was verified as corrected for each individual case of noncompliance for all students still within the jurisdiction of the LEA, which is consistent with OSEP Memo 09-02 . All individual instances of noncompliance was corrected for FFY 2019 within one year.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

**10 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2019 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. The State must demonstrate, in the FFY 2020 SPP/APR, that the 29 districts identified in FFY 2019 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification [is/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 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2019 SPP/APR**

The ALSDE verified that all LEAs identified as having noncompliance were correctly implementing the regulatory requirements. The ALSDE database was accessed to view updated data to determine 100% compliance 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 2019 were conducted within one year from the notification of noncompliance, consistent with OSEP Memo 09-02.

For each individual student whose eligibility criteria for identification was incorrect, the ALSDE accessed the student record to determine that the minimum requirements for eligibility determination was verified as corrected for each individual case of noncompliance for all students still within the jurisdiction of the LEA, which is consistent with OSEP Memo 09-02 . All individual instances of noncompliance was corrected for FFY 2019 within one year.

**10 - OSEP Response**

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

**10 - Required Actions**

Because the State reported less than 100% compliance for FFY 2020 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. The State must demonstrate, in the FFY 2021 SPP/APR, that the seven districts identified in FFY 2020 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 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

## Indicator 11: Child Find

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Child Find

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2005	82.00%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.51%	99.68%	99.77%	99.70%	99.71%

### Targets

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

### FFY 2020 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
16,369	16,304	99.71%	100%	99.60%	Did not meet target	No Slippage

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

65

**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 65, the following numbers indicate the range of days beyond the 60-day initial evaluation timeline when evaluations were completed for children: 1-15 days - 28; 16-30 days - 19; 31-45 days - 6; 46-60 days - 1; and 60+ days - 11. The reasons for delays include students failed vision and hearing tests, school delay, central office delay (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)**

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
26	26	0	0

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

The ALSDE verified that all 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 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 LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement 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 LEAs identified as having noncompliance with Indicator 11 for FFY 2019 were corrected within one year of notification consistent with OSEP Memo 09-02.

**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, it was determined that the students received their required evaluations even though late, consistent with OSEP Memo 09-02, and all individual noncompliance was corrected for FFY 2019 within one year.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

**11 - Prior FFY Required Actions**

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2)

has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

#### **Response to actions required in FFY 2019 SPP/APR**

The ALSDE verified that all 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 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 LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement 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 LEAs identified as having noncompliance with Indicator 11 for FFY 2019 were corrected within one year of notification consistent with OSEP Memo 09-02.

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, it was determined that the students received their required evaluations even though late, consistent with OSEP Memo 09-02, and all individual noncompliance was corrected for FFY 2019 within one year.

## **11 - OSEP Response**

### **11 - Required Actions**

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

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

## Indicator 12: Early Childhood Transition

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Effective Transition

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

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

#### Data Source

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

#### Measurement

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

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

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

#### Instructions

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

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

Targets must be 100%.

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

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

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

## 12 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

#### Historical Data

Baseline Year	Baseline Data
2005	76.30%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.86%	99.65%	99.83%	99.92%	99.70%

#### Targets

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

#### FFY 2020 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	1,405
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	210

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	1,072
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.	115
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	3
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	1,072	1,077	99.70%	100%	99.54%	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**

5

**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 5, the following numbers indicate the range of days beyond the third birthday when eligibility was determined, and the IEP developed: 1-15 Days - 2; 16-30 Days - 0; 31-45 Days - 0; 46-60 Days - 2; and 60+ Days - 1. The reason for delays include 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)**

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

**Correction of Findings of Noncompliance Identified in FFY 2019**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	3	0	1

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

The 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 3 of the 4 LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement based on a review of updated data. All reviews were conducted within one year from the notification of noncompliance. The findings in 3 of the 4 LEAs identified as having noncompliance with Indicator 12 for FFY 2019 were corrected within one year of notification consistent with OSEP Memo 09-02.

**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. It was determined that the students received their required evaluations (even though late and consistent with OSEP Memo 09-02) and all individual noncompliance was corrected for FFY 2019 within one year.

**FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Of the 4 LEAs that were identified as having noncompliance in FFY 2019, one LEA had findings not yet verified as corrected when reviewing updated data. The ALSDE could not verify that the LEA with noncompliance was correctly implementing the specific regulatory requirement. All reviews of updated data were conducted within one year from the notification of noncompliance. The ALSDE provided technical assistance (targeted and intensive) to the identified LEA and required the LEA to review its policies and procedures.

The enforcement action taken was to require the LEA to develop a action plan that contains strategies to correct the LEA-identified factors of

noncompliance. The LEA was put on notice that if noncompliance continues, then the next step will be to enter into a compliance agreement with the ALSDE.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

**12 - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2019 SPP/APR**

The 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 3 of the 4 LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirement based on a review of updated data. All reviews were conducted within one year from the notification of noncompliance. The findings in 3 of the 4 LEAs identified as having noncompliance with Indicator 12 for FFY 2019 were corrected within one year of notification consistent with OSEP Memo 09-02.

Of the 4 LEAs that were identified as having noncompliance in FFY 2019, one LEA had findings not yet verified as corrected when reviewing updated data. The ALSDE could not verify that the LEA with noncompliance was correctly implementing the specific regulatory requirement. All reviews of updated data were conducted within one year from the notification of noncompliance. The ALSDE provided technical assistance (targeted and intensive) to the identified LEA and required the LEA to review its policies and procedures. The enforcement action taken was to require the LEA to develop a action plan that contains strategies to correct the LEA-identified factors of noncompliance. The LEA was put on notice that if noncompliance continues, then the next step will be to enter into a compliance agreement with the ALSDE.

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. It was determined that the students received their required evaluations (even though late and consistent with OSEP Memo 09-02) and all individual noncompliance was corrected for FFY 2019 within one year.

**12 - OSEP Response**

**12 - Required Actions**

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

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



## Indicator 13: Secondary Transition

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Effective Transition

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

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

#### Data Source

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

#### Measurement

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

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

#### Instructions

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2009	99.93%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.99%	99.91%	99.77%	99.95%	99.99%

### Targets

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

### FFY 2020 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
20,772	20,777	99.99%	100%	99.98%	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?	YES
If yes, at what age are youth included in the data for this indicator	15

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

There was no COVID-19 impact on the completeness, validity and reliability for this indicator.

**Correction of Findings of Noncompliance Identified in FFY 2019**

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

**FFY 2019 Findings of Noncompliance Verified as Corrected**

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

The 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 compliance during periodic intervals throughout the year following the findings of noncompliance. The ALSDE has verified that all LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirements based on a review of updated data. All reviews of updated data were conducted within one year from the notification of noncompliance and were verified as corrected within one year. All non-compliance with Indicator 13 for FFY 2019 were corrected within one year of notification consistent with OSEP Memo 09-02.

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

For noncompliance identified in FFY 2019, the ALSDE has verified that all LEAs have corrected each individual case of noncompliance based on a review of updated data about the transition components of the IEPs previously found out of compliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.

**Correction of Findings of Noncompliance Identified Prior to FFY 2019**

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

**13 - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2019 SPP/APR**

The 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 compliance during periodic intervals throughout the year following the findings of noncompliance. The ALSDE has verified that all LEAs with noncompliance reflected in the data reported for this indicator are correctly implementing the specific regulatory requirements based on a review of updated data. All reviews of updated data were conducted within one year from the notification of noncompliance and were verified as corrected within one year. All non-compliance with Indicator 13 for FFY 2019 were corrected within one year of notification consistent with OSEP Memo 09-02.

For noncompliance identified in FFY 2019, the ALSDE has verified that all LEAs have corrected each individual case of noncompliance based on a review of updated data about the transition components of the IEPs previously found out of compliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.

## 13 - OSEP Response

### 13 - Required Actions

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

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

## Indicator 14: Post-School Outcomes

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Effective Transition

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

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

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

#### Data Source

State selected data source.

#### Measurement

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

#### Instructions

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

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

#### I. Definitions

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

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

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

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

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

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

#### II. Data Reporting

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

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

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

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

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

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

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

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

### III. Reporting on the Measures/Indicators

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

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

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

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

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

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

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

## 14 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2009	Target >=	22.74%	22.99%	23.24%	23.49%	23.49%
A	13.77%	Data	27.33%	27.81%	26.37%	26.86%	24.67%
B	2009	Target >=	62.85%	63.10%	63.35%	63.60%	60.29%
B	45.41%	Data	70.20%	60.20%	60.02%	64.73%	60.29%
C	2009	Target >=	76.86%	77.11%	77.36%	77.61%	70.62%
C	63.48%	Data	78.49%	68.85%	70.50%	75.60%	70.62%

### FFY 2020 Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	22.54%	22.54%	22.54%	22.54%	22.54%	22.79%
Target B >=	63.78%	63.78%	63.78%	63.78%	63.78%	64.03%
Target C >=	71.17%	71.17%	71.17%	71.17%	71.17%	71.42%

### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP

members. Ongoing training has been conducted and 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.

During the FFY 2020 reporting year, the ALSDE sought input on how to better serve students transitioning from high school. Strategies included:

- 1) 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 Alabama State Department of Education, Special Education Services (ALSDE-SES) staff to hear concerns, suggestions, and needs from family members. At these meetings, ALSDE-SES staff presented on the State Systemic Improvement Plan (SSIP) to gather feedback on secondary transition and post-school outcomes.
- 2) Presenting on transition and post-school outcomes at several meetings. The ALSDE-SES staff presented information about the state Performance Plan/Annual Performance Report (SPP/APR) and SSIP transition activities at the state's Special Education Advisory Panel (SEAP) meetings and sought feedback from the SEAP. ALSDE-SES staff also presented at the Regional Special Education Coordinators' Meetings, the state's MEGA Conference regarding the transition work, and the ALSDE-SES Back to School meeting with district leaders.
- 3) Gathering input from parents through various surveys:
  - a) Through work on the AL SSIP and AL State Personnel Development Grant (SPDG), the ALSDE gathered input from parents at middle and high school SSIP/SPDG sites through a Foundations Survey. All parents were asked to rate the behavior, safety, climate of schools, and the ALSDE received copies of the results.
  - b) Additionally, AL SPDG parents of students of transition age were asked complete a satisfaction survey of transition services and resources and the SSIP-developed Planning for Life After School survey. These surveys will be used to determine areas for follow-up training and product development.

**FFY 2020 SPP/APR Data**

Total number of targeted youth in the sample or census	2,159
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,495
Response Rate	69.25%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	337
2. Number of respondent youth who competitively employed within one year of leaving high school	631
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)	31
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).	65

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Enrolled in higher education (1)	337	1,495	24.67%	22.54%	22.54%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	968	1,495	60.29%	63.78%	64.75%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other	1,064	1,495	70.62%	71.17%	71.17%	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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
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	2019	2020
Response Rate	63.57%	69.25%

**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 2020 was 69.25%. A metanalysis of over 1600 refereed published articles found the average response rate when surveying individuals was 52.7% (Baruch & Holtom, 2008). Alabama’s FFY 2020 results were well-above this average and would be considered a “high” response rate. The state’s average Indicator 14 response rate for the five prior years is 65%.

Alabama has continued to improve its response rate and will focus on ensuring underrepresented students are included. The Alabama State Department of Education will take the following two 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; and 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.

**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.**

ALSDE-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. ALSDE-SES staff ask LEAs to individuals who have an established relationship with the students, such a former teacher, to interview former students. 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 are reviewed and assessed for the following internal decision rules: 1) Any surveys with at least one response to a question that determines Indicator 14 are 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 1,495 responses in FFY 2020.

To calculate response rate, the final formula was the number of students responding to at least one Indicator 14-determining question (1,495) divided by the number of students with an IEP at the time they left school in the yearly sample (2,159). The FFY 2020 response rate was 69.25%. All LEAs in the FFY 2020 cohort were represented.

The ALSDE-SES used a threshold of +/- 3.0% to determine representativeness of the sample. As noted in the table in the sampling response, the greatest difference between the total sample and responding sample was among students who are Black or African American (1.56% underrepresented). Therefore, all demographic variables were within the 3.0% threshold for representativeness.

These results demonstrate Alabama had a high response rate among FFY 2020 leavers, and the data among respondents was representative.

Nonresponse bias is likely among former students who do 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 is 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 in 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. ALSDE-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.

**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.**

The total number of FFY 2020 Indicator 14 sample of leavers was 2159, and 1495 leavers responded to the Alabama Post School Outcome Survey. Therefore, the state’s response rate for the FFY 2020 was 69.25%. The response rate was 5.68% greater than in FFY 2019.

Demographic data for the FFY 2020 responding sample was compared to all leavers in the sample districts. The table below demonstrates: 1) the demographics for the FFY 2020 cohort of leavers; 2) the demographics for the FFY 2020 responding sample, and 3) the difference between the two samples.

**Demographic Indices for FFY 2020 Total Sample and Responding Sample**

**Gender; Total Sample; Responding Sample; Difference**

Male; 66.14%; 65.48%; -0.66%  
 Female; 33.86%; 34.52%; 0.66%

**Race/Ethnicity; Total Sample; Responding Sample; Difference**

Asian; 0.23%; 0.33%; 0.10%  
 Black; 44.84%; 43.28%; -1.56%  
 Hispanic; 5.37%; 5.28%; -0.09%  
 Native American; 1.20%; 1.54%; 0.34%  
 Multi-Race; 1.25%; 1.20%; -0.05%  
 Pacific Islander; 0.19%; 0.27%; 0.08%  
 White; 46.92%; 48.09%; 1.17%

**Disability Category; Total Sample; Responding Sample; Difference**

Autism; 9.12%; 10.03%; 0.91%  
 Deaf-Blindness; 0.09%; 0.07%; -0.02%  
 Developmental Delay; 0.00%; 0.00%; 0.00%  
 Emotional Disability; 1.16%; 1.00%; -0.16%  
 Hearing Impairment; 1.02%; 0.94%; -0.08%  
 Intellectual Disability; 11.02%; 11.24%; 0.22%  
 Multiple Disabilities; 1.48%; 1.61%; 0.13%  
 Orthopedic Impairment; 15.61%; 15.18%; -0.43%  
 Other Health Impairment; 0.65%; 0.67%; 0.02%  
 Specific Learning Disability; 57.30%; 56.79%; -0.51%  
 Speech/Language Impairment; 1.39%; 1.27%; -0.12%  
 Traumatic Brain Injury; 0.60%; 0.60%; 0.00%  
 Visual Impairment; 0.56%; 0.60%; 0.04%

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 FFY 2020 cohort leavers.

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

YES

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

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

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.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	YES
If yes, provide sampling plan.	Alabama Part B FFY 2020 Indicator 14 PSO Sampling Plan (4.28.22)

**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 in their 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, 135 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 (Asian, Black, Hispanic, Native American, Pacific Islander, White, and Multiple Races); 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.

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)**

In the FFY 2019 APR submission, the state inadvertently selected reporting Option 2 and, as a result, was asked during clarification to change the baseline to 2019 for Indicator 14B and Indicator 14C. However, Option 1 was the option actually used to analyze the data. As such, the state changed the baseline back to 2009 for Indicator 14B and Indicator 14C.

**14 - Prior FFY Required Actions**

None

**14 - OSEP Response**

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

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

**14 - Required Actions**

## Indicator 15: Resolution Sessions

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / General Supervision

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

#### Data Source

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

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

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

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

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

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

### 15 - Indicator Data

Select yes to use target ranges

Target Range not used

#### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1 Number of resolution sessions	100
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1(a) Number resolution sessions resolved through settlement agreements	9

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

NO

#### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

#### Historical Data

Baseline Year	Baseline Data
2005	47.00%

FFY	2015	2016	2017	2018	2019
Target >=	29.22%	29.47%	29.72%	29.97%	29.97%
Data	34.07%	17.65%	27.78%	7.45%	6.45%

#### Targets

FFY	2020	2021	2022	2023	2024	2025

Target >=	18.68%	18.93%	19.18%	19.43%	19.68%	19.93%
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**FFY 2020 SPP/APR Data**

<b>3.1(a) Number resolutions sessions resolved through settlement agreements</b>	<b>3.1 Number of resolutions sessions</b>	<b>FFY 2019 Data</b>	<b>FFY 2020 Target</b>	<b>FFY 2020 Data</b>	<b>Status</b>	<b>Slippage</b>
9	100	6.45%	18.68%	9.00%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

**15 - Prior FFY Required Actions**

None

**15 - OSEP Response**

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

**15 - Required Actions**

## Indicator 16: Mediation

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / General Supervision

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

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

#### Data Source

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

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

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

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

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

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

## 16 - Indicator Data

### Select yes to use target ranges

Target Range not used

### Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	18
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	10
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	6

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

NO

### Targets: Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

### Historical Data

Baseline Year	Baseline Data
2005	62.50%

FFY	2015	2016	2017	2018	2019
Target >=	86.61%	86.86%	87.11%	87.36%	87.36%
Data	83.87%	92.73%	91.84%	82.86%	76.47%

### Targets

FFY	2020	2021	2022	2023	2024	2025
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Target >=	85.55%	85.80%	86.05%	86.30%	86.55%	86.80%
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**FFY 2020 SPP/APR Data**

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
10	6	18	76.47%	85.55%	88.89%	Met target	No Slippage

Provide additional information about this indicator (optional)

**16 - Prior FFY Required Actions**

None

**16 - OSEP Response**

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

**16 - Required Actions**

## Indicator 17: State Systemic Improvement Plan

### Instructions and Measurement

**Monitoring Priority:** General Supervision

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

#### Measurement

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

#### Instructions

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

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

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

#### Overview of the Three Phases of the SSIP

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

##### **Phase I: Analysis:**

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

#### Specific Content of Each Phase of the SSIP

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

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

##### **Phase III: Implementation and Evaluation**

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

##### A. Data Analysis

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

##### B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

### C. Stakeholder Engagement

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

#### Additional Implementation Activities

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

## 17 - Indicator Data

### Section A: Data Analysis

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

In 2014, the Alabama State Department of Education, Special Education Services (ALSDE - SES) Section 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 (access Theory of Action on the ALSDE website at [https://www.alabamaachieves.org/wp-content/uploads/2022/01/REPDATA\\_SPECED\\_AlabamaPartBSSIPTheoryofActionfor-FFY2020updated1.13.2022\\_V1.0.pdf](https://www.alabamaachieves.org/wp-content/uploads/2022/01/REPDATA_SPECED_AlabamaPartBSSIPTheoryofActionfor-FFY2020updated1.13.2022_V1.0.pdf)), the ALSDE, SES staff and stakeholders identified the State-Identified Measurable Result (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 local education agencies (LEAs). LEAs were divided into two samples, and therefore half are represented each year. The two samples were selected based on their equivalent district size, the number of students with disabilities, and in their three index percentages (gender, ethnicity, and disability).

The following steps outline the methodology used to create a representative sample:

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 (Asian, Black, Hispanic, Native American, Pacific Islander, White, and Multiple Races); 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).

#### 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.

#### 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 for each strategy show positive results and improvement, as noted in Section B below. The state's SiMR, Indicator 14b, has increased 19.34% compared to 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 was 60.2%. In this same time period, SSIP Cohorts I and II transition districts averaged 48.8%. In FFY 2020, the results for all Alabama districts in the sample was 64.8% (a 4.6% gain). For SSIP Cohorts I and II transition districts, the FFY 2020 data averaged 64.2% (a 15.4% gain). Even though the SSIP cohort district results for Indicator 14b were slightly lower than the state Indicator 14b data (64.2% vs. 64.8%), the trajectory suggests SSIP cohort districts are improving at a faster rate (15.4% gain vs. 4.6% gain).

These data, together with the other outcome data, indicate the SSIP improvement strategies are positively impacting the SiMR.

**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	2020	2021	2022	2023	2024	2025
Target> =	63.78%	63.78%	63.78%	63.78%	63.78%	64.03%

**FFY 2020 SPP/APR Data**

Number of respondent youth who enrolled in higher education within one year of leaving high school + Number of respondent youth who 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
968	1,495	60.29%	63.78%	64.75%	Met target	No Slippage

**Provide the data source for the FFY 2020 data.**

ALSDE - SES uses the Alabama Post-School Outcomes Survey as the source of its SiMR. The survey was designed with assistance from Auburn University and the former National Post-School Outcomes Center (NPSO).

**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 2020 cohort conducted interviews with spring 2020 leavers using the Alabama Post-School Outcomes Survey. The process for collecting data is outlined in the Alabama Post-School Outcomes Training shared with LEA administrators and posted on the ALSDE - SES website: <https://www.alabamaachievers.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 or 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 the 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 Management Table for Indicator 14b. Student responses were coded, and using the definitions in the Management Table, determinations were made for each student regarding the category. All data were analyzed in SPSS and disaggregated analyses were conducted by demographic variables.

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

NO

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

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

ALSDE - SES staff have found completion rates within the Alabama Post-School Outcomes Survey have affected the Indicator 14 results. 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. ALSDE - 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 observed similar difficulties in gathering responses. ALSDE - SES staff will continue to encourage local district staff to complete interviews, and staff will review other options for obtaining data from a broad sample of students.

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

**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.**

While the AL SSIP Team was able to implement its initiatives and measure its SiMR in FFY 2020, there were COVID-related impacts:

SiMR: AL's SiMR, Indicator 14b, may have been affected by COVID. The state met its target, however, there were significantly fewer students enrolling in college. COVID-19 has impacted first-year college enrollment, particularly community college enrollment, both nationally (College Board, 2021) and in Alabama (Public Affairs Research Council of Alabama, 2021). Although the reduction in college enrollment was countered by an increase in competitive employment in FFY 2020, national data suggest the impact of COVID-19 on first-year enrollment will continue.

Transition fidelity data: Data collection for the transition class fidelity checks were impacted by COVID. The issue was two-fold: 1) Teachers reported they were not using the evidence-based transition curriculum daily, as they were instead spending increased time assisting students with completing other coursework; and 2) The transition fidelity form was designed as an external observation tool. The majority of SSIP schools would not allow visitors during this reporting period. To address these issues, the observation form was adapted to a self-assessment for the 2020-2021 school year, and questions were added to ascertain factors affecting transition curriculum implementation.

External fidelity checks: The SSIP Team typically collects external verification of a sample of teachers (co-teaching/co-planning or CHAMPS/Discipline in the Secondary Classroom). Due to COVID, formal teacher external fidelity checks were not conducted. 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, although these virtual visits were a truncated version of their typical on-site visits.

Outcome data: Hybrid schedules, quarantines, and virtual learning impacted several of Alabama's Indicator 17 outcomes, including academic data, office discipline referrals, suspensions, and attendance data.

For Goal 1, the state assessment data was collected for schools, although schools with co-taught classes did not report academic screening assessment data for 2020-2021 due to concerns about the reliability of the data. Similarly, schools implementing the behavior initiatives did not report office discipline, suspension, or attendance data for the 2020-2021 school year.

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

## **Section B: Implementation, Analysis and Evaluation**

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

YES

**If yes, provide a description of the changes and updates to the evaluation plan.**

Minor changes have been made to the Evaluation Plan to reflect changes in staffing, the state assessment, and names of data collection instruments (e.g., "SSIP Stakeholder Survey" instead of "Collaboration Survey"). Additionally, the initial SSIP Evaluation Plan included measures about reading and math interventions and mapping the schedule; these measures have been removed.

**If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.**

The AL SSIP Evaluation Plan was developed in 2016. Over the course of six years, there have been changes in staffing, the state assessment, and data collection instruments. These details have been updated.

Although reading and math intervention programs were purchased for interested Cohort I schools, this initiative was not large enough in scope to impact Strategy 1. Likewise, mapping the schedule, a support strategy for co-teaching/co-planning used in some Cohort I schools, did not have the support to continue. As a result, these Strategy 1, Cohort I initiatives were removed to allocate resources (staff and coaching time, funding, etc.) on the larger, more impactful initiatives.

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

Goal 1: Behavior & Instructional Supports

Strategy 1. High-quality, engaging instruction and co-teaching.

Activities designed to:

- increase use of co-teaching/co-planning (CoT/CoP) and specially-designed instruction (SDI) in SSIP cohort schools.
- provide training, coaching, and resources for selected teachers and administrators on CoT/CoP and SDI.
- form co-teaching dyads to offer supports for students with disabilities (SWDs) in the general education classroom.

While COVID-19 has impacted co-teaching, participating cohort districts have continued to emphasize implementation and scaling-up within their schools.

Two CoT/CoP and SDI trainings offered in summer 2021 with 58 participants from 17 schools in six districts. While some participants had co-taught during the SY 2020-21, many were receiving training to co-teach beginning in the SY 2021-22.

38 teachers in nine schools were members of co-teaching dyads. The number of participating teachers decreased from 64 teachers in SY 2019-20 due to COVID and retention. SSIP coaching was at 9% , including 8% for CoT/CoP and just over 1% for reading/math intervention implementation.

Strategy 2. Safe and supportive learning environments through evidence-based programs.

SSIP cohort districts/schools:

- participated in a three-year professional learning (PL) cycle on Positive Behavioral Interventions and Supports (PBIS), using Safe and Civil Schools' (S&CS) Foundations curriculum.
- participated in three-years of Foundations training, coaching by an SSIP Instructional Coach, and site reviews by S&CS consultants.
- participated annually in S&CS CHAMPS or Discipline in the Secondary Classroom (DSC) training, which provides universal behavior strategies at the classroom level, and follow-up coaching on CHAMPS/DSC.

New Cohort IV (Goal 1) was selected: 19 school sites in nine districts with elementary schools through high schools; 4 of 19 sites were from prior cohorts who chose to re-tier due to extensive administrator and staff turnover. A total of 70 schools in 26 districts have participated in Cohorts 1-4.

19 training events took place: Foundations (n = 14), CHAMPS (n = 3), and DSC (n = 2). While Cohorts I and II were no longer part of the three-year PL cycle, schools from both cohorts were invited to participate.

68 of 70 cohort schools participated in training or refresher training and continued to implement Foundations and CHAMPS/DSC. Coaching was at 40% for Foundations and 31% for CHAMPS/DSC.

Strategy 3. System of supports for implementation teams.

Activities included:

- Creating Foundations (Implementation) Teams for cohort districts and schools.
- Providing training to support the infrastructure of Strategies 1 and 2 (e.g., development of implementation teams, data systems, data use, and sustainability planning).

70 schools (97%) continued to have Implementation Teams for Goal 1. Training was provided through the Foundations or refresher training. Co-teaching supports for administrators were conducted in the CoT/CoP and SDI training and through SSIP coaching of district/school administrators. Coaching was at 3% for Implementation Teams, 3% for Data Systems or Data Use, and 5% for Sustainability Planning.

Goal 2: Secondary Transition

Strategy 4. Research-based transition services.

Activities included:

- Improving transition services in cohort schools (e.g., developing transition teams in districts/schools).
- Training for teachers and administrators on implementing an evidence-based transition curriculum, aligning the transition curriculum with students' IEPs, and developing transition classes.
- Coaching provided on developing school- and community-based work opportunities, transition teams, and outlining a sequence of supports through middle and high school.

18 schools in eight districts for Cohort IV (Goal 2) was selected. Four Cohort IV districts were also Goal 1 districts. A total of 45 schools in 19 districts participated in Cohorts 1-4.

Three transition training events were offered with 28 participants each. SSIP Coaching was at 8%. A total of 63 individuals were coached across 171 coaching events.

Strategy 5. Coordinate statewide transition infrastructure.

Activities included developing state-level infrastructure to improve secondary transition and post-school outcomes by examining secondary transition policy, collecting, and analyzing Post-School Outcome Survey data, offering funds for districts to purchase evidence-based transition curricula, and identifying or developing resources to guide the statewide implementation of evidence-based secondary transition services.

The Engage Alabama App continued to be promoted to assist all transition age students in Alabama with identifying individual goals, strengths, and preferences. Training was continued to ensure that students, parents, and teachers were informed about the app and its assistance with effective, student-centered transition planning.

Reminders were sent to districts regarding the PSO survey administration and data collection webinar, which emphasized the importance of data integrity.

The AL SPDG funded 35 districts to purchase evidence-based transition curricula. These districts represent each region of the state. 12 of 35 evidence-based transition curriculum districts, have become transition cohort schools in Strategy 4. Transition Coaches vetted transition resources and disseminated the list on its website.

Whole Project

Strategy 6. Implementation science practices of selection, training, coaching, data/evaluation, and systemic improvement.

Activities for Strategy 6:

- Hired staff and developed contracts.
- Reviewed evaluation data.
- Provided PL for those providing training, coaching, and/or technical assistance on SSIP strategies in the state.

A new Transition Coordinator, Transition Systems Coach, and Education Specialist joined the SSIP Team; two Goal 1 coaches were hired to assist cohort districts and schools.

Coaches participated in the PL community where each shared progress on their schools, discussed questions, reviewed data presented by the external evaluator, and had topical discussions.

Four training events were offered to SSIP staff and coaches: Overview of Early Interventions offered by S&CS to provide coaching on Tier II behavior supports; Better Leaders, High-Impact Instruction, and Introduction to Leadership Coaching offered by the Instructional Coaching Group-University of Kansas (ICG-UK). 30 SSIP staff, coaches, or district instructional coaches attended one or more of these trainings. The SSIP Team also offered the two-

part Better Leaders training by the ICG-UK to a total of 36 ALSDE, SES staff.

To help improve internal workflow, the SSIP Team held formal monthly meetings to provide updates on project activities and management and review evaluation data presented by the external evaluator.

Strategy 7. Parent, family, and stakeholder engagement.

Activities addressed communication and engagement with stakeholders, including families of SWDs.

SSIP input was gathered from groups of families of students in grades 6-12, or recent leavers via a focus group in coordination with Alabama Parent Education Center (APEC) staff. Parents were interviewed individually to gather feedback on transition services. The SSIP Team solicited input from focus group parents/family members via the Transition Resources and Planning for Life After School Survey.

APEC led three parent trainings in fall 2020 and three trainings in summer 2021. Topics included pandemic resources, Assistive Technology for the Home, College for Students with a Learning Disability, and Understanding Independent Living. Staff and coaches presented SSIP Goals 1 and 2 to stakeholders at the July 2021 MEGA conference and at the Regional Special Education Director meetings; stakeholder input on targets and progress was gathered from the state's Special Education Advisory Panel (SEAP).

**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.**

Goal 1: Behavior & Instructional Supports

Strategy 1: Collect CoT/CoP outcome data through: pre/post training learning measures; the SSIP Stakeholder Survey; the Coaches' Checklist; and state academic assessment data. This strategy's focused on quality standards and professional learning/technical assistance (PL/TA).

Pre/post training learning measure results demonstrated gains in knowledge after training. CoT/CoP learning scores increased by 19% pre-to-post training. On the Stakeholder Survey, 88% of co-teaching teachers reported SSIP coaching increased their skills. CoT dyads were able to use the PL knowledge to implement CoT/CoP. On the Coaches' Checklist, ratings of implementation of CoT/CoP and applying CHAMPS in co-taught classes averaged 87% among participating cohort schools.

Stakeholder Survey data of co-teachers found 84% reported more general and special education collaboration. Furthermore, 86% reported students benefited from the co-teaching, which was a 3% increase compared to 2019-2020. Data from the 2020-2021 Alabama state assessment data were analyzed for schools with SSIP CoT dyads, and 41% of all students and 12% of students with disabilities were proficient in English-language Arts. For math, 16% of all students and 5% of students with disabilities were proficient. These outcome data measure results from all classes and are not specific to co-taught classes; therefore, the results should be interpreted cautiously.

Strategy 2: Collect behavior initiative outcome data through: pre/post training learning measures; the SSIP Stakeholder Survey; Coaches' Checklist; and the S&CS Parent Survey. As noted in the COVID-19 impact response, long-term student measures were not collected. Strategy 2's short-term outcomes focused on accountability and monitoring, quality standards, and PL/TA.

Foundations, CHAMPS, and DSC learning scores averaged a 17% gain pre-to-post training. Confidence to implement the behavior initiatives increased by 21% after training. Furthermore, on the Stakeholder Survey, 82% reported increased classroom management skills. On the Coaches' Checklist, ratings of implementation of using data and providing turnaround training averaged 82% among cohort schools. Among Cohort I and II Stakeholder Survey participants, who would have participated long enough to see demonstrated outcomes, the reported outcomes included: 82% reported school climate had improved; 84% reported districts and schools benefitted from being involved; and 82% reported improved social and behavioral outcomes for students.

Parents of students in Strategy 2 schools could participate in a S&CS Parent Survey. Among responding parents, the average rating of parent engagement was 88%. This percentage was a 4% increase over the prior two years.

Strategy 3: Collect outcome data through: the Coaches' Checklist and the SSIP Stakeholder Survey. This strategy's short-term outcomes focused on governance, data, and accountability/monitoring.

Coaches' Checklist results averaged 94% for the six implementation team elements, a 14% increase compared to 2019-2020. As determined from the Stakeholder Survey, 80% reported their implementation teams were stronger as a result of the SSIP. Stakeholder Survey data suggest structures were improved to support implementation of Goal 1 practices: 82% reported increased capacity to implement a schoolwide system of behavior supports, and 81% had increased capacity to use data for decision making.

Goal 2: Secondary Transition

Strategy 4: Collect transition outcome data through: pre/post training learning measures; the SSIP Transition Stakeholder Survey; the Team Functioning Scale (TFS); graduation data; college and career readiness data; and IEP participation data. Strategy 4's short-term outcomes focused on governance, accountability and monitoring, quality standards, and PL/TA.

Pre/post training learning measures showed a 34% average gain pre-to-post training. Post-training confidence ratings were 83%. Outcome measures on the Stakeholder Survey for Cohorts I and II respondents averaged 89% including: an improved transition program as a result of the SSIP (90%); improved communication with families (84%); benefits from being involved in SSIP (93%); and improved student outcomes (91%). Transition Team members rated their SSIP-developed teams an average of 94% on the TFS. Furthermore, 91% of Stakeholder Survey respondents felt their transition team was stronger as a result of the SSIP.

Among Cohort I schools, the increase in graduation rates of students with disabilities from baseline to 2020-2021 was a 23% gain, whereas the increase among Alabama schools during that time period was 15%. Similarly, Cohort II schools had an increase of 11% rates among students with disabilities, while the state had a < 1% increase for the same period.

Transition Cohort I schools saw improved college and career readiness compared to state averages. From baseline to 2020-2021, Cohort I schools averaged a 28% gain, whereas the state averaged a 17% increase.

On the Alabama Parent Survey, parents of students were asked whether their child attended his/her last IEP meeting and whether the child actively participated. An analysis of SSIP Strategy 4 districts found 64% of students in grades 9-12 attended their last IEP meeting, and of those students, 89% actively participated.

Strategy 5: Collect outcome data through: SPP/APR Indicator 14 analyses and the Transition Curriculum Survey. This strategy's short-term outcomes focused on governance, data, and accountability/monitoring.

The progress toward the SiMR section provides Indicator 14b results. Further longitudinal Indicator 14 analyses of participating SSIP transition districts found sites who had participated for three or more years showed a 15.4% gain in Indicator 14b results over four years. The state saw a 4.6% gain for the same timeframe. Therefore, SSIP schools participating in Goal 2 had a larger increase in the SiMR than the state average.

In spring 2021, 91% of Special Education Coordinators who received funding to purchase an evidence-based transition curriculum reported they used the transition curriculum to offer a transition class in their districts.

#### Whole Project

Strategy 6: Collect outcome data through: learning gains and confidence measures and the SSIP Stakeholder Survey. This strategy's short-term outcomes focused on governance, data, finance, accountability/monitoring, and PL/TA.

For the five state and project staff training events, there was a 22% gain in learning pre-to-post training. Participants also averaged a 23% gain in confidence to implement the leadership or coaching training. On the SSIP Stakeholder Survey, coaching ratings averaged 87% for Goal 1 and 96% for Goal 2; implementation ratings averaged 85% for Goal 1 and 87% for Goal 2; and support for the project averaged 88% for Goal 1 and 91% for Goal 2. All Strategy 6 measures met their targets.

Strategy 7: Collect outcome data through: pre/post training learning; family focus group data; the SSIP Transition Resources Survey; and SPP/APR Indicator 8 Parent Survey. This strategy's outcomes focused on accountability/monitoring and PL/TA.

Among APEC's SSIP training parent participants, 100% reported more knowledge as a result of training. Furthermore, the SSIP Resources Survey found 96% reported more knowledge about transition than the prior year (a 3% gain). Among family members, 86% felt confident about helping their child with post-school planning.

On the AL Parent Survey, 72.29% of Alabama parents reported schools facilitated parent involvement, whereas 72.53% of parents in SSIP districts reported involvement (a 0.24% difference). Among SSIP Goal 1 schools, which has a broader scope, 73.61% of parents reported schools facilitated parent involvement (a 1.32% difference).

#### **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 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 PL communities.
- 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 Foundations training for SSIP coaches and administrators at SSIP Project Sites; existing CoT/CoP sites will participate in training as necessary.
- ensure that practitioners and administrators receive on-going PD in Implementation Science.
- invest time and effort in "Grow Your Own" strategy to create a cadre of trainers for CHAMPS.

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 visit the demonstration sites and adopt the AL SSIP practices. SSIP Coaches will also continue to present at Regional In-Service Meetings for special education coordinators in the 2021-2022 school year.

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 and Transition cohort schools; 3) Review data expectations with new staff and administrators submitting data; 4) Develop plans based on disaggregated FFY 2020 Indicator 14 results; 5) Share expectations for data collection, including dates, requirements by school, etc.; and 6) Provide training and technical assistance 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: Secondary transition curricula.

### **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 I and II, have received training on the Friend and Cook model of co-teaching. Additionally, Dr. Ploessl, faculty from the University of Montevallo, provides training on co-planning and specially designed instruction.

Following the Friend and Cook model, the training consists of the research behind co-teaching, six approaches to co-teaching, the roles of the general educator and the specialist, communication, how to co-plan and the materials needed, and how to apply specially designed instruction in the classroom. Additionally, teachers are able to practice co-teaching and co-planning. Teachers participating in the training completed pre/post evaluations to gauge gains in content knowledge and confidence.

Following training, co-teachers receive coaching from SSIP Coaches. Furthermore, Dr. Ploessl, a researcher in online (bug-in-the-ear) coaching, provided online coaching with co-teachers and coaches to further assist professional learning.

During the 2020-2021 school year, there were two, two-day training events on co-teaching, co-planning, and specially designed instruction, with 58 unique attendees. The average satisfaction rating among training participants was 97%, and the average confidence rating increased from 59% before training to 71% after training, representing a 12% gain in confidence to co-teach and co-plan.

#### **PBIS: Foundations and CHAMPS/DSC**

The Safe and Civil Schools' 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 participate in professional learning for these evidence-based strategies.

For Foundations, schools develop Foundations Teams that are representative of certified and non-certified building staff. In some SSIP districts, district Foundations Teams were also formed. Foundations Team members attend the Foundations training, provided by Safe and Civil Schools consultants. The three-year training 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 apply the information at the school level, including providing turn-around training to all staff. SSIP Cohorts I and II 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 professional learning focuses on individual teachers, as well as school administrators. Teachers and administrators from Strategy 2 cohort schools attend a 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 can attend CHAMPS/DSC training per school each year, many SSIP districts have contracted to offer districtwide CHAMPS training. Like Foundations, SSIP Cohort I and II schools had the opportunity to send teachers and administrators to a refresher training following the three-year training cycle.

Following training, Foundations Teams, CHAMPS/DSC training participants, and district and school administrators receive coaching from SSIP Coaches. Safe and Civil Schools consultants conduct site visits to provide Foundations Teams with feedback.

During the 2020-2021 school year, there were 19 behavior training events (14 Foundations trainings, three CHAMPS trainings, and two DSC trainings). There were 731 unique attendees at these training events. The average satisfaction rating among training participants was 90% (89% for Foundations, 91% for CHAMPS, and 91% for DSC). The average confidence rating across all behavior trainings increased from 58% before training to 79% after training, representing a 21% gain in confidence to implement Foundations, CHAMPS, or DSC.

#### **Secondary Transition Curricula**

The secondary transition curricula strategy focuses on professional learning 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. Typically, teachers only attend the SSIP training once, although teachers are welcome to attend to review the curriculum.

There were three transition curriculum training events during the 2020-2021 school year covering the Achieve Life Skills, Project Discovery, and Stanfield Transitions curricula. A total of 28 unique teachers and administrators attended the trainings. The average satisfaction rating among training participants was 100%, and the average post-confidence rating was 83%. In 2020-2021, each cohort district averaged 13 coaching events, and a total of 63 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 students with disabilities were placed in general education environments for more than 80% of the school day. Yet, proficiency data for students with disabilities remained static, within the 40% range. The SSIP Team identified the need to provide additional supports to students with disabilities in the general education classroom.

As noted in the state's Theory of Action, supports with instruction and behavior were needed by 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 post-school outcomes. Co-planning 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, specially-designed instruction, and individualized instruction. Co-teaching and co-planning provide students with disabilities 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 co-teaching 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 specially-designed instruction; 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 Safe & Civil Schools' 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 students with disabilities. Implementing PBIS efforts allowed the districts and schools to concentrate more time spent on instruction and creating improved school and classroom climate, which would increase attendance and decrease time out of the classroom for behavior incidences. Like co-teaching/co-planning, 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, focus 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, which do 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 2020-2021 school year (August 1, 2020 – July 31, 2021).

##### Co-Teaching

In January 2021, 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 70% of co-teachers will score 80% or greater on the co-teaching fidelity assessment. Dr. Ploessl from the University of Montevallo provided an external view of the quality of co-teaching implementation, as she provided additional coaching to co-teachers during the 2020-2021 school year.

For FFY 2020, the results found 89% of co-teachers achieved fidelity with co-teaching, which exceeded the target of 70%. These results were less than 1% lower than the 2019-2020 fidelity data. The highest-rated domain was the role of the specialist, and the lowest-rated domain was assessment.

##### Co-Planning

In January 2021, SSIP co-teaching teachers assessed their co-planning implementation using the Co-Planning Observation Form (Howard, 2016). The performance measure was 70% of co-teachers will score 80% or greater on the co-planning fidelity assessment.

For FFY 2020, 83% of teachers demonstrated co-planning fidelity. These results were 6% lower than the 2019-2020 school year but exceeded the 70% target. The highest-rated item was the lesson plan, and the lowest-rated item was planned grouping of students.

##### CHAMPS/DSC

CHAMPS and DSC were assessed together as the core components are the same; although CHAMPS is designed for implementation in kindergarten through 12th grade, DSC focuses 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 70% of teachers can implement 75% of the core components of the STOIC Checklist.

The FFY 2020 results found 90% of teachers implemented CHAMPS/DSC with fidelity, which exceeded the 70% target. This percentage was 5% higher than the 2019-2020 school year. Teachers in Cohort I schools averaged the highest (93% achieved fidelity), 91% of teachers in Cohort II schools achieved fidelity, and 86% of teachers in Cohort III schools achieved fidelity. Furthermore, length of years implementing CHAMPS/DSC was related to fidelity scores; 96% of teachers implementing for four or more years achieved fidelity, whereas 81% of teachers implementing for 1-2 years 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 70% of schools can demonstrate fidelity in 80% of the Foundations components after a three-year training cycle. Since only Cohorts I and II had finished the three-year cycle of Foundations training, only those schools were included in the current report.

For FFY 2020, 81% of the reporting Cohort I and II schools demonstrated fidelity with Foundations, which exceeded the 70% target. This percentage reflects over a 1% decrease compared to the number of schools achieving fidelity in 2019-2020. The average rating on the BoQ was an 82%.

##### Secondary Transition

Teachers implementing an evidence-based transition curriculum in SSIP districts completed a revised Transition Fidelity Form in February 2021. The form was developed to align with the AL SSIP Transition Fidelity Observation Form. The performance measure is 70% of teachers score 75% or higher on the assessment of implementation of an evidence-based transition curriculum.

In FFY 2020, 70% of teachers reported fidelity. This percentage was 5% lower than the 2019-2020 school year. The average score on the Transition Fidelity Form was a 79%. Instructional components of fidelity implementation scored slightly higher (81%) than curriculum components (78%).

#### **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 co-teaching/co-planning; 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.**

##### Co-teaching/Co-planning

Next Steps: Alabama is experiencing a teacher (i.e., general education; special education) shortage in many LEAs in the state. Some SSIP cohort

schools have reported a reduction in personnel, and therefore, cannot continue the successful implementation of the co-teaching/co-planning initiative. As a result, the state will not collect CoT/CoP outcome data or scale-up the CoT/CoP initiative at any new SSIP cohort school sites during the next reporting period. SSIP cohort schools that have been successful with implementing CoT/CoP will continue implementation and will receive coaching support from SSIP coaches and online coaching with co-teachers and coaches to further assist professional learning. Additionally, the state will continue to provide professional development (e.g., MEGA Conference) and training on CoT/CoP and SDI for CoT dyads to offer supports to students with disabilities in the general education classroom.

Anticipated Outcomes: While COVID-19 has impacted CoT, participating cohort districts have continued to emphasize implementation and scaling-up within their schools. The state expects to maintain the current number of CoT dyads with internal fidelity checks conducted by the site implementation team.

#### PBIS – Foundations, Champs/DSC

Next Steps: In collaboration with the AL SPDG, SSIP Cohort districts III and IV will continue to participate in a three-year PL cycle on PBIS universal schoolwide strategies, using S&CS Foundations curriculum. While Cohorts I and II are no longer part of the three-year PL cycle, schools from both cohorts will have the opportunity to participate in Foundations, CHAMPS, and DSC Refresher training and will have access to coaching support during the next reporting period.

Anticipated Outcomes: The state expects teachers and administrators to use the PL knowledge to implement Foundations and CHAMPS/DSC with fidelity and a focus on sustainability. Through the use of these behavioral initiatives, schools will show improvement in school and classroom climate, social and behavioral outcomes for students, and increased parent engagement.

#### Secondary Transition

Next Steps: The AL SSIP will continue to provide 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 that directly impacts post-school preparedness. Funding to districts will remain contingent on teaching the curriculum in a credit-bearing transition course and further developing a comprehensive transition program.

Anticipated Outcomes: The curricula and courses will allow teachers to focus on building knowledge and skills needed for successful post-school outcomes. This initiative will provide a continued focus on improving secondary transition services in cohort districts, schools, and classes, as well as building infrastructure for the entire state to improve transition and post-school outcomes for Alabama.

### Section C: Stakeholder Engagement

#### Description of Stakeholder Input

The ALSDE has solicited broad stakeholder input from the Special Education Advisory Panel (SEAP) in order to review and revise, as necessary, SPP/APR targets. Targets were revised during this reporting period. The input sessions consisted of video- and teleconferences. Specifically, stakeholders offered input and recommendations on setting targets for all results indicators. Also, stakeholders provided input and improvement strategies on all indicators demonstrating slippage.

In addition to soliciting input, the SES staff provided training regarding SPP/APR content and relevant data sources for new and veteran SEAP members. Ongoing training has been conducted and 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.

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

The ALSDE has solicited broad stakeholder input from the SEAP in order to review and revise, as necessary, SPP/APR targets; no targets were revised. The input sessions consisted of a face-to-face meeting as well as video- and teleconferences. Specifically, stakeholders offered input and recommendations on those indicators demonstrating slippage. The SES staff 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

Partnering 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 staff to hear concerns, suggestions, and needs from family members. The SES staff presented on the SSIP to gather feedback on secondary transition and post-school outcomes.

#### Transition

Presenting on transition and post-school outcomes at several meetings. The SES staff presented information about the SPP/APR and SSIP transition activities at the state's 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.

#### Alabama Alignment and MTSS

Key ALSDE leaders continued to be informed about the work of the SSIP and the ongoing results of the implementation of EBPs to align systems across ALSDE in order to improve student results. Additional meetings were held in 2020-2021. This series of face-to-face and virtual meetings were facilitated by the NCSI staff. Representatives from across the ALSDE include the SES section, Alabama Reading Initiative (ARI), Alabama Math and Science Initiative (AMSTI), Instructional Services, and Federal Programs.

In an effort to build greater awareness and capacity for change within the ALSDE around alignment and MTSS, feedback was sought 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 furthers the goal to implement MTSS statewide through data sharing.

#### Forums

During the July 2021 Mega Conference, administrators and staff from multiple Demonstration Ready sites presented information and results in individual sessions to education stakeholders from all areas of the state.

#### 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 interviews analyses found the three top concerns among participants were:

- Improved collaboration is needed to make family members feel more supported;
- Additional and better-trained teachers, other educators, and providers are needed;
- Family members would like more emphasis on life skills and helping students better prepare for their futures with additional life skills and job preparation.

These concerns are long-term areas to address. The ALSDE-SES has been addressing these issues by:

- Continuing to gather family feedback through focus groups, interviews, and surveys;
- Working with the National Center for Systemic Improvement (NCSI) to develop a multi-tiered system of supports (MTSS) framework for the state;
- Conducting monitoring of districts to ensure schools and districts are implementing the Individuals Education Programs (IEPs);
- Providing technical assistance to districts regarding instruction and behavior; and
- Providing ongoing training through the SSIP, State Personnel Development Grant (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.**

The ALSDE does not intend to implement any new activities 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.**

N/A

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

N/A

**Provide additional information about this indicator (optional).**

**17 - Prior FFY Required Actions**

None

**17 - OSEP Response**

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

**17 - Required Actions**



## **Certification**

### **Instructions**

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

#### **Certify**

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

#### **Select the certifier's role:**

Designated by the Chief State School Officer to certify

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

#### **Name:**

DaLee Chambers

#### **Title:**

Part B State Director

#### **Email:**

daleec@alsde.edu

#### **Phone:**

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#### **Submitted on:**

04/28/22 4:21:16 PM