

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**

Arizona



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

The Arizona Department of Education/Exceptional Student Services (ADE/ESS) has a system of general supervision that involves four main components: programmatic monitoring, dispute resolution, fiscal operations (including fiscal monitoring), and professional development/technical assistance. Programmatic monitoring assists public education agencies (PEAs) in implementing compliant special education programs that improve outcomes and provides support and technical assistance to improve student outcomes aligned to all OSEP indicators through annual site visit activities, monitoring activities, and review of risk analysis data. Dispute resolution allows for the community to notify the ADE/ESS that a PEA is or may be in noncompliance with the IDEA or a state special education requirement that identifies and corrects noncompliance. Fiscal operations administers IDEA entitlement funding and conducts single audit accounting reviews to ensure that items match submitted and approved budgets/uses. Finally, professional development and technical assistance are provided by every IDEA-funded area, take many forms, and are responsive to PEA requests and data generated through IDEA and education metrics from other sources. Special education administration is a system at both the SEA and PEA levels, not a collection of separate and isolated functions.

Additional information related to data collection and reporting

The impact that COVID-19 had on data collection and reporting is addressed within specific indicators in this report.

Number of Districts in your State/Territory during reporting year

675

General Supervision System:

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

Programmatic monitoring in Arizona is based on a six-year cycle that balances compliance and results-driven accountability (RDA) with a focus on improving outcomes for students with disabilities. Programmatic monitoring is structured around collaborative conversations and technical assistance (TA). All PEAs were involved in the following activities in the 2020–2021 school year:

- Technical assistance from ESS
- Review of indicator data, including student files
- Collection of student exit data
- Collection of post school outcomes
- Completion of Indicator 8 parent survey

In addition, some PEAs were involved in the following activities, depending on their cycle year:

- Annual site visits
- Review of policies and procedures
- Preparing for monitoring
- Differentiated monitoring activities
- Completion of individual and systemic corrective action

During the 2020–2021 school year, ADE/ESS continued the implementation of its yearly review of data related to special education. Compliance and results indicator data, PEA determinations, and annual site visit data continue to be reviewed annually by assigned program specialists in collaboration with PEA directors. The system supports practices that improve educational results for students with disabilities by using multiple methods to identify and correct noncompliance and by encouraging and supporting improvement through targeted TA and professional development.

Dispute resolution is also part of the general supervision system. The SEA operates IDEA dispute resolution activities through the ADE/ESS Dispute Resolution (DR) unit, which has 5 designated investigators who respond to citizens who alert the SEA to alleged noncompliance by PEAs. Complainants may submit a complaint, in either English or Spanish, online, through fax, or via US mail. Additional language translation is available upon request. The investigators review all complaints and then draft reports that specify determinations about compliance. ADE/ESS DR also has a designated compliance coordinator who ensures that corrective actions are completed. ADE/ESS DR regularly interfaces with the ADE/ESS Program Support and Monitoring (PSM) unit to analyze trends and ensure consistency in supervision and technical assistance. ADE/ESS DR maintains a database that enables the collaboration between the various units that perform general supervision functions. It also allows management of the due process complaint system and provides access to mediation in line with IDEA and its implementing regulation requirements.

Finally, grant allocations, funding administration, and fiscal compliance is facilitated by the ADE/ESS Operations unit. This unit coordinates fiscal tracking, grant awards, and distribution of federal funds. These activities are augmented by the SEA's Grants Management Section, which provides single audit functions, distributes cash payments, applies federal funding holds, and compiles fiscal reports when PEAs finish a project period. The SEA Grants Management and ADE/ESS Operations unit teams work collaboratively to leverage compliant practices in order for PEAs to become compliant with the IDEA.

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 ADE/ESS technical assistance system involves providing information and guidance on promising practices in educating students with disabilities and furnishing information and guidance on the IDEA and Arizona's regulations and policies. This assistance is provided by all IDEA-funded ADE areas and takes place during onsite visits, regional meetings, conferences, and other events. Electronic and virtual professional development and technical assistance is provided via email, through the consultant of the day (COD) telephone line, and via virtual software and meeting platforms. Technical assistance materials are found throughout the ADE/ESS website, <https://www.azed.gov/specialeducation>, including the Arizona Technical Assistance System (AZ-TAS) documents web page, <https://www.azed.gov/specialeducation/az-tas-documents>, and on the ADE/ESS Promising Practices website, <https://www.azpromisingpractices.com/>. During the 2020–2021 school year, ADE/ESS found it necessary to provide additional technical assistance,

related to the ongoing COVID-19 pandemic (but not necessarily related to the school closure that occurred in Spring 2020), through an additional "Special Education Guidance for COVID-19" web page as well as through monthly virtual meetings for special education administrators located throughout Arizona.

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.

Please see the Professional Development System link for an explanation of Arizona's Technical Assistance and Professional Development System. <https://des.az.gov/services/disabilities/early-intervention/azeip-professional-development-and-technical-assistance>

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).

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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

YES

Number of Parent Members:

62

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.

Target Setting

Every stakeholder meeting was organized and facilitated by ADE/ESS. It was imperative for the presenter to keep the audience in mind when preparing for a target-setting forum. Meetings where many of the stakeholders were parents, and familiar with special education terminology, were conducted slightly differently than meetings where the parents were not familiar with the technical language of special education. During meetings where parents were more acquainted with special education jargon, the presenter defined each indicator as it is written in the SPP/APR. Groups of this nature already had a background understanding of how the indicators impacted the State, and they understood the importance of setting targets. For parents outside of the special education field, a simplified definition of each indicator was given with a greater emphasis placed on how the indicator could relate to them and their child. For these groups, it was helpful to make a personal connection. For example, the exercise of setting targets for the SPP/APR was made analogous to setting goals for their child's IEP. Establishing that each group understood the indicator was the first step to ensuring participants were engaged in the target-setting process. The second step was the presentation of the data, and the third step was having the stakeholders vote for targets via an electronic survey.

Analyzing Data

Stakeholders took part in analyzing the data through four different stages of analysis. These include the descriptive, diagnostic, predictive, and prescriptive stages of analysis. During the descriptive analysis, stakeholders were shown data visualizations such as charts and graphs depicting the history of the data. The diagnostic analysis allowed participants to focus their understanding of what had occurred over the past several years that had an impact on the data (for example, looking at factors that led to an increase or decrease in outcomes). Predictive analysis enabled stakeholders an opportunity to identify future trends based on historical data. These proposed future targets were calculated using the average rate of change as well as standard deviation. In addition, stakeholders were prompted to use logic based on certain unexpected events that may impact data, such as the COVID-19 pandemic. Finally, the prescriptive analysis provided stakeholders the means to develop possible strategies and activities based upon the anticipated future trends.

Developing Improvement Strategies

On the survey that accompanied each indicator, stakeholders had an opportunity to type suggestions of improvement strategies related to that indicator. 62 of the 214 respondents to the surveys identified themselves as parents, and of those 62, there were 20 suggestions for developing improvement strategies.

Evaluating Progress

Annual reporting at SEAP meetings will be conducted to inform members about the progress on the targets set in the SPP/APR. In addition, ADE/ESS is in the process of building a more robust SPP/APR section on their website to allow the public to view progress on these indicators.

Activities to Improve Outcomes for Children with Disabilities:

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

The State conducted activities at stakeholder meetings to increase the capacity of diverse groups of parents. Activities included listening to a presentation, participating during the presentation, and providing feedback after the presentation. The State sought out a diverse group of parents by partnering with Arizona's Parent Training and Information (PTI) Center, Raising Special Kids (RSK). The 62 parents who responded to the final surveys represented multiple races/ethnicities and various roles, including community members, vocational/business professionals, special education professionals, and agency representatives. At the stakeholder target-setting meetings, the State described the historical and current initiatives related to each indicator. To build parent support of these initiatives, time was set aside at each meeting to ensure that parents understood the specific activities the State was taking to improve the outcomes of children with disabilities. For each indicator, the lead facilitator gave an introduction, then ADE/ESS panel members led conversations regarding past and current initiatives. Collaboration and participation were encouraged in order to provide a safe platform for the parents' voices to be heard. Parents were informed that the State continues to seek feedback on activities and that the State thoughtfully considers each parent's perspective. In the electronic survey that was distributed at the close of the meetings, parents were allotted a text box to type suggestions regarding improvement strategies or activities related to each indicator. After the presentations, the lead facilitator stayed on the call to offer any needed support as parents completed the surveys.

Soliciting Public Input:

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

Target Setting:

To solicit feedback from a broad set of stakeholders regarding the SPP/APR targets, the State invited various groups to facilitated, remote forums. Stakeholders were notified of these invitations through a variety of means, including targeted electronic mailing lists, social media platforms, and the State website. At the six, one-hour sessions held in conjunction with Raising Special Kids (RSK), a Spanish interpreter was available and the target-setting surveys were accessible in both English and Spanish. At SEAP meetings, a sign language interpreter was present. When requested, closed captioning and a transcript were provided.

Beginning in September 2021, the presentation slides used at SEAP meetings of indicator data and proposed targets, as well as a video recording of the meetings, were posted on the State website.

Each target-setting meeting began with the attendees understanding the important role they played in setting the State targets. During the presentation of every indicator, the attendees were guided through the target-setting process by first receiving the indicator's definition, data source, measurement, and historical data. A survey was used to collect the feedback on the proposed targets. One week after presenting to a particular stakeholder group, the constituents were sent a follow-up email reminding them, had they not done so, to complete the survey. Stakeholders in the group who did not attend a particular target-setting presentation were afforded an opportunity for asynchronous participation. They were sent links to view recordings of selected indicators as well as the accompanying surveys. For preschool directors who were unable to attend a live session, surveys were sent along with an embedded video presenting the historical data as well as the rationale for the target-setting options. The surveys were open from September 2021 to December 2021.

The following timelines were used to solicit public input on target setting, analyzing data, developing improvement strategies, and evaluating progress.

- September 22, 2021: The State presented Indicators 4, 9, 10, 11, 12, and 13 to SEAP
- October 1, 2021: The State presented Indicator 6 to the Inclusion Task Force
- October 12, 2021: The State presented Indicators 4, 9, 10, and 11 to RSK
- October 20, 2021: The State presented Indicators 1, 2, and 14 to RSK
- October 22, 2021: The State presented Indicators 1, 2, 5, 6, 7, 8, 14, 15, and 16 to SEAP
- November 5, 2021: The State presented Indicator 14 to the East Valley Community of Practice on Transition
- November 10, 2021: The State presented Indicators 7, 12, and 13 to RSK
- November 16, 2021: The State presented Indicator 14 to the Post School Outcome Focus Group
- November 30, 2021: The State presented Indicators 3 and 17 to SEAP
- December 6, 2021: The State presented Indicators 6 and 7 to the Central Regional Cohort
- December 7, 2021: The State presented Indicators 6 and 7 to the Eastern Regional Cohort
- December 8, 2021: The State presented Indicators 6 and 7 to the Northern Regional Cohort
- December 8, 2021: The State presented indicator 3, 5, 6, 7, and 8, to Special Education Director Forum
- December 9, 2021: The State presented Indicators 6 and 7 to the Southern Regional Cohort
- December 10, 2021: The State presented Indicators 6 and 7 to the Western Regional Cohort
- December 11, 2021: The State presented Indicators 5, 6, and 17 to RSK
- January 5, 2022: The State presented Indicators 3 and 8 to RSK
- January 5, 2022: The State presented indicators 1, 2, 14, and 17 to Special Education Director Forum
- January 12, 2022: The State presented Indicators 15 and 16 to RSK
- January 25, 2022: The State presented all Indicator results to SEAP
- February 18, 2022: The State will post the final target-setting results for each indicator on their website

Analyzing Data:

The data was compiled in a format that allowed the stakeholders an opportunity to view historical and current trends. Stakeholders were informed of the calculations used to create the proposed targets and were shown how to extract insights that support decision-making.

Developing Improvement Strategies:

Stakeholders were given an opportunity to provide input on activities and improvement strategies related to that specific indicator.

Evaluating Progress:

ADE will ensure that Stakeholders are aware of the progress on these targets as well as updates on State improvement activities. The State will meet annually with the advisory panel to report on historical and current trends as well as discuss the progress on current initiatives taking place regarding specific indicators. The slides used for these meetings are currently, and will continue to be, posted on the website for the public to view at <https://www.azed.gov/specialeducation/seap/> In addition, ADE/ESS is in the process of building a more robust SPP/APR section on their website in an effort to create a user-friendly interface for the indicators. This section of the website will be intended to allow the public to learn about each indicator through a series of videos and data visualizations. The videos and data displays will be updated annually to coincide with the current SPP/APR.

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 the target-setting meetings were convened and survey data was compiled, ADE/ESS engaged in an internal review of stakeholder feedback. The results of the internal review were presented at the SEAP meeting in January 2022. SEAP members took part in analyzing the data by looking at specific groups that supported certain targets. Discussions took place when discrepancies arose regarding targets that received more support from one group over another. These stakeholders also had an opportunity to give their final input regarding the suggested improvement strategies for each indicator. After the January 2022 SEAP meeting, the State compiled all stakeholder input regarding targets and improvement strategies for the FFY 2020–FFY 2025 SPP/APR. In February 2022, the State will post the results of the final targets on their website. At least annually, ADE/ESS will present on the progress of these indicators as well as give updates on any improvement strategies associated with those indicators over the next six years.

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 following link is the SPP/APR website: <https://www.azed.gov/specialeducation/sppapr/>

The annual performance report (APR) on the State's progress and/or slippage for FFY 2019 is available on the website listed above. It is located in a list under the section titled State Performance Plan (SPP) and Annual Performance Report (APR) and is titled SPP/APR FFY 2019.

The public reporting on the FFY 2019 performance of each PEA located in the State on the targets in the State's performance plan is located on a webpage within the ADE/ESS website listed above. It is located under the list titled State Performance by Indicator.

These reports list the performance of each school district and charter school in Arizona on the SPP targets. The SPP/APR are disseminated to the public by means of the ADE/ESS website. The ESS special education email listserv, ESS and Early Childhood Special Education (ECSE) specialists, trainings, and conferences serve as the vehicles to notify parents, the PEAs, and the public of the availability of the SPP/APR. Special Education Monitoring Alerts, <https://www.azed.gov/specialeducation/monitoring-alerts/>, memoranda pertaining to specific topics, including the SPP/APR, are sent to the ADE/ESS special education email listserv and filed electronically online.

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

In response to the request for technical assistance provided in FFY 2020, the State has provided the following information regarding (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.

Sources and Actions of Technical Assistance (TA)

CEEDAR Center (Collaboration for Effective Educator Development, Accountability, and Reform)

The data literacy guide developed by Northern Arizona University, in collaboration with CEEDAR, was reviewed and disseminated. Information was shared regarding High Leverage Practices (HLPs) with beginning special education teachers. In addition, input was provided on approval for alternative path programs and beginning teachers' knowledge of HLPs was surveyed through the Teacher Empowerment Project.

Center for IDEA Fiscal Reporting (CIFR)

A variety of resource documentation and training webinars were attended by ADE/ESS teams. CIFR webinars guided decisions related to implementing data collections based upon the IDEA federal grant and accurate fiscal reporting.

Director's Institute/Art Cernosia (external contractor)

Information was applied related to mediation, early resolution, and due process for future mediations and due process complaints.

Dispute Resolution for Special Education (DRSE)

Relevant information and topics were applied to ongoing and new proceedings.

Early Childhood Personnel Center (ECPC)

The following elements of the early childhood system were identified that needed to be addressed: Recruitment and Retention, In-Service Professional Development, and Pre-Service Teacher Training. As a result, the Early Childhood Special Education (ECSE) unit has increased the training that is available pertaining to child outcomes, preschool environments, and preschool transitions.

Early Childhood Technical Assistance Center (ECTA) and DaSy (Data Systems)

Data was analyzed from PEAs, Least Restrictive Environments (LRE), and child outcomes to investigate links between improved outcomes and less restrictive settings. This data was presented to the Inclusion Task Force and used to support PEAs with fewer children in inclusive settings.

IDC (IDEA Data Center)

The webinar, "Implications of COVID-19 on IDEA Data Collection and Reporting", was used to consider the potential impact of COVID-19 on data collection and analysis. Data reporting was adjusted for correction of noncompliance to ensure meeting both prongs of OSEP Memo 09-02 (2008) before reporting as corrected. Edits and revisions to the State Systemic Improvement Plan (SSIP) were made through the TA from IDC. In addition, IDC gave guidance on the adjustment of one of the indicator's baselines due to the change in reporting related to corrections of noncompliance as well as overall reporting as it aligns to OSEP guidance from December 2019.

LRP Publications, Raising Special Kids (RSK), Arizona Developmental Disabilities Planning Council, The AZ ARC (Association of Retarded Citizens),

National Association for Family, School, and Community Engagement (NAFSCE)

Strategies were identified to strengthen communication and partnerships with families. The information was used for individualized consultation with special education directors. Ideas given from the TA were also incorporated in survey instructions and supporting documentation.

NASDSE (National Association for State Directors of Special Education)

TA was received through multiple webinars, meetings, panels, and the annual NASDSE conference. This information was used to strengthen guidance around reopening schools, compensatory service provision, data collection and analysis, fiscal procedures, and general supervision.

National Center on Educational Outcomes (NCEO)

An action plan was developed to address student needs related to assessment including administration of assessments during the pandemic, the 1% threshold, and instructional considerations to meet the needs of all learners.

National Center for Intensive Intervention (NCII)

A data-based individualization (DBI) professional learning series for Arizona's PEAs was piloted in collaboration with NCII. ADE/ESS co-presented a presentation on DBI at the AzCEC/AzCASE annual conference.

National Center for Systemic Improvement (NCSI)

TA was provided through the book study "Evidence-Based Practices for Teaching and Learning" to build coherence to a professional learning strategic planning process. Knowledge of the book study was applied through cross-agency connections and collaborations to support agency cohesion. Also, through guidance from NCSI, the data collection was adjusted for programmatic monitoring to align to OSEP guidance issued in December 2019.

NCSI-SEAL (National Center for Systemic Improvement-State Education Agency Leadership)

TA guidance was given through regular panels, webinars, and meetings designed to engage in shared learning that strengthens capacity to provide leadership that launches, deepens, and/or sustains systemic improvement efforts to promote positive results for students with disabilities. This TA included 1:1 meetings with an NCSI-SEAL facilitator, who is a former state special education director.

National Technical Assistance Center on Transition (NTACT-C)

Guidance to Arizona Community of Practice on Transition (AZCoPT) was given through collaborative meetings with Vocational Rehabilitation to coordinate statewide professional learning opportunities. NTACT-C developed and delivered professional learning specific to transition by creating resources and best practice models for transition and post school outcomes data collection.

Office of Special Education Programs (OSEP)

Through regular meetings and TA with OSEP personnel, ADE/ESS better aligned federal regulations with state policies and procedures to be disseminated to PEAs. Professional development was created to support best practices in preschool transition including notifying PEAs regarding the requirements to participate in transition conference activities. In addition, PEAs were notified of web site improvements to inform the public about transition-to-preschool activities.

Promoting Rigorous Outcomes and Growth by Redesigning Educational Services for Students with Disabilities (PROGRESS Center)

IEP tip sheets were shared with beginning special education teachers and information was disseminated to PEAs about the opportunity to collaborate with the PROGRESS Center.

State Personnel Development Network (SIGnetwork)

TA was given regarding enhanced systems for professional learning and coaching for the ADE/ESS State Personnel Development Grant (SPDG), which is focused on increasing the literacy achievement of students with specific learning disabilities.

TAESE (Technical Assistance for Excellence in Special Education)

TA was provided via monthly calls facilitated by TAESE, which included other state special education directors, to discuss guidance around reopening schools, compensatory service provision, data collection and analysis, fiscal procedures, general supervision, and special education policy.

Time, Instructional Effectiveness, Engagement, and State and District Support (TIES) Center

The positive behavior intervention and supports (PBIS) specialist attended the TIES Peer Learning Group (PLG) #4 "Positive Behavioral Systems and Supports Including Students with Significant Cognitive Disabilities in Inclusive Schools" and embedded content learned for Tier 1, Tier 2, and Tier 3 students. Information gained was then put into presentations and delivered to the Arizona Special Education Advisory Panel (SEAP) and to the ADE/ESS staff. The TIES monthly meetings on developing instructional resources for students with disabilities in all settings provided information and resources to test coordinators. These resources are designed to be incorporated into PEA professional development to support teachers of students with disabilities.

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.

OSEP issued a monitoring report to the State on September 11, 2020 and is currently reviewing the State's response submitted on May 16, 2022, and will respond under separate cover.

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
2019	77.38%

FFY	2015	2016	2017	2018	2019
Target >=	80.00%	80.00%	80.00%	80.00%	75.60%
Data	64.42%	68.98%	66.40%	67.65%	68.98%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	77.38%	77.88%	78.38%	78.88%	79.38%	79.88%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

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These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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)	6,312
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)	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 reaching maximum age (d)	10
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)	1,391

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
6,312	7,713	68.98%	77.38%	81.84%	Met target	N/A

Graduation Conditions

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

OSEP is replacing the adjusted cohort graduation rate, which was used prior to the FFY 2020 data submission. The FFY 2020 data is now calculating the percent of students exiting with a regular high school diploma using the Exiting data file under Section 618 of IDEA.

Conditions to Graduate with a Regular Diploma

The Arizona State Board of Education establishes the minimum course of study and competency requirements for graduation from high school through the rulemaking process. The minimum course of study and competency requirements are outlined in Title 7, Chapter 2 of the Arizona Administrative Code. The minimum course of study is mandated in State Board Rule R7-2-302.

While the Arizona State Board of Education is charged with prescribing a minimum course of study and corresponding competency requirements, incorporating the academic standards in at least the areas of reading, writing, mathematics, science, and social studies, a PEA's governing board has the flexibility to prescribe a course of study and competency requirements that are consistent with and not less than the course of study and competency requirements that the Arizona State Board of Education prescribes.

The Arizona State Board of Education has established 22 required credits as the minimum number of credits in specified subject areas necessary for high school graduation. For the graduating class of 2017 going forward, students must earn credits in the content areas listed below as determined by the PEA:

- English or English as a Second Language: 4 credits
- Social Studies: 3 credits
- Mathematics: 4 credits
- Science: 3 credits
- The Arts or Career and Technical Education: 1 credit
- Locally prescribed courses: 7 credits

In addition to the required credits for graduation, Arizona has a testing requirement. A civics test has been required since the graduating class of 2017. High school graduates are required to pass (60/100) a civics test identical to the civics portion of the naturalization test used by the U.S. Citizenship and Immigration Services. A student with a disability is not required to pass the civics test to graduate from high school unless he or she is learning at a level appropriate for the pupil's grade level in a specific academic area and unless a passing score on the statewide assessment or the civics test is specifically required in a specific academic area by the pupil's individualized education program (IEP), as mutually agreed on by the pupil's parents and the pupil's IEP team or the pupil, if the pupil is at least eighteen years of age.

- Passing AZM2 statewide assessments are not a state requirement for graduation; however, local schools may choose to develop their academic requirements related to the AZM2 assessment.
- The local governing board of each district or charter school is responsible for developing a course of study and graduation requirements for all students placed in special education programs (Arizona Administrative Code R7-2-302 (6)). Students placed in special education, grades 9 through 12, are eligible to receive a high school diploma upon completion of the graduation requirements.
- Algebra II requirement may be modified using a Personal Curriculum, as outlined in R7-2-302.03

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)

ADE/ESS revised the baseline for indicator 1 due to a change in the data source. ADE/ESS considered using FFY 2020 data as the baseline; however, the State recognized that the school closures in March of 2020 greatly impacted the percentage of students who graduated. Therefore, the State, with the support of Arizona stakeholders, selected the FFY 2019 data of 77.38% as a realistic starting point for future projections. Note that this percentage does not match what was previously reported in the SPP/APR for FFY 2019. Using the previous data source, the FFY 2019 percentage was reported as 68.98%. Using the current data source, the percentage is 77.38%. The State is using the previous FFY 2019 data adjusted to the current metrics.

COVID-19 had an impact on the data reported for Indicator 1, as the data comes from SY 2019–2020. In March 2020, the Governor of Arizona ordered a state-mandated school closure that continued through the end of the school year. The impact of the school closure is revealed when comparing the FFY 2020 data to the year before the closure, FFY 2019. Between FFY 2019 and FFY 2020, the total number of students exiting remained about the same (decrease of only 45 students), however the number of students graduating increased significantly (309 students). This increase in the number of students graduating compared to the prior year is still being analyzed; however, it may be attributed to efforts made by PEAs in allowing students to demonstrate mastery of course content in novel ways.

1 - Prior FFY Required Actions

None

1 - OSEP Response

The State has revised the baseline for this indicator, using IDEA section 618 data from FFY 2019, 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
2019	22.39%

FFY	2015	2016	2017	2018	2019
Target <=	27.90%	27.80%	27.70%	26.80%	25.90%
Data	25.17%	26.85%	23.46%	21.93%	22.33%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	22.39%	21.89%	21.39%	20.89%	20.39%	19.89%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS

representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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)	6,312
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)	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 reaching maximum age (d)	10
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)	1,391

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
1,391	7,713	22.33%	22.39%	18.03%	Met target	N/A

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

Arizona uses the same data as used for reporting to the Department of Education under section 618 of the Individuals with Disabilities Education Act (IDEA) to describe what counts as dropping out for all youths. A dropout between the ages of 14 and 21 is defined as an individual who meets all of the following:

- 1) was publicly enrolled in special education at the start of the reporting period but was not in special education at the end of the reporting year; and
- 2) did not meet any of the following exclusionary conditions:
 - Presumed to be continuing in special education as reported by the public education agency at the end of the year
 - Graduate with a high school diploma
 - Reached the maximum age for special education
 - Died

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)

ADE/ESS revised the baseline for indicator 2 due to a change in the calculation. ADE/ESS considered using FFY 2020 data as the baseline, however the State recognized that the school closures in March of 2020 greatly impacted the percentage of students dropping out. Therefore, the State, with the support of Arizona stakeholders, selected the FFY 2019 data of 22.39% as a realistic starting point for future projections. Note that this percentage does not match what was previously reported in the SPP/APR for FFY 2019. Using the previous calculation, the FFY 2019 percentage was reported as 22.33%. Using the current calculation, the percentage is 22.39%. The State is using the previous FFY 2019 data adjusted to the current metrics.

COVID-19 had an impact on the data reported for Indicator 2, as the data comes from SY 2019–2020. In March 2020, the Governor of Arizona ordered a state-mandated school closure that continued through the end of the school year. The impact of the school closure is revealed when comparing the FFY 2020 data to the year before the closure, FFY 2019. Between FFY 2019 and FFY 2020, the total number of students exiting remained about the same (decrease of only 45 students), however the number of students dropping out decreased significantly (346 students). This decrease in the number of students dropping out compared to the prior year is still being analyzed; however, it may be attributed to efforts made by PEAs in allowing students to demonstrate mastery of course content in novel ways.

2 - Prior FFY Required Actions

None

2 - OSEP Response

The State has revised the baseline for this indicator, using IDEA section 618 data from FFY 2019, and OSEP accepts that revision.

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

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	89.54%
Reading	B	Grade 8	2020	84.24%
Reading	C	Grade HS	2020	67.59%
Math	A	Grade 4	2020	89.68%
Math	B	Grade 8	2020	84.55%
Math	C	Grade HS	2020	68.33%

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

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona’s advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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*	12,145	11,091	10,051
b. Children with IEPs in regular assessment with no accommodations	641	613	450
c. Children with IEPs in regular assessment with accommodations	9,533	7,956	5,689
d. Children with IEPs in alternate assessment against alternate standards	701	774	654

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*	12,362	11,307	10,288
b. Children with IEPs in regular assessment with no accommodations	677	638	476
c. Children with IEPs in regular assessment with accommodations	9,714	8,146	5,900
d. Children with IEPs in alternate assessment against alternate standards	695	776	654

*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	10,875	12,145		95.00%	89.54%	N/A	N/A
B	Grade 8	9,343	11,091		95.00%	84.24%	N/A	N/A
C	Grade HS	6,793	10,051		95.00%	67.59%	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	11,086	12,362		95.00%	89.68%	N/A	N/A
B	Grade 8	9,560	11,307		95.00%	84.55%	N/A	N/A
C	Grade HS	7,030	10,288		95.00%	68.33%	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 location (URL) of public reports of assessment results conforming to 34 CFR § 300.160(f) is <https://www.azed.gov/accountability-research/data/>. The special education sub-group is presented equally with all other groups.

Provide additional information about this indicator (optional)

The FFY 2020 assessment results reveal the effects caused by the disruption of in-person learning. Due to the pandemic, the governor closed schools in March 2020. Most students did not receive any formal schooling during the last three months of the school year because of the school closings. In the fall of 2021, many schools remained closed; however, teachers taught using a virtual platform for students to receive their daily instruction. Most schools were open in the spring of 2021, and the majority of these schools offered families a choice of having their child either attend in-person or remain online. Although the Arizona Department of Education allowed for additional flexibility to test students, families of students participating in online learning may have determined that in-person testing was unsafe for their child and did not allow for their child to complete state assessments. This may have contributed to a lower participation rate in FFY 2020 compared to previous years.

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.

The State provided a Web link and reported, "The location (URL) of public reports of assessment results conforming to 34 CFR § 300.160(f) is <https://www.azed.gov/accountability-research/data>. The special education sub-group is presented equally with all other groups." The State submitted Web link does not demonstrate that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities participating in regular assessments, the number of those children who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State, district or school levels, and the number of children with disabilities, if any, participating in alternate assessments based on alternate academic achievement standards, at the State, district and/or school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3A - Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

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	16.35%
Reading	B	Grade 8	2020	6.00%
Reading	C	Grade HS	2020	4.74%
Math	A	Grade 4	2020	13.62%
Math	B	Grade 8	2020	4.53%
Math	C	Grade HS	2020	3.48%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	16.35%	16.85%	17.35%	17.85%	18.35%	18.85%
Reading	B >=	Grade 8	6.00%	6.30%	6.60%	6.90%	7.20%	7.50%
Reading	C >=	Grade HS	4.74%	4.94%	5.14%	5.34%	5.54%	5.74%
Math	A >=	Grade 4	13.62%	14.16%	14.70%	15.24%	15.78%	16.32%
Math	B >=	Grade 8	4.53%	4.86%	5.19%	5.52%	5.85%	6.18%
Math	C >=	Grade HS	3.48%	3.70%	3.92%	4.14%	4.36%	4.58%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona’s advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona’s Parent Training and Information Center)

- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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	10,174	8,569	6,139
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	227	73	35
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,436	441	256

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	10,391	8,784	6,376
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	158	57	37
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,257	341	185

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	1,663	10,174		16.35%	16.35%	N/A	N/A
B	Grade 8	514	8,569		6.00%	6.00%	N/A	N/A
C	Grade HS	291	6,139		4.74%	4.74%	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 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	1,415	10,391		13.62%	13.62%	N/A	N/A
B	Grade 8	398	8,784		4.53%	4.53%	N/A	N/A
C	Grade HS	222	6,376		3.48%	3.48%	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 location (URL) of public reports of assessment results conforming to 34 CFR § 300.160(f) is <https://www.azed.gov/accountability-research/data/>. The special education sub-group is presented equally with all other groups.

Provide additional information about this indicator (optional)

The FFY 2020 assessment results reveal the effects caused by the disruption of in-person learning. Due to the pandemic, the governor closed schools in March 2020. Most students did not receive any formal schooling during the last three months of the school year because of the school closings. In the fall of 2021, many schools remained closed; however, teachers taught using a virtual platform for students to receive their daily instruction. The three months of school closures, followed by a number of months of virtual instruction, resulted in an overall significant loss of learning. Most schools were open in the spring of 2021, and students were able to complete state testing. The assessment results were impacted by the varied instructional environments offered over the previous year as a response to COVID-19, which were necessary to ensure the health and safety of Arizona students.

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.

The State provided a Web link to its FFY 2020 publicly-reported assessment results. However, the State provided Web link reports, "This file includes the combined student performance results from the Spring 2021 administrations of the AzM2 statewide assessment and the Multi-State Alternative Assessment (MSAA) alternative statewide assessment." The State publicly-reported assessment results reports students with disabilities as one subgroup and does not report on the performance results of children with disabilities on regular assessments, and the performance results of children with disabilities on alternate assessments based on alternate achievement standards at the State, district and/or school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3B - Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

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	34.81%
Reading	B	Grade 8	2020	38.37%
Reading	C	Grade HS	2020	45.41%
Math	A	Grade 4	2020	48.20%
Math	B	Grade 8	2020	46.91%
Math	C	Grade HS	2020	49.08%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	34.81%	35.52%	36.23%	36.94%	37.65%	38.36%
Reading	B >=	Grade 8	38.37%	39.17%	39.97%	40.77%	41.57%	42.37%
Reading	C >=	Grade HS	45.41%	46.01%	46.61%	47.21%	47.81%	48.41%
Math	A >=	Grade 4	48.20%	48.70%	49.20%	49.70%	50.20%	50.70%
Math	B >=	Grade 8	46.91%	47.61%	48.31%	49.01%	49.71%	50.41%
Math	C >=	Grade HS	49.08%	49.58%	50.08%	50.58%	51.08%	51.58%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona’s advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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	701	774	654
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	244	297	297

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	695	776	654
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	335	364	321

FFY 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	244	701		34.81%	34.81%	N/A	N/A
B	Grade 8	297	774		38.37%	38.37%	N/A	N/A
C	Grade HS	297	654		45.41%	45.41%	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	335	695		48.20%	48.20%	N/A	N/A
B	Grade 8	364	776		46.91%	46.91%	N/A	N/A
C	Grade HS	321	654		49.08%	49.08%	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 location (URL) of public reports of assessment results conforming to 34 CFR § 300.160(f) is <https://www.azed.gov/accountability-research/data/>. The special education sub-group is presented equally with all other groups.

Provide additional information about this indicator (optional)

The FFY 2020 assessment results reveal the effects caused by the disruption of in-person learning. Due to the pandemic, the governor closed schools in March 2020. Most students did not receive any formal schooling during the last three months of the school year because of the school closings. In the fall of 2021, many schools remained closed; however, teachers taught using a virtual platform for students to receive their daily instruction. The three months of school closures, followed by several months of virtual instruction, resulted in an overall significant loss of learning. Most schools were open in the spring of 2021, and students were able to complete state testing. The assessment results were impacted by the varied instructional environments offered over the previous year as a response to COVID-19, which were necessary to ensure the health and safety of Arizona students.

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 2021 through 2025 for this indicator, and OSEP accepts those targets. The State did not provide targets for FFY 2020 for this indicator, as required.

The State provided a Web link to its FFY 2020 publicly-reported assessment results. However, the State provided Web link reports, "This file includes the combined student performance results from the Spring 2021 administrations of the AzM2 statewide assessment and the Multi-State Alternative Assessment (MSAA) alternative statewide assessment." The State publicly-reported assessment results reports students with disabilities as one subgroup and does not report on the performance results of children with disabilities on regular assessments, and the performance results of children

with disabilities on alternate assessments based on alternate achievement standards at the State, district and/or school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3C - Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

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	29.36
Reading	B	Grade 8	2020	29.07
Reading	C	Grade HS	2020	28.13
Math	A	Grade 4	2020	21.50
Math	B	Grade 8	2020	22.39
Math	C	Grade HS	2020	23.50

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	29.36	28.86	28.36	27.86	27.36	26.86
Reading	B <=	Grade 8	29.07	28.57	28.07	27.57	27.07	26.57
Reading	C <=	Grade HS	28.13	27.88	27.63	27.38	27.13	26.88
Math	A <=	Grade 4	21.50	21.00	20.50	20.00	19.50	19.00
Math	B <=	Grade 8	22.39	21.89	21.39	20.89	20.39	19.89
Math	C <=	Grade HS	23.50	23.25	23.00	22.75	22.50	22.25

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona’s advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited

input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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	71,651	75,776	63,159
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	10,174	8,569	6,139
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	5,321	5,535	3,435
d. All students in regular assessment with accommodations scored at or above proficient against grade level	27,429	21,035	17,327
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	227	73	35
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,436	441	256

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	72,538	77,232	64,551
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	10,391	8,784	6,376
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	4,050	4,480	3,268
d. All students in regular assessment with accommodations scored at or above proficient against grade level	21,424	16,311	14,148

e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	158	57	37
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,257	341	185

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	16.35%	45.71%		29.36	29.36	N/A	N/A
B	Grade 8	6.00%	35.06%		29.07	29.07	N/A	N/A
C	Grade HS	4.74%	32.87%		28.13	28.13	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	13.62%	35.12%		21.50	21.50	N/A	N/A
B	Grade 8	4.53%	26.92%		22.39	22.39	N/A	N/A
C	Grade HS	3.48%	26.98%		23.50	23.50	N/A	N/A

Provide additional information about this indicator (optional)

The FFY 2020 assessment results reveal the effects caused by the disruption of in-person learning. Due to the pandemic, the governor closed schools in March 2020. Most students did not receive any formal schooling during the last three months of the school year because of the school closings. In the fall of 2021, many schools remained closed; however, teachers taught using a virtual platform for students to receive their daily instruction. The three months of school closures, followed by several months of virtual instruction, resulted in an overall significant loss of learning. Most schools were open in the spring of 2021, and students were able to complete state testing. The assessment results were impacted by the varied instructional environments offered over the previous year as a response to COVID-19, which were necessary to ensure the health and safety of Arizona students.

3D - Prior FFY Required Actions

None

3D - OSEP Response

The State has established baseline data 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
2020	40.00%

FFY	2015	2016	2017	2018	2019
Target <=	0.00%	0.00%	0.00%	0.00%	0.00%
Data	0.00%	0.46%	0.00%	19.44%	31.03%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	40.00%	35.00%	30.00%	25.00%	20.00%	15.00%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona’s advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona’s Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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.

660

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State’s minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
6	15	31.03%	40.00%	40.00%	N/A	N/A

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

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

State’s definition of “significant discrepancy” and methodology

Arizona defines significant discrepancy as any PEA with a suspension/expulsion rate ratio for children with disabilities that is 3.0 or greater. The following calculation method is used: Rate ratio method. Rate ratio = district-level suspension/expulsion rate for children with disabilities + State-level suspension/expulsion rate for children with disabilities.

The level at which significant discrepancy is identified: 3.0 (or 3 times as likely) and above

The minimum cell and/or n-size: Minimum n (risk denominator) size = 30 & Minimum cell (risk numerator) size = 10

Provide additional information about this indicator (optional)

Arizona has seen a shift in discipline practices based upon two different criteria that have reduced the number of incidents:

- 1) During COVID-19, Arizona moved heavily to virtual instruction and also drafted and adopted a bill that allowed instructional time to be made up any time throughout the year (A.R.S. § 15-901.08).
- 2) This, combined with alternative education programs acting as an intermediary, allowed for students to receive instruction in a variety of settings in lieu of a suspension or expulsion (A.R.S. § 15-841).

Beginning with the onset of the COVID-19 pandemic, which caused instruction to be provided primarily virtually, many schools now adopt a staggered schedule and offer flexibility in how instruction is made available. As such, there are use cases where students with disabilities may now receive instruction virtually and in-person, or at staggered times, which may lead to fewer discipline incidents compared to the “traditional” in-person, five- or four-day per week schedule public schools provided prior to COVID-19. Arizona also expects to see a data shift in educational environments over time. For the 2019 – 2020 school year, most students received virtual instruction except for students with more intensive disabilities who required in-person instruction or related services. This would also act in tandem unique for that year in minimizing the number of disciplinary removals. The relevant citations for Arizona are below.

A.R.S. § 15-901.08 for instructional time model flexibility

2. A school may deliver the annual required instructional time or instructional hours to students through any combination of the following:

- (a) Direct instruction.
- (b) Project-based learning.

- (c) Independent learning.
 - (d) Mastery-based learning, which may be delivered in a blended classroom serving multiple grade levels or providing blended grade level content.
3. A school may define instructional time and instructional hours to include any combination of the following:
- (a) In-person instruction.
 - (b) Remote instruction...
5. A school may stagger learning times and schedules for students and may offer courses and other instructional time options on the weekend or in the evenings so that all students are not expected to attend or complete their school day or instructional time at the same time.

A.R.S. § 15-841 for alternatives to suspension and expulsion

I. Each school district shall establish an alternative to suspension program in consultation with local law enforcement officials or school resource officers. The school district governing board shall adopt policies to determine the requirements for participation in the alternative to suspension program. Pupils who would otherwise be subject to suspension pursuant to this article and who meet the school district's requirements for participation in the alternative to suspension program shall be transferred to a location on school premises that is isolated from other pupils or transferred to a location that is not on school premises. The alternative to suspension program shall be discipline intensive and require academic work, and may require community service, grounds keeping and litter control, parent supervision, and evaluation or other appropriate activities. The community service, grounds keeping and litter control, and other appropriate activities may be performed on school grounds or at any other designated area.

E. As an alternative to suspension or expulsion, the school district may reassign any pupil to an alternative education program if the pupil does not meet the requirements for participation in the alternative to suspension program prescribed in subsection I of this section and if good cause exists for expulsion or for a long-term suspension.

A.R.S. § 15-796 outlines alternative education program

"alternative education" means the modification of the school course of study and adoption of teaching methods, materials and techniques to provide educationally for those pupils in grades six through twelve who are unable to profit from the regular school course of study and environment.

Arizona established a new baseline that reflects more flexibility in discipline removals along with a more streamlined platform to report more accurate discipline data. The baseline should reflect these factors moving forward for a more accurate representation of the number of PEAs that can be tested along with the percentage value represented for the state. Arizona's data is considered accurate and reliable.

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.

The State reviewed the PEAs' data from the significant discrepancy calculation and identified 6 PEAs as having a significant discrepancy. The SEA continuously monitors PEAs on the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Arizona required the identified PEAs to maintain special education policies and procedures in compliance with all regulatory requirements before Part B IDEA Entitlement funds could be approved by ADE/ESS. ADE/ESS specialists conduct on-site visits and/or desk audits to validate the policies and procedures made by the PEAs during a programmatic monitoring. Upon completion of the reviews, Arizona determined whether the PEAs complied with IDEA requirements that pertain to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

None of the identified PEAs had policies, procedures, or practices that contributed to significant discrepancy.

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

4A - Prior FFY Required Actions

None

4A - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, but OSEP cannot accept that revision. The State reported that the new baseline "reflects more flexibility in discipline removals" as a result of "a shift in discipline practices based on two different criteria that have reduced the number of incidents: 1) During COVID-19, Arizona moved heavily to virtual instruction and also drafted and adopted a bill that allowed instructional time

to be made up any time throughout the year (A.R.S. § 15-901.08) and 2) This, combined with alternative education programs acting as an intermediary, allowed for students to receive instruction in a variety of settings in lieu of a suspension or expulsion (A.R.S. § 15-841)." The State further reported that, "Arizona's data is considered accurate and reliable." However, OSEP is unable to determine whether the data reported are consistent with the IDEA section 618 discipline data reporting requirements and the SPP/APR Indicator 4A measurement and instructions. Therefore, OSEP cannot determine whether the data are valid and reliable. OSEP will be following up with the State separately regarding the rule and its implementation consistent with IDEA's discipline requirements.

OSEP cannot accept the State's FFYs 2020-2025 targets for this indicator because OSEP cannot determine whether the State's end targets for FFY 2025 reflect improvement over the State's baseline data, given that the State's revised baseline cannot be accepted, as noted above. The State must ensure its FFY 2025 targets reflect improvement.

4A - Required Actions

The State must provide valid and reliable data for FFY 2021 in the FFY 2021 SPP/APR.

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.

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Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
4	0	8	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

Arizona defines significant discrepancy as any PEA with a suspension/expulsion rate ratio for children with disabilities that are 3.0 or greater among PEAs within the State by race/ethnicity. The following calculation method is used: Rate ratio method. Rate ratio = district-level suspension/expulsion rate for children with disabilities by race/ethnicity ÷ suspension/expulsion rate for children with disabilities of all other groups. If the comparison group is not large enough, the ratio will use the state's rate of suspension/expulsion for children with disabilities of all other groups.

The level at which significant discrepancy is identified: 3.0 (or 3 times as likely) and above.

The minimum cell and/or n-size: Minimum n (risk denominator) size = 30 & Minimum cell (risk numerator) size = 10

Provide additional information about this indicator (optional)

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.

The State reviewed the PEAs' data from the significant discrepancy calculation and identified 4 PEAs as having a significant discrepancy. The SEA continuously monitors PEAs on the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Arizona required the identified PEAs to maintain special education policies and procedures in compliance with all regulatory requirements before Part B IDEA Entitlement funds could be approved by ADE/ESS. ADE/ESS specialists conduct on-site visits and/or desk audits to validate the policies and procedures made by the PEAs during a programmatic monitoring. Upon completion of the reviews, Arizona determined whether the PEAs complied with IDEA requirements that pertain to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

None of the identified PEAs had policies, procedures, or practices that contributed to significant discrepancy.

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

OSEP cannot determine whether the data are valid and reliable. In the State's narrative under Indicator 4A, the State reported "a shift in discipline practices based on two different criteria that have reduced the number of incidents: 1) During COVID-19, Arizona moved heavily to virtual instruction and also drafted and adopted a bill that allowed instructional time to be made up any time throughout the year (A.R.S. § 15-901.08) and 2) This, combined with alternative education programs acting as an intermediary, allowed for students to receive instruction in a variety of settings in lieu of a suspension or expulsion (A.R.S. § 15-841)." The State further reported that, "Arizona's data is considered accurate and reliable." However, OSEP is unable to determine whether the data reported are consistent with the IDEA section 618 discipline data reporting requirements and the SPP/APR Indicator 4B measurement and instructions. OSEP will be following up with the State separately regarding the rule and its implementation consistent with IDEA's discipline requirements.

4B- Required Actions

The State must provide valid and reliable data for FFY 2021 in the FFY 2021 SPP/APR.

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

Instructions

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

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2015	2016	2017	2018	2019
A	2019	Target >=	64.00%	64.50%	65.00%	65.50%	67.00%
A	68.03%	Data	64.94%	65.76%	66.57%	66.93%	68.03%
B	2019	Target <=	15.00%	14.90%	14.70%	14.50%	13.90%
B	13.69%	Data	14.76%	14.74%	14.19%	14.00%	13.69%
C	2019	Target <=	2.00%	2.00%	2.00%	1.90%	1.90%
C	2.52%	Data	2.11%	1.99%	2.33%	2.48%	2.52%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	68.05%	68.84%	69.63%	70.42%	71.21%	72.00%
Target B <=	13.70%	13.58%	13.46%	13.34%	13.22%	13.10%
Target C <=	2.76%	2.70%	2.64%	2.58%	2.52%	2.46%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort

- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

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	136,277
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	92,730
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	18,676
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	3,357
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	95
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	305

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	92,730	136,277	68.03%	68.05%	68.05%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	18,676	136,277	13.69%	13.70%	13.70%	Met target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	3,757	136,277	2.52%	2.76%	2.76%	Met target	No Slippage

Provide additional information about this indicator (optional)

COVID-19 had a potential impact on Indicator 5 data. Due to the pandemic, children were not required to be in person from March of 2020 until March of 2021. The EDFacts file contained data validated in the middle of this period on October 1, 2020. In a typical year, the enrollment increases about 800 students per year; however, the number of school-age students enrolled decreased a total of 1,292 students between FFY 2019 and FFY 2020. It cannot

be determined how the impact in the decline of enrollment affected the three different school-age environments. Over the course of the school year, many students returned to public education and may not have been represented on October 1, 2020.

5 - Prior FFY Required Actions

OSEP notes that the baseline for sub-indicator C still reflects FFY 2018 as the baseline. With the FFY 2020 SPP/APR, the State must update the baseline for sub indicator C in the "Historical Data" table to reflect FFY 2019 baseline of 2.52%.

Response to actions required in FFY 2019 SPP/APR

The State completed the required action.

5 - OSEP Response

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

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 >=	50.50%	51.00%	51.50%	52.00%	55.00%
A	Data	51.36%	51.36%	54.09%	54.75%	30.23%
B	Target <=	44.60%	44.40%	44.20%	44.00%	38.60%
B	Data	42.36%	42.22%	39.93%	38.80%	60.42%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort

• Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

Targets

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

Inclusive Targets

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

Target Range not used

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

Part	Baseline Year	Baseline Data
A	2019	30.23%
B	2019	60.42%
C	2020	0.64%

Inclusive Targets – 6A, 6B

FFY	2020	2021	2022	2023	2024	2025
Target A >=	27.23%	28.53%	29.83%	31.13%	32.43%	33.73%
Target B <=	63.36%	61.86%	60.36%	58.86%	57.36%	55.86%

Inclusive Targets – 6C

FFY	2020	2021	2022	2023	2024	2025
Target C <=	0.64%	0.62%	0.59%	0.57%	0.54%	0.52%

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	2,790	5,192	555	8,537
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	612	1,515	198	2,325
b1. Number of children attending separate special education class	1,919	3,103	286	5,308
b2. Number of children attending separate school	34	62	5	101
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	18	34	3	55

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	2,325	8,537	30.23%	27.23%	27.23%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	5,409	8,537	60.42%	63.36%	63.36%	Met target	No Slippage
C. Home	55	8,537		0.64%	0.64%	N/A	N/A

Provide additional information about this indicator (optional)

COVID-19 had a potential impact on indicator 6 data. Due to the pandemic, children were not required to be in -person from March of 2020 until March of 2021. The EDFacts file contained data validated in the middle of this period on October 1, 2020. The number of preschool students enrolled dropped from 10,552 in FFY 2019 to 8,537 in FFY 2020. At least two events may have had an impact on the changes from FFY 2019 to FFY 2020. One factor is that over the course of the school year, many preschool students returned to public education and may not have been represented on October 1, 2020. Also, it is likely that preschool environment reporting for children with disabilities was impacted by the decrease of regular early childhood programs offered in the State.

6 - Prior FFY Required Actions

None

6 - OSEP Response

The State established baseline for Indicator 6C, 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.

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	2017	Target >=	80.50%	81.00%	81.50%	82.00%	82.50%
A1	67.93%	Data	78.66%	79.01%	67.93%	65.86%	63.19%
A2	2017	Target >=	63.50%	64.00%	64.50%	65.00%	65.50%

A2	50.36%	Data	58.59%	60.31%	50.36%	49.77%	42.96%
B1	2017	Target >=	79.50%	80.00%	80.50%	81.00%	81.50%
B1	67.20%	Data	79.21%	78.55%	67.20%	69.73%	61.28%
B2	2017	Target >=	62.50%	63.00%	63.50%	64.00%	64.50%
B2	48.88%	Data	59.07%	59.36%	48.88%	50.08%	40.47%
C1	2017	Target >=	76.50%	77.00%	77.50%	78.00%	78.50%
C1	56.26%	Data	70.68%	78.69%	56.26%	63.93%	62.77%
C2	2017	Target >=	67.50%	68.00%	68.50%	69.00%	69.50%
C2	42.64%	Data	60.07%	80.86%	42.64%	43.60%	36.93%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A1 >=	61.70%	62.95%	64.20%	65.45%	66.70%	67.95%
Target A2 >=	42.80%	44.50%	46.20%	47.90%	49.60%	51.30%
Target B1 >=	63.37%	64.57%	65.77%	66.97%	68.17%	69.37%
Target B2 >=	48.88%	49.78%	50.68%	51.58%	52.48%	53.38%
Target C1 >=	62.79%	64.04%	65.29%	66.54%	67.79%	69.04%
Target C2 >=	36.93%	38.33%	39.73%	41.13%	42.53%	43.93%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona’s advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

FFY 2020 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

3,848

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	435	11.30%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	812	21.10%

Outcome A Progress Category	Number of children	Percentage of Children
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	954	24.79%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,055	27.42%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	592	15.38%

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, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	2,009	3,256	63.19%	61.70%	61.70%	Met target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,647	3,848	42.96%	42.80%	42.80%	Met target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	445	11.56%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	767	19.93%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	925	24.04%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,172	30.46%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	539	14.01%

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>	2,097	3,309	61.28%	63.37%	63.37%	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>	1,711	3,848	40.47%	48.88%	44.46%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	502	13.05%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	780	20.27%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,145	29.76%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,018	26.46%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	403	10.47%

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>	2,163	3,445	62.77%	62.79%	62.79%	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>	1,421	3,848	36.93%	36.93%	36.93%	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 Teaching Strategies Gold (TSG) assessment system is used as a formative, developmental, and criterion-referenced assessment. The platform utilizes teacher documentation and ratings of children’s performance to reflect their performance based on widely held expectations (i.e., the criterion-referenced measure) of children’s skills developed by panels of experts using the latest developmental theory and research. Widely held expectations are the range of knowledge, skills, and abilities that children would be expected to demonstrate for each domain, objective, and dimension over a school-year period. Teachers rate children’s performance on learning objectives and are given the child’s developmental performance. TSG translates the range of possible selections into COS process scores of 1–7 used for entry and exit data. A score of 6 or 7 is defined as functioning comparably to same-aged peers.

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

The currently identified tool used to collect, house, and generate Preschool Child Outcomes data is Teaching Strategies Gold. Upon enrollment in a school district, each child with a disability is to have an electronic portfolio in which teachers document the child’s performance of progress through observational notes, photos, and videos. Teachers are required to score students at three separate times during the school year (checkpoints) by assigning levels of performance relative to each piece of documentation gathered for each of the learning domains, such as social-emotional skills, literacy, language, mathematics, science, and self-help skills. This data is used for the Child Outcomes Summary to represent the percentage of children demonstrating age-level expectations resulting from special education services and programming. Early Childhood Special Education state staff review documentation status to support PEAs to completion of checkpoints and to ensure that all data for children who leave special education and transition to Kindergarten will be included in the outcomes data.

Provide additional information about this indicator (optional)

COVID-19 had a potential impact on indicator 7 data. Due to the pandemic, children were not required to appear in person from March of 2020 until March of 2021. This drop in enrollment impacted the number of students exiting preschool programs. In FFY 2020, 3,848 preschool children exited their preschool programs compared to 4,432 children in FFY 2019. It cannot be determined what the outcomes would have been for these unenrolled students.

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

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey

completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

Historical Data

Baseline Year	Baseline Data
2020	91.47%

FFY	2015	2016	2017	2018	2019
Target >=	59.00%	61.00%	63.00%	65.00%	67.00%
Data	92.05%	85.22%	92.84%	92.87%	93.04%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	91.47%	91.87%	92.27%	92.67%	93.07%	93.47%

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
18,892	20,654	93.04%	91.47%	91.47%	N/A	N/A

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.

Every parent who has a child with an IEP has the opportunity to complete the survey using the web-based data collection system. Thus, a census of parents of preschool and school-age children may complete the survey. The survey completed by parents of children with an IEP in preschool is the same survey completed by parents of children with an IEP in all age groups.

The number of parents to whom the surveys were distributed.

144,340

Percentage of respondent parents

14.31%

Response Rate

FFY	2019	2020
Response Rate	11.07%	14.31%

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

ADE/ESS provides extensive and ongoing technical assistance to PEAs by giving every special education director detailed survey instruction and sample parent instruction letters to involve all parents who have a child with an IEP, aged preschool through high school. The Parent Involvement Survey Coordinator offers PEA staff additional training and consultation to maximize parental response rates and feedback. Ongoing assistance is also available for families, if requested. Collaborations with Raising Special Kids (RSK), the state's Parent Training and Information Center, include consistent notices in its weekly e-newsletter and direct parent contact through workshops and personalized consultation. In an effort to increase the response rate, particularly for underrepresented populations, RSK is planning to expand to statewide disability-specific and ethnic community-based organizations. It is also going to be working with the Refugee Asylee Mentorship Program (RAMP). In this program, RSK family support specialists provide guidance and resources to the families in their preferred language. ADE/ESS will coordinate with the RSK family support specialist to explain the parent engagement survey. The goal is for the RSK family specialist to translate and ensure completion of the survey.

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

ADE/ESS seeks to promote responses from a broad cross section of parents of children with disabilities. The goal is to understand the needs, opinions, and experiences of all parents; therefore, the State examines the representativeness of the target group in the areas of race/ethnicity as well as the age of the child. To identify any potential nonresponse bias, beginning in FFY 2021, the State will analyze the response rate at three different intervals during the data collection window. Examining results from the beginning, middle, and end of the survey may provide insight into whether or not results may be biased.

An analysis of the response rate by age revealed that the parents of children ages 12–22 have historically had a lower response rate representation. For example, the difference between percent responded and the population was -4.15 percentage points in FFY 2019. In FFY 2020, the gap decreased to -1.89 percentage points. The positive impact on the response rate for this demographic can be attributed to the targeted assistance given to PEAs. Activities included enhanced survey training via direct consultation and staff development webinars. In addition, the real-time ADE/ESS response rate report allowed PEA special education directors to monitor district and school site progress. This tool was consistently used to boost parent participation.

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.

The FFY 2020 response rate by race and ethnicity is listed in the table below.

Race/Ethnicity	Percent Responded	Population	Difference
American Indian or Alaska Native	4.33%	5.14%	-0.81
Asian	1.56%	1.29%	+0.27
Black or African American	4.41%	5.86%	-1.45
Hispanic/Latino	45.22%	45.86%	-0.64
Native Hawaiian or Pacific Islander	0.16%	0.22%	-0.06
Two or More	4.92%	5.14%	-0.22
White	39.40%	36.49%	+2.91

The FFY 2019 response rate by race and ethnicity is listed in the table below.

Race/Ethnicity	Percent Responded	Population	Difference
American Indian or Alaska Native	5.90%	5.60%	+0.30
Asian	1.50%	1.34%	+0.16
Black or African American	4.42%	6.22%	-1.80
Hispanic/Latino	43.28%	45.84%	-2.56
Native Hawaiian or Pacific Islander	0.23%	0.27%	-0.04
Two or More	4.32%	4.09%	+0.23
White	40.37%	36.64%	+3.73

Notable comparisons in the response rates by race and ethnicity between FFY 2019 and FFY 2020 are as follows.

In FFY 2019, there was a slightly lower representation for Black or African American (difference of 1.8 percentage points). The gap decreased from 1.8 percentage points in FFY 2019 to 1.45 percentage points in FFY 2020.
 In FFY 2019, there was a slightly lower representation for Hispanic/Latino (difference of 2.56 percentage points). The gap decreased from 2.56 percentage points in FFY 2019 to 0.64 percentage points in FFY 2020.
 In FFY 2019, there was a slight overrepresentation for White (difference of 3.73 percentage points). The gap decreased from 3.73 percentage points in FFY 2019 to 2.91 percentage points in FFY 2020.

The FFY 2020 response rate by age of the child is listed in the table below.

Age of Child	Percent Responded	Population	Difference
Ages 3–5	11.32%	10.14%	+1.18
Ages 6–11	60.31%	59.60%	+0.71
Ages 12–22	28.37%	30.26%	-1.89

The FFY 2019 response rate by age of the child is listed in the table below.

Age of Child	Percent Responded	Population	Difference
Ages 3–5	12.17%	11.55%	+0.62
Ages 6–11	62.63%	59.11%	+3.52
Ages 12–22	25.20%	29.35%	-4.15

Notable comparisons in the response rates by age of the child between FFY 2019 and FFY 2020 are as follows.

In FFY 2019, there was a slightly lower representation for responders with children ages 6–11 (difference of 3.52 percentage points). The gap decreased from 3.52 percentage points in FFY 2019 to 0.71 percentage points in FFY 2020.
 In FFY 2019, there was a slightly lower representation for responders with children ages 12–22 (difference of 4.15 percentage points). The gap decreased from 4.15 percentage points in FFY 2019 to 1.89 percentage points in FFY 2020.

The demographics of the parents responding are representative of the demographics of children receiving special education services. (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 metric the used to determine representativeness is +/- 3%. To ensure reliable demographic information was collected, parents were given a specific code. That code was linked directly to the school’s Student Information System (SIS). Upon entering the code into the parent survey, only the questions related to the parent survey are shown on the screen. All other information, such as demographic information, was stored within the survey. The State

extracted a report from the survey and reviewed the demographic information relating to the age and race/ethnicity of the parent's child. The State specifically analyzed this information to determine if there was +/- 3% discrepancy. The State found that the race/ethnicity as well as the age of the children of the responding parents to the survey in the FFY 2020 reporting period were representative within +/- 3% of the children receiving special education services in Arizona.

Sampling Question	Yes / No
Was sampling used?	NO

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

Provide additional information about this indicator (optional)

Data collected showed a significant rise in the parent response rate over last year (11.07% response rate in FFY 2019 to 14.31% response rate in FFY 2020). This rise is noteworthy, considering that all schools were adjusting to a variety of instructional environments due to COVID-19. At the same time, families were challenged by shifting expectations for student engagement and family involvement. A significant number of parent comments indicated that families were pleased with meaningful messages from teachers and related service providers. Phone, email, text, and use of new contact systems improved communication about student learning and behavior.

The ADE/ESS data collection system was not adversely impacted by COVID-19. The survey application allowed staff to monitor agency and family participation to ensure progress remained consistent. Survey supervision was intensified to encourage school staff and families to focus on the positive impact of family engagement and the importance of parental feedback through the survey responses.

ADE/ESS revised the baseline for Indicator 8 due to a change in methodology. The previous baseline, set in FFY 2004, has been changed to reflect the FFY 2020 data. The FFY 2004 data represented responses from a paper-based survey and, more recently, the survey has changed to an electronic format. This change in the baseline is supported by the input of stakeholders.

8 - Prior FFY Required Actions

None

8 - 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.

8 - Required Actions

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, 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	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 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.

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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
0	0	496	0.00%	0%	0.00%	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).

1. The following calculation method is used:

a. Risk Ratio method

b. Alternate Risk Ratio method: used for any PEA that does not meet the minimum cell size or minimum n-size. The alternate risk ratio compares the risk of a specific outcome for a specific group within the PEA with the state ratios for that specific group.

2. The threshold at which disproportionate representation is identified: 3.0 and above

3. The number of years of data used in the calculation: 3 years

4. The minimum cell and/or n-size:

•Minimum n (risk denominator) size = 30

•Minimum cell (risk numerator) size = 10

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.

Arizona ensures that PEAs' policies, procedures, and practices are reviewed, as required by 34 CFR §§ 300.173, 300.600(d)(3), and 300.602(a). The data is analyzed annually, and PEAs may be flagged each year for overrepresentation, according to the State's definition of disproportionate representation. The SEA continuously monitors the policies, procedures, and practices of the PEA to determine if a disproportionate representation is the result of inappropriate identification.

Arizona requires all PEAs to maintain special education policies and procedures in compliance with the requirements of 34 CFR §§ 300.11, 300.201, and 300.301 before Part B IDEA Entitlement Grant funds can be approved by ADE/ESS. ESS/Program Support & Monitoring (PSM) reviews PEA policies and procedures in year 1 and year 4 of the six-year programmatic monitoring cycle. If the PEA makes any changes to the policies and procedures, the PEA must resubmit them to the State for review and acceptance.

Upon completion of the reviews, Arizona determined whether the impacted PEAs complied with IDEA requirements that pertain to the PEA's child find, evaluation, and eligibility practices. None of the identified PEAs had policies, procedures, or practices that contributed to disproportionate representation.

Provide additional information about this indicator (optional)

The State revised its baseline using FFY 2020 data because of a change in the methodology. All States are now required to provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories.

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

9 - Prior FFY Required Actions

None

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

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	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 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.

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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
22	0	393	0.00%	0%	0.00%	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).

1. The following calculation method is used:

a. Risk Ratio method

b. Alternate Risk Ratio method: used for any PEA that does not meet the minimum cell size or minimum n-size. The alternate risk ratio compares the risk of a specific outcome for a specific group within the PEA with the state ratios for that specific group.

2. The threshold at which disproportionate representation is identified: 3.0 and above

3. The number of years of data used in the calculation: 3 years

4. The minimum cell and/or n-size:

Minimum n (risk denominator) size = 30

Minimum cell (risk numerator) size = 10

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.

Arizona ensures that PEAs' policies, procedures, and practices are reviewed, as required by 34 CFR §§ 300.173, 300.600(d)(3), and 300.602(a). The data is analyzed annually, and PEAs may be flagged each year for overrepresentation, according to the State's definition of disproportionate representation. The SEA continuously monitors the policies, procedures, and practices of the PEA to determine if a disproportionate representation is the result of inappropriate identification.

Arizona requires all PEAs to maintain special education policies and procedures in compliance with the requirements of 34 CFR §§ 300.11, 300.201, and 300.301 before Part B IDEA Entitlement Grant funds can be approved by ADE/ESS. ESS/Program Support & Monitoring (PSM) reviews PEA policies and procedures in year 1 and year 4 of the six-year programmatic monitoring cycle. If the PEA makes any changes to the policies and procedures, the PEA must resubmit them to the State for review and acceptance.

Upon completion of the reviews, Arizona determined whether the impacted PEAs complied with IDEA requirements that pertain to the PEA's child find, evaluation, and eligibility practices. None of the identified PEAs had policies, procedures, or practices that contributed to disproportionate representation.

Provide additional information about this indicator (optional)

The State revised its baseline using FFY 2020 data because of a change in the methodology. All States are now required to provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten in addition to those aged 6 through 21 served under IDEA, aggregated across all disability categories.

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
			0

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

None

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

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
2020	96.17%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.82%	94.63%	97.29%	97.69%	97.64%

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
548	527	97.64%	100%	96.17%	N/A	N/A

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

21

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.

FFY 2020 Noncompliance

Range of days beyond the timeline: 1-130

Mean: 30.71

Median: 23

Mode: 2 and 24– 2 Occurrences Each

Reasons for the delays included

- Unavailability of student* (absences, illness, etc.) (1)
- Miscalculation of 60-day timeline (1)
- Unavailability of required personnel (parent, general education teacher, etc.) (4)
- Lack of understanding of the evaluation process (2)
- Lack of tracking system to alert the PEA to the timeline (7)
- Shortage of evaluators (1)
- Interruption in school calendar (2)
- State allowable extension agreement not confirmed in writing by parent (1)
- State mandated school closure (2)

The reason for the longest delay (130 days) was a lack of contingency planning for mandated school closure due to COVID to ensure evaluations could continue to be completed.

* Unavailability of student does not include the parent of a child repeatedly failing or refusing to produce the child for evaluation.

Indicate the evaluation timeline used:

The State established a timeline within which the evaluation must be conducted

What is the State’s timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).

Per Arizona Administrative Code (AAC) R7-2-401(E)(5), the 60-day evaluation period may be extended for an additional 30 days, provided it is in the best interest of the child and if the parent and PEA agree in writing to such an extension. The SEA considers a written agreement of extension to be compliant with the required timeline within which the evaluation must be conducted. All cases that fall within these parameters would be considered completed on time.

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

State monitoring

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

The data for Indicator 11 is collected from the Arizona Monitoring System. The PEAs were selected based on cycle year, as a result of a score on the risk analysis tool, and by using data from a review of the agency’s data, including data from the SPP/APR, dispute resolution results, audit findings, and annual determinations. PEAs selected for monitoring may complete a self-review of files for Indicator 11, in conjunction with verification by the SEA, or the student files are reviewed collaboratively with the PEA and SEA staff together. During the file review, the reviewer (PEA verified by SEA or SEA and PEA together) will ensure that the 60 day initial evaluation timeline has been met by reviewing the date of the parental consent to collect additional data and the date of the eligibility determination. The review will ensure these dates are within 60 calendar days of each other, or 90 days if there is a written agreement to an extension.

Data Collection

Data is collected from the selected PEAs during the State’s differentiated monitoring system based on their cycle year data, use of a risk assessment tool, and other factors described above.

The data that Arizona collected and reported for this Indicator includes a representative sample of children for whom initial evaluations were current at the time of the review during the 2020- 2021 school year monitoring activities.

Valid and Reliable Data

ADE/ESS assures the validity and reliability of the data as it is collected, maintained, and reported through the State monitoring system. Training is provided to all ESS/Program Support and Monitoring (PSM) specialists who monitor to ensure inter-rater reliability on compliance calls that are based on regulatory requirements. The ADE/ESS staff conduct trainings for PEA staff who will participate in monitoring. The ESS/PSM specialists validate and verify the data through on-site visits or desk audits.

Provide additional information about this indicator (optional)

In March 2020, the Governor of Arizona ordered a state-mandated school closure that continued through the end of the school year. Due to this school closure, some adjustments were made to the differentiated monitoring system. These adjustments included the following: extending timelines for

submission of data, SEA verification of data at a later date, and movement of a small number of PEAs (5) to a different monitoring cycle year. The impact of these adjustments on data collected is negligible since the monitoring activities were still conducted with the same system and integrity. The adjustments made to the monitoring activities still provided for accurate reporting of data and findings provided to PEAs where noncompliance was found.

ADE/ESS revised the baseline for Indicator 11 to more accurately reflect the data reporting guidance provided by OSEP in December 2019. Arizona now has two years of data to show that this reporting shift continues to result in a larger number of findings of noncompliance. In December 2019, OSEP issued guidance on reporting instances of noncompliance in the APR, including those that may not meet the SEA definition of a finding. Based on this guidance, Arizona has adjusted its reporting to contain all instances of noncompliance, including those instances that do not meet the definition of a finding as defined by the SEA monitoring system. This adjustment has resulted in an increase in total instances of noncompliance, as the SEA definition of a finding would normally only apply to noncompliance found at the completion of differentiated monitoring activities. In some differentiated monitoring activities, there was opportunity for PEA correction of noncompliance prior to the issuance of a finding by the SEA. This data was not previously captured as, prior to the OSEP clarification, Arizona reported data in accordance with the SEA definition of a finding. For example, in FFY 2019 there were 8 additional instances of noncompliance reported that would not have been previously counted if the state definition of findings had been used for reporting.

Additionally, the update to the baseline takes into account the continued impact of COVID-19. Arizona has adjusted the sample size of overall files reviewed to ease the burden on PEAs during the pandemic. In FFY 2019, the total sample reviewed was 1,027, whereas in FFY 2020 it was 548. ADE/ESS uses a cyclical programmatic monitoring system. For FFY 2019, 106 PEAs participated in differentiated monitoring activities. In FFY 2020, 131 PEAs participated in differentiated monitoring activities. On average, each year between 100 and 120 PEAs participate in differentiated monitoring activities. This does vary from year to year and PEAs can be moved into a monitoring cycle year when there are multiple indicators of a possibility that FAPE is not being provided. This change in the baseline is supported by Arizona stakeholders.

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
17	16	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

Arizona has adjusted its reporting of correction of findings of noncompliance to conform with the SEA corrective action process, which is administered at the PEA level rather than at the individual student level. In the monitoring year 2019-2020, 17 PEAs had noncompliance that accounted for 25 individual student instances of noncompliance. The ESS/PSM specialists reviewed the child-specific files from the PEAs that participated in programmatic monitoring to determine that the PEAs completed the evaluation for any child whose initial evaluation was not timely, unless the child was no longer within the PEA, and documented through the Corrective Action Plan (CAP) closeout process within one year of identification of noncompliance. The ESS/PSM specialists reviewed updated data from subsequent files during follow-up visits and verified that the PEAs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) related to the evaluation process in conformity with 34 CFR § 300.301 (c)(1) and consistent with OSEP Memo 09-02 (2008). OSEP Memo 09-02 (2008) can be found on the IDEA website at: <https://sites.ed.gov/idea/idea-files/osep-memo-09-02-reporting-on-correction-of-noncompliance/>.

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

Arizona used specific methods to verify that PEAs corrected all instances of noncompliance, including child-specific noncompliance, and correctly implemented the regulatory requirements based on subsequent file reviews of updated data:

- ESS/PSM specialists conducted follow-up visits and/or desk audits after the monitoring to verify correction of all instances of noncompliance, including those that were child-specific. The specialists reviewed the child-specific files to determine that the evaluation was completed within 60 calendar days from the date of written notification of noncompliance, if not already completed, and was documented and verified through the CAP closeout process.
- ESS/PSM specialists reviewed data from subsequent files and/or conducted interviews with the special education administrators during follow-up visits and/or desk audits to determine if all instances of noncompliance, including those that were child-specific, were corrected and to ensure ongoing sustainability of the implementation of the regulatory requirements regarding initial evaluations.

FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Systemic correction and sustainability of compliance have not been evidenced for one PEA from FFY 2019. Due to this PEA status as a for-profit charter entity, the SEA partnered with the Arizona State Board for Charter Schools on enforcement to compel this PEA to become compliant through subsequent file review. This PEA has evidenced correction of all individual instances of noncompliance during the programmatic monitoring activities but has yet to evidence systemic correction through the review of subsequent student files. The change to this reporting is based on feedback from national technical assistance centers that data should only be included as corrected when both prongs of OSEP 09-02 (2008) memo have been evidenced. Due to this change, Arizona has updated the data associated with the verification of noncompliance.

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

In response to a request for clarification from OSEP, all noncompliance from FFY 2019 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed by the ADE/ESS Program Support and Monitoring specialists through student file reviews from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure that correction of specific regulatory requirements has been made.

Systemic correction and sustainability of compliance have not been evidenced for one PEA from FFY 2019. Due to this PEA status as a for-profit charter entity, the SEA partnered with the Arizona State Board for Charter Schools on enforcement to compel this PEA to become compliant through subsequent file review. This PEA has evidenced correction of all individual instances of noncompliance during the programmatic monitoring activities but has yet to evidence systemic correction through the review of subsequent student files. The change to this reporting is based on feedback from national technical assistance centers that data should only be included as corrected when both prongs of OSEP Memo 09-02 (2008) have been evidenced. Due to this change, Arizona has updated the data associated with the verification of noncompliance.

11 - OSEP Response

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

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. In addition, the State must demonstrate, in the FFY 2021 SPP/APR, that the remaining one 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 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
2020	97.29%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	99.08%	99.07%	98.78%	99.27%	96.36%

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.	2,995
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	383

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,442
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.	84
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	18
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.	2,442	2,510	96.36%	100%	97.29%	N/A	N/A

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
68

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.

Reasons for Delay

Late referral from Part C: 4

Interruption of school schedule: 62

Did not pass vision/hearing: 1

Shortage of school personnel: 1

Total = 68

In FFY 2020, a total of 68 children did not transition on time due to four primary reasons: first, the largest area of delay is seen in the interruption of school schedule (62). Additional reasons for not transitioning on time were due to late referral from part C (4), did not pass vision/hearing (1) and shortage of school personnel (1). This is an overall reduction by approximately 30% from last year (from 106). The largest reductions were seen in interruption of school schedule (from 79 in FFY 2019). While COVID-19 continued to disrupt instruction during the year with many children attending remotely, interruptions to the school schedule typically references lack of staff to complete transition activities during breaks of instruction, such as over the summer. Guidance has been provided regionally this year, describing the results for the state, with collaborative agreements identified to complete transition prior to the end of the school year, and guidance is being provided to specific programs identified with this particular area of delay.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

Data Source

The data for Indicator 12 is reported annually by all PEAs in Arizona that have children who transition from Part C to Part B. Data is included for the entire reporting year, from July 1, 2020 through June 30, 2021.

Data Collection

The data is collected through the Annual Special Education Data Collection, an Arizona Department of Education (ADE) Web-based data collection system.

Valid and Reliable Data

The ADE/ESS Early Childhood Special Education (ECSE) and Program Support and Monitoring (PSM) unit specialists ensure the validity and reliability of the data as it is collected, maintained, and reported using internal edit checks. Training is provided to school personnel by the ADE/ESS Data Management unit regarding the operation of the data system and interpretation of the questions that are components of the measurement. The State requires an assurance from PEAs through the submission of a signed form attesting to the validity of the data. Random verification checks require that a selected district submit a copy of the front page of the IEP that shows the date of the IEP and the child's birthday for children that transitioned from early intervention service or a prior written notice (PWN) of children found ineligible by the child's third birthday.

Definition of Finding

A finding of noncompliance for Indicator 12 is based on the PEA's self-reported submission in the Web-based data collection system. When a PEA self-reports noncompliance, the SEA verifies correction of all self-reported noncompliance.

Provide additional information about this indicator (optional)

ADE/ESS has revised the baseline for Indicator 12. The previous baseline, set in FFY 2005 at 63.81%, has been changed to reflect the FFY 2020 measurement of 97.29%. The change comes with the support of stakeholders to closer represent the current data; however, it also reflects the significant impact COVID-19 has had upon PEA staffing, including awareness of early childhood transition procedures due to PEA staff turnover and ability to follow through with early childhood transition activities during pandemic-related child environment change, PEA preschool program change, and PEA staff loss.

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
106	106	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

As specified in OSEP’s FFY 2019 SPP/APR response, Arizona verified that each PEA with noncompliance was reflected in the data:

- All instances of non-compliance were verified for each PEA with noncompliance indicated in FFY 2018 for this indicator:
1. The PEA 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
 - a) Subsequent PEA data is sent to the SEA and reviewed for compliance
 - b) SEA (Part C and B) transition policies are reviewed to ensure sufficient and accurate messaging
 - c) Upon notification of delays, the SEA provides timely feedback to Part C and PEAs to intervene
 - d) Each of the PEAs submits In-by-3 policies and procedures for review and feedback
 2. Has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the PEA, consistent with OSEP Memo 09-02 (2008).
 - a) Each PEA submits the cover page of the IEP for each child not found eligible by their third birthday to ensure that the child was provided with an IEP or the PWN for those children found ineligible for special education.

In response to a request for clarification from OSEP, all noncompliance from FFY 2019 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed by the ADE/ESS Program Support and Monitoring specialists, in conjunction with ADE/ESS Early Childhood Special Education specialists, through student file review from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure that correction of specific regulatory requirements has been made. Systemic correction is evidenced through subsequent file review. Subsequent files reviewed evidence 100% compliance to ensure sustainability and systemic correction.

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

The specific methods Arizona used to verify that PEAs corrected all instances of noncompliance, including child-specific noncompliance, and were correctly implementing the regulatory requirements, based on subsequent file reviews of updated data, include the following actions:

- The ADE/ESCE and PSM specialists reviewed the written process and procedures for the PEA’s early intervention transitions, including those that were collaboratively developed and agreed upon with AzEIP service coordinators.
- The ADE/ECSE specialists and PSM specialists reviewed student data during subsequent visits and/or desk audits of updated data to determine if the PEAs corrected all instances of noncompliance, including child-specific instances, and to ensure ongoing sustainability with the implementation of the regulatory requirements.

In response to a request for clarification from OSEP, all noncompliance from FFY 2019 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed by the ADE/ESS Program Support and Monitoring specialists, in conjunction with ADE/ESS Early Childhood Special Education specialists, through student file review from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure that correction of specific regulatory requirements has been made. Systemic correction is evidenced through subsequent file review. Subsequent files reviewed evidence 100% compliance to ensure sustainability and systemic correction.

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

In response to a request for clarification from OSEP, all noncompliance from FFY 2019 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of

noncompliance are reviewed by the ADE/ESS Program Support and Monitoring specialists through student file reviews from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure that correction of specific regulatory requirements has been made.

12 - OSEP Response

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

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. 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 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
2020	61.94%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	97.39%	85.61%	83.96%	81.97%	78.03%

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
288	465	78.03%	100%	61.94%	N/A	N/A

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

State monitoring

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

Data Source

The data for Indicator 13 is compiled from the Arizona programmatic monitoring system. Beginning in FFY 2016, the monitoring system began selecting PEAs for programmatic monitoring on a cycle basis and differentiating the activities based on a risk analysis tool, including data from the SPP/APR, dispute resolution, audit findings, and annual determination. Both the reported number of youths with IEPs, aged 16 and above, and the number of youths, aged 16 and above, with IEPs that contain each of the required components for secondary transition reflect a difference in the number of files reviewed each year by the Arizona monitoring system. Each year contains a different cohort of PEAs, and some PEAs only serve elementary grades, thus secondary transition would not be part of a sample. This selection criteria provides a varied sample makeup and size. Additionally, given the 6-year cycle system, not all PEAs have cycled through the differentiated monitoring activities at this time. Although the SEA provides TA annually for all PEAs in the state, outside of a programmatic monitoring year, PEAs are not obligated to implement TA provided as part of corrective action.

The National Technical Assistance Center on Transition (NTACT) Indicator 13 Checklist was used as a guide for the eight components that comprise the monitoring line item from which the data is pulled. The eight components are:

- Measurable postsecondary goals
- Postsecondary goals updated annually
- Postsecondary goals based upon age-appropriate transition assessments
- Transition services
- Courses of study
- Annual IEP goals related to transition service needs
- Student invited to IEP meeting
- Representative of participating agency invited to IEP meeting with prior consent of parent or student who has reached the age of majority

Data Collection

Data is collected from the selected PEAs through the State's differentiated programmatic monitoring system based on their cycle year data, use of a risk assessment tool, and other factors described above.

Valid and Reliable Data

ADE/ESS assures the validity and reliability of the data as it is collected, maintained, and reported through the State monitoring system. Training is provided to all ESS/PSM specialists who monitor to ensure inter-rater reliability for compliance calls according to regulatory requirements. ADE/ESS staff conducts trainings for PEA staff who will participate in programmatic monitoring. ESS specialists validate and verify the data through on-site visits or desk audits.

In December 2019, OSEP issued guidance on reporting instances of noncompliance in the SPP/APR, including those that may not meet the SEA's definition of a finding. Based on this guidance, Arizona has adjusted its reporting to ensure there is an accurate accounting of all instances of noncompliance, including those not meeting the definition of a finding as defined by the SEA monitoring system. This adjustment has resulted in an increase in the total instances of noncompliance, as the SEA definition of a finding would normally only apply to noncompliance found at the completion of differentiated monitoring activities. In some differentiated monitoring activities, there is opportunity for PEA correction of noncompliance prior to the issuance of a finding by the SEA. This data was not previously captured as, prior to the OSEP clarification, Arizona reported data in accordance with the SEA definition of a finding. Arizona now reports in accordance with OSEP guidance. This adjustment in data reporting continues to impact the noncompliance identified considering each year has a different cohort of PEAs from which data is collected.

Definition of Findings for Monitoring for FFY 2020

During FFY 2020, a finding for Indicator 13 was issued when the line item for secondary transition was found to be noncompliant at the conclusion of PEA differentiated programmatic monitoring activities. PEAs are provided the opportunity to correct noncompliance prior to the issuance of findings; however, the SEA includes this noncompliance in the reporting. The finding was a written notification to the PEA by the State that the line item was noncompliant, and the finding included a description of a Federal or State statute or regulation. The source of information on which to base a finding of noncompliance is an individual student file.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	NO

Provide additional information about this indicator (optional)

In March 2020, the Governor of Arizona ordered a state-mandated school closure that continued through the end of the 2019-2020 school year. Due to this school closure, some adjustments were made to the programmatic differentiated monitoring system. These adjustments included extending timelines for submission of data, SEA verification of data at a later date, and movement of a small number of PEAs (5) to a different programmatic monitoring cycle year. The impact of these adjustments on data collected was negligible since the programmatic monitoring activities were still conducted with the same system and with integrity. ADE/ESS issued guidance throughout this mandated closure reinforcing the requirements of the state programmatic monitoring system. Continued impact of the pandemic has led to staffing issues across the state and has impacted the correction of noncompliance in a timely manner.

The corrective action process was minimally impacted throughout the Governor-mandated school closure in March 2020 through the 2019–20 school year due to COVID-19. Some impacts were the inability of PEAs to provide evidence of correction and the inability of PEAs to access student files. During this mandated closure, ADE/ESS issued guidance to PEAs about the timelines and requirements of the state programmatic monitoring system, specifically about correction of noncompliance. ADE/ESS continued to utilize enforcement strategies when needed in instances where the PEA was not making adequate progress toward correction of noncompliance and/or timelines. Several PEAs, as described above, have not been able to evidence systemic correction through 100% compliance as evidenced in subsequent student file reviews by the SEA. The continued impact of the pandemic on staffing is one contributing factor to PEA inability to evidence this correction.

ADE/ESS revised the baseline for Indicator 13. The previous baseline, set in FFY 2009 at 90.00%, has been updated to reflect the FFY 2020 measurement of 61.94%. In December 2019, OSEP issued guidance on reporting instances of noncompliance in the APR, including those that may not meet the SEA definition of a finding. Based on this guidance, Arizona has adjusted its reporting to ensure there is an accurate account of all instances of noncompliance, including those not meeting the definition of a finding as defined by the SEA monitoring system. This adjustment has resulted in an increase in the instances of noncompliance as the SEA definition of a finding applies to noncompliance at the completion of differentiated monitoring activities. For example, in FFY 2019, there were 20 instances of noncompliance that were reported that would not have been reported if data was based

on the state issuance of findings. In some differentiated monitoring activities, there is opportunity for PEA correction of noncompliance prior to the issuance of a finding by the SEA. This data was not previously captured as, prior to the OSEP clarification, Arizona reported data in accordance with the SEA definition of a finding. Arizona now reports in accordance with OSEP guidance. This adjustment in data reporting continues to impact the noncompliance identified, as each year has a different cohort of PEAs from which data is collected. The data reported in the SPP/APR reflects this impact, as Arizona continues to have slippage in years since the change in reporting was implemented. Therefore, the FFY 2020 data is most reflective of this change in reporting, as Arizona now has two years of reporting data in this manner and continues to see a decrease in percentage of noncompliance. Additionally, COVID-19 has had a significant impact upon programmatic monitoring as it relates to this Indicator. Given that Indicator 13 requires perfect compliance in all pieces of the Indicator, staffing challenges and program delivery during the pandemic have impacted the ability for PEAs to accurately document the requirements in the IEPs. The overall number of files reviewed in FFY 2019 was 487 and in FFY 2020 it was 461. There was a small decrease in sample size, but overall, the noncompliance found was significantly higher in the pandemic year when PEAs were ensuring service delivery in the ever-changing landscape between virtual and in-person instruction due to the pandemic. This change in the baseline is supported by Arizona stakeholders.

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
33	27	0	6

FFY 2019 Findings of Noncompliance Verified as Corrected

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

ADE/ESS Program Support and Monitoring (PSM) specialists reviewed the child-specific files from the programmatic monitoring to determine that the PEAs included the eight components of the secondary transition requirements for the students' IEPs, unless the child was no longer within the PEA, and documented through the Corrective Action Plan (CAP) closeout process within one year of identification of noncompliance. ESS/PSM specialists reviewed updated data from subsequent files during follow-up visits, specifically reviewing the transition requirements in these files for compliance to ensure the PEAs were correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) related to secondary transition in conformity with 34 CFR §§ 300.320(b) and 300.321(b).

Arizona has adjusted its reporting of correction of findings of noncompliance to confirm with the SEA corrective action process, which is administered at the PEA level rather than at the individual student level. In monitoring year 2019-2020, 33 PEAs had noncompliance that accounted for 107 individual instances of noncompliance. Arizona verifies correction in accordance with OSEP Memo 09-02 (2008).^{*} Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during programmatic monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance (student level) are reviewed in student-specific files by ADE/ESS PSM specialists through student file reviews from every PEA in which noncompliance was identified during the course of programmatic monitoring. Systemic correction is evidenced through ESS/PSM specialist reviews of subsequent student files (newly completed IEPs) presented by the PEA. These files are reviewed to ensure that secondary transition requirements are met. Subsequent files reviewed must evidence 100% compliance to ensure sustainability and systemic correction. Provided the PEA did not go past their one-year CAP timeline, these subsequent files would have been completed by the PEA during the 2019-2020 school year. This change to reporting of correction of noncompliance was made in accordance with technical assistance from national technical assistance centers. Guidance was provided indicating correction can only be reported when both prongs of the OSEP Memo 09-02 (2008) have been met. These data reporting changes reflect this guidance.

Arizona has 6 PEAs that have not been able to evidence systemic correction of this Indicator through a review of subsequent student files. All but one individual instance of noncompliance has evidenced correction through a review of corrected student files by the SEA. Two of these PEAs are for-profit charter entities not eligible for federal funding. The SEA continues to collaborate with the Arizona State Board for Charter Schools to access enforcement options that can aid these PEAs to become compliant. The other four entities are 2 charter entities and 2 smaller unified school districts. The SEA continues to work closely with these PEAs to ensure they understand the requirements and to secure submissions of newly completed student files for review by the SEA, working towards the completion of their CAPs. For context, Arizona utilizes a cyclical programmatic monitoring system. In FFY 2019, 106 entities participated in differentiated monitoring activities, and in FFY 2020, 131 entities participated in differentiated monitoring activities. On average each year, there are between 100 and 120 entities participating in differentiated monitoring activities. This varies from year to year and includes changes to monitoring cycle years when a PEA has a number of indicators that indicate a potential systemic failure of provision of FAPE.

^{*}OSEP Memo 09-02 (2008) can be found on the IDEA website at: <https://sites.ed.gov/idea/idea-files/osep-memo-09-02-reporting-on-correction-of-noncompliance/>

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

Arizona used specific methods to verify that PEAs corrected all instances of noncompliance, including child-specific noncompliance, and were correctly implementing the regulatory requirements, based on subsequent file reviews of updated data:

- ESS/PSM specialists conducted follow-up, on-site visits and/or desk audits after the monitoring to verify correction of all instances of noncompliance, including those that were child-specific. The specialists reviewed the child-specific files to determine that the PEA included the eight components of the secondary transition requirements for the students' IEPs, unless they were no longer within the jurisdiction of the PEA, within 60 calendar days from the date of written notification of noncompliance and was documented and verified through the CAP closeout process.
- ESS/PSM specialists reviewed updated data from subsequent files during follow-up visits and/or desk audits to determine if all instances of noncompliance, including those that were child-specific, were corrected and to ensure ongoing sustainability of the implementation of the regulatory requirements related to secondary transition in conformity with 34 CFR §§ 300.302(b) and 300.321(b).

In response to a request for clarification from OSEP, all noncompliance from FFY 2019 for this Indicator has been verified in accordance with OSEP Memo 09-02 (2008). Specifically, ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during programmatic monitoring activities, requires correction of individual instances of noncompliance and systemic correction. This is evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed, in student specific files, by the ADE/ESS PSM specialists through student file review from every PEA in which noncompliance was identified during the course of programmatic monitoring. Systemic correction is evidenced through ESS/PSM specialist review of subsequent student files (newly completed IEPs) presented by the PEA. These files are reviewed to ensure that secondary transition requirements are met. Subsequent files reviewed evidence 100% compliance to ensure sustainability and systemic correction. Provided the PEA did not exceed its one-year CAP timeline these subsequent files would have been completed by the PEA during the 2019-2020 school year.

FFY 2019 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Arizona has 6 PEAs that have not been able to evidence systemic correction of this Indicator through a review of subsequent student files. All but one individual instance of noncompliance has evidenced correction through a review of corrected student files by the SEA. Two of these PEAs are for-profit charter entities not eligible for federal funding. The SEA continues to collaborate with the Arizona State Board for Charter Schools to access enforcement options that can aid these PEAs to become compliant. The other four entities are 2 charter entities and 2 smaller unified school districts. The SEA continues to work closely with these PEAs to ensure they understand the requirements and to secure submissions of newly completed student files for review by the SEA, working towards the completion of their CAPs.

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

ADE/ESS administers a programmatic monitoring system where identified noncompliance, or incorrect implementation of specific regulatory requirements determined through a review of data collected during programmatic monitoring activities, requires correction of individual instances of noncompliance and systemic correction evidenced through a review of updated data collected in subsequent PEA files. All individual instances of noncompliance are reviewed, in student specific files, by ADE/ESS PSM specialists through student file reviews from every PEA in which noncompliance was identified during the course of programmatic monitoring to ensure correction of individual instances of noncompliance. Systemic correction is evidenced through ESS/PSM specialist review of subsequent student files (newly completed IEPs) presented by the PEA. These files are reviewed to ensure that secondary transition requirements are met. Subsequent files reviewed must evidence 100% compliance to ensure sustainability and systemic correction. Provided the PEA did not exceed its one-year CAP timeline, these subsequent files would have been completed by the PEA during the 2019–2020 school year.

Arizona has 6 PEAs that have not been able to evidence systemic correction of this item through a review of subsequent student files. Two of these PEAs are for-profit charter entities not eligible for federal funding. The SEA continues to collaborate with the Arizona State Board for Charter Schools to access enforcement options that can aid these PEAs to become compliant. The other four entities are 2 charter entities and 2 smaller unified school districts. The SEA continues to work closely with these PEAs to ensure that they understand their requirements and to secure submissions of newly completed student files for review by the SEA as they work toward completion of their CAPs.

13 - OSEP Response

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

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

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

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	2020	Target >=	29.60%	31.10%	32.60%	34.10%	24.30%
A	18.59%	Data	22.36%	22.79%	21.51%	23.80%	21.91%
B	2020	Target >=	64.20%	66.20%	68.20%	70.20%	56.50%
B	56.22%	Data	61.34%	63.55%	61.17%	54.56%	55.35%
C	2020	Target >=	76.70%	78.00%	79.30%	80.60%	75.00%
C	71.80%	Data	74.98%	77.66%	75.27%	73.72%	72.51%

FFY 2020 Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	18.59%	19.69%	20.79%	21.89%	22.99%	24.09%
Target B >=	56.22%	56.72%	57.22%	57.72%	58.22%	58.72%
Target C >=	71.80%	72.40%	73.00%	73.60%	74.20%	74.80%

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona’s advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited

input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

FFY 2020 SPP/APR Data

Total number of targeted youth in the sample or census	7,933
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	6,245
Response Rate	78.72%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	1,161
2. Number of respondent youth who competitively employed within one year of leaving high school	2,350
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)	496
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).	477

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)	1,161	6,245	21.91%	18.59%	18.59%	N/A	N/A
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	3,511	6,245	55.35%	56.22%	56.22%	N/A	N/A
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	4,484	6,245	72.51%	71.80%	71.80%	N/A	N/A

Please select the reporting option your State is using:

Option 2: Report in alignment with the term “competitive integrated employment” and its definition, in section 7(5) of the Rehabilitation Act, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). For the purpose of defining the rate of compensation for students

working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Response Rate

FFY	2019	2020
Response Rate	78.56%	78.72%

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

ADE/ESS will continue to support PEA staff who administer the PSO survey through the use of statewide and targeted technical assistance and professional development opportunities that share best practice strategies to increase the response rate. ADE/ESS will continue to work directly with PEAs to implement school- and community-specific strategies that encourage survey responses from youths across demographic categories, emphasizing strategies to enhance rates for underrepresented populations. ADE/ESS will also continue to provide current materials and guidance resources that support the use of strategies that increase annual response rates. As with prior years, ADE/ESS will host Focus Group meetings to gather insight into field experiences related to Indicator 14 data collection. Focus group members consist of special education administrators and school staff who support PSO efforts.

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.

ADE/ESS sought to gain unbiased responses from all eligible students in the survey, thus the State used a census to collect information. Each PEA was asked to contact every former student who qualified for the survey. If the initial contact was unsuccessful, the PEA was asked to make at least two subsequent attempts. The PEA then submitted documentation to ADE explaining the reason why any surveys were incomplete. This method gave equal attention to all subgroups, thus reducing potential nonresponse bias.

ADE/ESS provided targeted outreach for PEAs with 20% or higher occurrences of not-contacted former students. Documented reasons for the failure to contact these students included an inability to contact after multiple attempts, incorrect contact information, or the responder refused to complete the FFY 2020 survey. Targeted outreach included email or phone correspondence to provide best practice strategies and technical assistance in addressing barriers in reaching all eligible former students.

Respondents to the FFY 2020 survey were underrepresented in the population of youths who dropped out of school. Of those youths who dropped out of school, 49% did not respond to the survey. This is an increase from 38% in FFY 2018 and 45% in FFY 2019. The increase in non-responders may be due to an impact of the COVID-19 pandemic. ADE/ESS's Indicator 14 survey protocol includes an optional question on the impact of COVID-related policies on postsecondary engagement, which received over 2,040 respondents for the FFY 2020 survey, or 32.7% of all survey respondents. Of those responses, 783 reported an impact on their ability to enroll in or complete a term in a school or job training program. Expanded comments reported that many respondents faced difficulty with online learning or preferred to wait until in-person courses were offered for their program. Additionally, 739 responded that they experienced a barrier to obtaining or keeping employment. Many responses reported instances of mental and physical health-related needs that impacted overall postsecondary engagement. Of these responses, 107 reported no impact to their postsecondary engagement due to COVID-related policies. ADE/ESS will continue to work with PEAs to identify strategies to encourage survey responses from youths in the dropout category and ensure that PEAs are collecting contact information while students are still enrolled in school.

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.

ADE/ESS used the Response Calculator developed by the National Technical Assistance Center on Transition (NTACT) to calculate the representativeness of the respondent group on the characteristics of (a) disability type, (b) race/ethnicity, (c) gender, and (d) exit status (e.g., dropout). This calculation determined whether the youths who responded to the interviews were similar to or different from the total population of youths with an IEP who exited school during the school year 2019–2020.

The FFY 2020 survey response rate was 6,245 of the 7,933 youths eligible to take the survey, or 78.72% of leavers. This rate is slightly higher than the previous year (FFY 2019 response rate was 78.56%). The total number of youths who were eligible was adjusted to reflect those who had returned to school, were deceased, or whose data was uploaded by the PEA to the system in error.

FFY 2020 PSO Survey Responses by exit status are listed in the table below.

Exit Status	Percent Responded	Population	Difference
Dropped Out	11.13%	17.16%	-6.03
Graduated	88.82%	82.77%	+6.05
Reached Maximum Age	0.05%	0.08%	-0.03

FFY 2019 PSO Survey Responses by exit status are listed in the table below.

Exit Status	Percent Responded	Population	Difference
Dropped Out	15.11%	21.55%	-6.44
Graduated	84.68%	78.19%	+6.49
Reached Maximum Age	0.21%	0.26%	-0.05

In FFY 2019, there was an underrepresentation of responders who dropped out (difference of 6.44 percentage points). This gap decreased slightly when compared to the responders who dropped out in FFY 2020 (difference of 6.03 percentage points). Also, in FFY 2019, there was an overrepresentation of responders who graduated (difference of 6.49 percentage points). This gap decreased slightly when compared to the responders who graduated in FFY 2020 (difference of 6.05 percentage points).

FFY 2020 PSO Survey Responses by race and ethnicity are listed in the table below.

Race/Ethnicity	Percent Responded	Population	Difference
American Indian or Alaska Native	6.34%	6.08%	+0.26
Asian	0.99%	0.97%	+0.02
Black or African American	6.20%	6.82%	-0.62
Hispanic/Latino	44.95%	44.62%	+0.33
Native Hawaiian or Pacific Islander	0.18%	0.15%	+0.03
Two or More	4.34%	4.80%	-0.46
White	37.01%	36.56%	+0.45

FFY 2019 PSO Survey Responses by race and ethnicity are listed in the table below.

Race/Ethnicity	Percent Responded	Population	Difference
American Indian or Alaska Native	7.15%	6.95%	+0.20
Asian	0.98%	0.96%	+0.02
Black or African American	6.88%	6.97%	-0.09
Hispanic/Latino	43.02%	43.42%	-0.40
Native Hawaiian or Pacific Islander	0.20%	0.20%	-0.01
Two or More	3.74%	4.00%	-0.26
White	38.05%	37.51%	+0.54

In both FFY 2019 and FFY 2020, all ethnic and racial subgroups were represented within +/- 3% of the target population.

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)

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.

Respondents were representative of 2019–2020 target leavers based on gender, race/ethnicity, and category of disability; however, they were not representative of 2019–2020 targeted leavers based on the exit status. Students who graduated were overrepresented by 6.05 percentage points and youths who dropped out of school were underrepresented by 6.03 percentage points compared to the target leaver group. ADE/ESS will continue its efforts to increase response rates, especially among youths who drop out. PEAs are expected to utilize effective practices to successfully collect survey responses for all eligible former students. ADE/ESS identifies effective practices through PEA outreach, the provision of professional learning opportunities, and collaborative activities, such as statewide Focus Group meetings. ADE/ESS plans to continue disseminating strategies confirmed as effective practices for PEAs to increase response rate and representativeness, such as the early identification and reconnection with a former student who dropped out. A targeted outreach initiative is established at the end of each data collection season and utilized to identify PEAs that may benefit from enhanced technical assistance and support. PEAs utilizing this strategy have increased response rates for eligible former students who dropped out. Increasing the response rate of students who drop out will, in turn, address the overrepresentation of the response rate from youths who graduated. ADE/ESS will also continue to communicate with PEAs who successfully contact youths who dropped out to create a list of practices and strategies to share statewide during training opportunities. ADE/ESS also encourages targeted PEAs to connect regionally and across the state to identify new or enhanced strategies for reaching youths who dropped out.

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

The State uses +/- 3% as the metric to determine representativeness. According to the NTACTION Response Calculator, differences between the respondent group and the target leaver group of +/- 3% are important. Negative differences indicate an underrepresentation of the group, and positive differences indicate overrepresentation.

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

Provide additional information about this indicator (optional)

Data Source and Collection Methods:

During FFY 2020, 282 PEAs had leavers who met the criteria (youths with a current IEP who aged out, graduated, or dropped out) for participation in the PSO Survey. Of this number, 183 (65%) of PEAs that were required to participate in the PSO data collection had ten or fewer leavers while 8% of PEAs had 100 or more leavers. A total of 7,933 youths statewide were eligible to take the PSO Survey during the FFY 2020 data collection period. Of the 282 PEAs required to participate in the PSO Survey, 270 (96%) met the requirement. In addition, 171 (61%) of PEAs had a response rate of 80% or more from their targeted leavers. A detailed breakdown of the FFY 2020 statewide PSO results, including response rate/representativeness, is available on the ADE/ESS website: <https://www.azed.gov/specialeducation/transition/post-school-outcomes/>, under the list titled Results from the Survey.

For PEAs to communicate with students about the PSO survey, they gather contact information on student leavers so they can reach these leavers the following year. Schools either input the data into the online PSO data collection system or maintain student contact information locally for use the next year. The PSO data collection system uses a secure application as part of ADEConnect, a secure, single sign-on, identity management system. The application includes an auto-population of student demographic information and exit reason imported from the Arizona Educational Data Standards (AZEDS), a web-based system for reporting all student-level details to the ADE. PEAs designate school personnel to contact student leavers or designated family members (i.e., parents, grandparents, guardians, or state agency representatives), conduct phone interviews, and input survey data into the online PSO data collection system. Youths or family members were contacted between June 1 and September 30, 2021, after they were out of school for at least one year.

Missing Data:

Arizona's PSO response rate for FFY 2020 was 78.72% (7,933 youths eligible for contact and 6,245 respondents). Arizona's PSO response rate for the FFY 2020 is consistent with prior years. However, the FFY 2020 PSO Survey is missing data on 1,680 former students or 21.2% of the leavers, which is consistent with FFY 2019. Missing data for both FFY 2019 and FFY 2020 on targeted leavers have been on average 4.6% higher than for FFY 2018, which may indicate an impact of COVID-19 on the past two years of data collection. An analysis of FFY 2020 results indicated that the largest segments of missing data were the result of five factors:

- Schools were not able to contact leavers after three attempts (962 former students or 12.1%)
- Schools did not have correct contact information for leavers (461 former students or 5.8%)
- Schools did not collect contact information for leavers (46 former students or 0.6%)
- The respondents refused to participate (170 former students or 2.1%)
- The respondents did not complete the survey (49 former students of 0.6%)

COVID-19 Response:

ADE/ESS held Post School Outcomes Focus Group meetings to receive stakeholder input about using an optional COVID-19 question for the survey. This optional question received over 2,040 respondents for the FFY 2020 survey or 32.7% of all survey respondents. Of those responses, 783 reported COVID-19 had an impact on their ability to enroll in or complete a term in a school or job training program. Expanded comments reported many respondents faced difficulty with online learning or preferred to wait until in-person courses were offered for their program. Additionally, 739 responded that they experienced a barrier to obtaining or keeping employment. Many responses reported instances of mental and physical health-related needs that impacted overall postsecondary engagement. This optional survey question has allowed ADE to collect information about the impact of COVID-19 policies on former students' engagement in postsecondary education or training and employment during FFY 2019 and 2020 data collection seasons.

Baseline Revision:

ADE/ESS revised the baseline for indicators 14A, 14B, and 14C. The previous baselines, set in FFY 2018, have been updated to reflect the FFY 2020 measurements. COVID-19 has had a significant impact on post school outcomes. The rationalization for changing the baseline is to reflect realistic performance at the beginning of the COVID-19 pandemic and to appreciate the impact it has had upon our State. These changes in the baselines are supported by Arizona stakeholders.

14 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether the FFY 2020 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2019 SPP/APR

The State completed the required action.

14 - 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 2021 through 2025 for this indicator, and OSEP accepts those targets.

14 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

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 is 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	12
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	3

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

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

Historical Data

Baseline Year	Baseline Data
2005	57.90%

FFY	2015	2016	2017	2018	2019
Target >=	66.00%	67.00%	68.00% - 78.00%	68.00% - 78.00%	68.00%-78.00%
Data	59.09%	55.56%	50.00%	75.00%	42.86%

Targets

FFY	2020 (low)	2020 (high)	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	68.00%	78.00%	68.00%	78.00%	68.00%	78.00%	68.00%	78.00%	68.00%	78.00%	68.00%	78.00%

FFY 2020 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2019 Data	FFY 2020 Target (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
3	12	42.86%	68.00%	78.00%	25.00%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Use of the formal resolution session in Arizona is rare. Most parties waive the resolution session and opt to either settle privately or to utilize mediation. Only a small percentage of hearings go forward in Due Process cases, and in the vast majority of cases, the parties are able to resolve their dispute without a hearing, however the resolution session itself is not the mechanism that the parties are choosing to resolve the dispute.

After the school closures in the fourth quarter of SY 2019–2020, PEAs were allowed to locally determine how instruction would be provided in SY 2020–2021. This caused a landscape where many PEAs opted to provide virtual instruction for the entire year, others instituted a hybrid model of both online and in-person instruction, and several learning communities vacillated between instructional formats. While activities and data collection resumed with more regularity, and despite state legislative protections for students with disabilities to ensure in-person instruction based on individual student needs and safety during SY 2020–2021, there were still COVID-related issues that may have impacted the parties use of the resolution session (i.e., resolution session could only be held virtually).

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 is 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	28
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	11
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	12

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

NO

Targets: Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

Historical Data

Baseline Year	Baseline Data
2005	82.00%

FFY	2015	2016	2017	2018	2019
Target >=	76.00%	78.00%	74.00% - 84.00%	74.00% - 84.00%	74.00%-84.00%
Data	78.26%	57.50%	77.08%	81.82%	72.55%

Targets

FFY	2020 (low)	2020 (high)	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	74.00%	84.00%	74.00%	84.00%	74.00%	84.00%	74.00%	84.00%	74.00%	84.00%	74.00%	84.00%

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 (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
11	12	28	72.55%	74.00%	84.00%	82.14%	Met target	No Slippage

Provide additional information about this indicator (optional)

After the school closures in the fourth quarter of SY 2019–2020, PEAs were allowed to locally determine how instruction would be provided in SY 2020–2021. This caused a landscape where many PEAs opted to provide virtual instruction for the entire year, others instituted a hybrid model of both online and in-person instruction, and several learning communities vacillated between instructional formats. While activities and data collection resumed with more regularity, and despite state legislative protections for students with disabilities to ensure in-person instruction based on individual student needs and safety during SY 2020–2021, there were still COVID-related issues that may have contributed to an overall reduction of Due Process complaints filed, which in turn resulted in a reduction of mediation sessions held (i.e., parents and schools navigating the changing educational landscape together, prioritization of non-educational issues, etc.)

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)?

By FFY 2025, targeted Public Education Agencies (PEAs) will increase the performance of SSIP students with disabilities in grade 3 on the English Language Arts (ELA) state assessment from 9.58% to 12.23%.

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.

From the cohort of PEAs going into their monitoring year, a subset of that cohort enters self-assessment, as determined by the Risk Analysis tool and through the differentiated monitoring process. Subsequently, a subset of the PEAs participating in self-assessment monitoring activities are determined from having below average literacy outcomes on the most recent state testing data for entrance into the SSIP cohort.

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

YES

Please provide a description of the changes and updates to the theory of action.

The Theory of Action was revised to reflect the changes in the SSIP SiMR in moving from outcomes in grades 3-5 to grade 3 and comparing data for students with disabilities to students with disabilities in SSIP. The Theory of Action was also updated to include completing activities with fidelity, using data to inform decisions, accounting for feedback, and engaging in continuous collaboration as important elements of active SSIP participation toward positive student outcomes.

Please provide a link to the current theory of action.

<https://www.azed.gov/sites/default/files/2022/01/SSIP%20Logic%20Model%20and%20Theory%20of%20Action%20-%20FINAL.pdf>

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

NO

If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.

In addition to the change from collecting benchmark data to collecting screener data, the SEA-SSIP Team also aligned screener data submission dates with MOWR. Other changes to activity submission timelines also occurred in accordance with the new federal submission of February 1. This included the initial submission for both the Success Gaps Rubric (SGR) and Action Plan (AP) and the first EBP Diagnostic Tools, which the SEA-SSIP Team moved to late August and early October respectively. As a positive consequence, PEAs have more time in the school year to use data for analysis and growth and to pursue initiatives.

For example, in SY 2020–2021, there were 41 calendar days between the first and second submission period for the EBP, given a common PEA classroom. However, there was a notable variance of when PEAs submitted the EBP Tools due to issues largely related to COVID-19, as the SEA was informed by feedback. Analysis showed that when the submission dates between the first and second EBP Tools were less than 45 calendar days, the average growth was closer to 2 practices per classroom, while the average growth when at or exceeding 45 calendar days was closer to six practices per classroom. Therefore, when having to shift the activity timeline due to federal reporting, adjustments to the EBP timelines also made sure to allow for an extra two weeks between the first and second submission dates.

As a result of stakeholder feedback and analysis, changes in activity structure were made to shift some of the energy from documentation to implementation and toward PEAs completing activities with fidelity. Changes made in simplifying documentation included reformatting of the following tools to allow all submissions to live on one working document for the duration of participation in SSIP (3 years): the SGR and AP, the SGR and AP Fidelity Feedback Guide, and the Literacy Screener Reporting Form. For example, where PEAs would previously submit six SGR and AP documents through their three years in SSIP, PEAs now have one form that they can use to reference context, make cohesive goals, and visualize progress.

To improve PEAs completing the SGR and AP with fidelity, revisions were made to the way that PEAs considered evidence for Indicator self-assessment. In prior years, the field for evidence was placed after the fields for placement of self-assessment for level of implementation. In SY 2021–2022 and beyond, fields for evidence are placed prior to the consideration of self-evaluation and are outlined as specific questions that come from the practices within the Indicator level descriptions. In conjunction with improved guidance and resources, the rate of PEAs targeting Indicator practices in their evidence sections and within their Action Plan action steps has risen by 28% to 81% in Fall of SY 2021–2022, as compared to the previous year.

In concert, the SGR and AP Feedback Form was aligned to the new focus on fidelity to provide specific feedback to PEAs on the documentation of the activity in accordance with fidelity and was rebranded as the SGR and AP Fidelity Feedback Guide. Prior to engaging in the SGR and AP activity, ESS/PSM Specialists were trained on the use of the Feedback Form with inter-rater reliability in mind. Then one month prior to the activity submission date, PEAs were provided with both the Feedback Form and a support video that referenced how the Feedback Guide was being used in conjunction with completing the SGR and AP activity with fidelity. Upon receiving completed SGR and AP activities, ESS/PSM Specialists reviewed submissions and

completed Feedback Forms together to further improve feedback reliability, before sending SGR and AP Fidelity Feedback Forms to PEAs for their consideration and subsequent conversation upon request. PEAs received specific feedback pertaining to aspects of fidelity, such as the explicit consideration of indicator evidence prior to the evaluation of current implementation level and the incidence of targeting the indicators with the lowest levels of implementation for Action Plan initiatives. By improving the process for understanding and completing the SGR and AP with fidelity, there is also an improved connection between engaging in the activity, resulting in positive student outcomes.

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2020	9.58%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target>= =	9.58%	10.11%	10.64%	11.17%	11.70%	12.23%

FFY 2020 SPP/APR Data

The number of grade 3 students with disabilities within SSIP cohort PEAs, receiving a score of Proficient or Highly Proficient, on the ELA component of the state assessment.	The number of grade 3 students with disabilities within SSIP cohort PEAs, receiving a score of Minimally proficient, Partially Proficient, Proficient, or Highly Proficient, on the ELA component of the state assessment.	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
66	689		9.58%	9.58%	N/A	N/A

Provide the data source for the FFY 2020 data.

Data Source: State ELA assessment data for SWD in grade 3 from the Arizona Assessment Data Warehouse

Clarification: The absence of FFY 2019 data is due to a cancellation of state testing administration in that year due to COVID-19.

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

From a list of all grade 3 students with disabilities (SWD) that have a score on the state ELA assessment in the Assessment Data Warehouse, the data of students who are associated with a District of Residence Identification (DOR ID) corresponding with PEAs in years 1–3 of SSIP is disaggregated and compiled. Within the compiled list of students in years 1–3 of SSIP, the number of students testing as proficient are added to the students testing as highly proficient, and the resulting number is divided into the total number of SWD receiving any score on the ELA state assessment to calculate the proficiency for SSIP.

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

NO

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

NO

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

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.

Before students began the fourth quarter of SY 2019–2020, Arizona issued mandatory school closures statewide for the duration of the school year due to COVID-19. Because several SSIP activity submissions and the state assessment window fell within this period of closure, the SEA-SSIP Team not only has the issue of data being incomplete during this period of time but also the issue of being unable to use this data to reliably track progress and make subsequent progress decisions based on the data for this period.

After the school closures in the fourth quarter of SY 2019–2020, PEAs were allowed to locally determine how instruction would be provided in SY 2020–2021. This caused a landscape where many PEAs opted to provide virtual instruction for the entire year, others instituted a hybrid model of both online and in-person instruction, and several learning communities vacillated between instructional formats. While activities and data collection resumed with more regularity, and despite state legislative protections for students with disabilities to ensure in-person instruction based on individual student needs and safety during SY 2020–2021, there were still COVID-related issues that made it difficult to ensure data reliability. The state was able to mitigate factors against data reliability through such methods as ensuring improved communication with PEAs and accounting for the factors that affect reliability. For example, accounting for whether instructional observations or benchmark assessments were held in hybrid or online environments was taken into consideration when analyzing activity outcomes and when monitoring progress. The SEA-SSIP Team further improved progress monitoring data reliability from the alignment with MOWR and transitioning from collecting literacy benchmark to literacy screener data.

The results of statewide testing in literacy show significant learning loss for students statewide. The proficiency for all Arizona students in grade 3 decreased by about 11% between FFY 2018 and FFY 2020, and, comparatively, only decreased by 3.49% for grade 3 students with disabilities in Arizona that were not in an SSIP cohort. For grade 3 students with disabilities in SSIP PEAs in this timespan however, there was an increase of 1.3%. As COVID-19 has not only been a variable in past data progression, it will also continue to be an unpredictable variable going forward. This will undoubtedly cause challenges to data reliability that will have to be closely monitored going forward.

Section B: Implementation, Analysis and Evaluation

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

<https://www.azed.gov/sites/default/files/2022/01/SSIP%20Evaluation%20Plan%20-%20FINAL.pdf>

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.

From the evolution of the SSIP, and according to the guidance for Evaluation Plan language provided by the IDC at the November SSIP Data Quality Peer Group Meeting, there were revisions made to contents and language of the Evaluation Plan. In the first column of the table, while many of the priorities remain as interwoven practices, SSIP priorities have shifted. This is both due to the natural evolution of continuous improvement and in accordance with ongoing guidance at the federal level from such partners as the IDEA Data Center. Some of the new priorities that guide the Evaluation Plan include the focus on evidence-based practices, alignment and collaboration, and collecting stakeholder feedback. Subsequently, the following column for evaluation questions has been revised accordingly and has become more precise as data offers the opportunity to become more precise. SSIP partnerships have been fortified over time, and the data sources have changed according to how SSIP activities have been modified, and timelines have changed in response to data analysis, feedback, and alignment with partnerships and due to the revised timeline for federal reporting.

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

As continuous improvement is necessary for growth and development, the evaluation plan needed to be revised accordingly. Additionally, the evaluation process overall had to be adjusted due to the federal reporting timeline. These revisions were then made in conjunction with the guidance provided by federal reporting partnerships as described above.

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

While shifting the submission dates for most activities in SSIP during SY 2021–2022 was primarily driven by the escalation of timeline for federal reporting, this shift also aligned with feedback from survey and analysis. Regarding survey feedback, for example, several Year 1 PEAs expressed the difficulty of answering survey questions pertaining to initiative progress when having less than two months between the submission of the Action Plan and the Survey. Consequently, moving the fall submission of the SGR and AP in SY 2021–2022 to August 27 is not only conducive to federal reporting but also allows for an additional month of initiative progress before providing survey feedback. This shift is especially important for this school year, as the initial data from the Fall SGR shows the average level of implementation for Indicators between the Partially Implemented and Implemented range, down 40% from SY 2020–2021, to begin SY 2021–2022. In addition, rather than an open-ended narrative, fields were created that ask the user to answer questions about the specific Indicator practices and that are embedded within the language of moving to higher levels of implementation in the self-assessment. This shift in the structure of the document guides the PEA-SSIP Team to consider the specific Indicator practices that are contingent on moving up levels of implementation prior to considering the self-assessment rather than considering the self-assessment more broadly and then substantiating the broader assessment with general evidence, often then going on to overlook the specific Indicator practices in the action initiatives. Then as the companion piece in SY 2021–2022, the Fidelity Feedback Guide was created to provide feedback that was clearly defined, qualitative, and aligned with the fidelity revisions in the SGR.

Over the past two years, revision of processes for providing feedback for the completion of the SGR and AP submission have been evolving. At the beginning of SY 2020–2021, revisions focused on changes that made criteria for completion with fidelity less subjective. After the SY 2020–2021 submissions however, despite PEAs completing the activity with significant growth in completion with fidelity as compared to the year prior, it was apparent that not only did the process of providing feedback need further revising to continue improving fidelity of activity completion, but the SGR itself had to undergo revisions to guide fidelity. As a result, the evidence section that was originally provided in narrative form, was moved prior to the self-assessment in SY 2021–2022. In addition, rather than an open-ended narrative, fields were created that ask the user to answer questions about the specific Indicator practices and that are embedded within the language of moving to higher levels of implementation in the self-assessment. This shift in the structure of the document guides the PEA-SSIP Team to consider the specific Indicator practices that are contingent on moving up levels of implementation prior to considering the self-assessment rather than considering the self-assessment more broadly and then substantiating the broader assessment with general evidence, often then going on to overlook the specific Indicator practices in the action initiatives. Then as the companion piece in SY 2021–2022, the Fidelity Feedback Guide was created to provide feedback that was clearly defined, qualitative, and aligned with the fidelity revisions in the SGR.

As previously described, alignment with MOWR has also led to improvements in infrastructure. The shift in focus toward more foundational literacy outcomes comes with the structural shift of collecting both classroom observation and literacy screener data in the primary rather than intermediate elementary grade levels. This will also result in more reliable data collection, as PEAs will be mandated to submit MOWR data from an approved list of screeners beginning in SY 2022–2023. Only screeners that were able to meet criteria based on research support, sub-measure requirements, and the ability to identify characteristics consistent with dyslexia were able to make the list of approved screeners for administration and reporting. In addition, alignment has improved structure for collaboration, both between different agency partnerships within the SEA and between special and general education at the PEA. This reliability in data collection and structure for enhanced collaboration will then result in a refined system for continuous SSIP process improvements.

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.

After moving the SGR and AP timeline to earlier in the year, although several PEAs reported time constraint issues on the SSIP survey the year prior, there were no respondents reporting the same issue after providing an additional month between the SGR and AP and the SSIP Survey in SY 2021–2022. In addition to aligning with the SSIP Evaluation Plan regarding the consideration of stakeholder feedback, this shift in timeline provided for the outcomes of effective evidence-based practices and data reliability. More than ever before, PEAs will have time to implement growth and development initiatives during the school year, and students will have more time to benefit from the implementation of these practices. With an additional three months to implement initiatives between the fall and spring submissions, that extra time can allow for students to receive the benefit of those improved evidence-based practices during the school year, which in turn should have a positive effect on student outcomes.

After adding two weeks between the first and second EBP Walkthrough Tool submissions, there were, on average, five additional EBPs between these submissions in SY 2021–2022. While this maintained the positive difference between submissions 45 or more days between walkthroughs, it also represented less overall growth than the year prior by one EBP on average. Looking within the quadrants of like-practices on the EBP Tool, while practices in the categories of Inclusive Learning Environment, Instructional Practices, and Student Engagement either remained stable or showed growth between the first and second submission, the average practices in the category of Student Interactions fell by 44.96%. The category of Student Interactions includes such practice subcategories as providing for diverse learning modalities, learning styles, expression, and collaboration. As part of the SSIP Evaluation Plan monitoring EBP growth, this will be the target of continuing improvement as outlined in the section for next steps.

After providing enhanced support, the outcome of completing the SGR and AP with increased fidelity for data reliability, in connection to the SSIP Evaluation Plan, continues to show improvement. For example, to complete the SGR and AP with fidelity, the PEA-SSIP Team should be targeting specific Indicator practices in both the evidence section and within the associated initiatives. In the fall submission of SY 2019–2020, PEAs targeted these Indicator practices in 43% of the possible instances. While improved guidance elevated this level by 10% at the fall SY 2020–2021 submission, this still only resulted in targeting practices that are necessary for higher levels of implementation at just over half of the possible instances. Subsequently, improved support that includes a restructuring of format, improved guidance and tutorials, and the use of the SGR and AP Fidelity Feedback Guide in SY 2021–2022, resulted in the fidelity of targeting Indicator practices rising by 28% to 81%. In turn, and with the addition of improved guidance, the instance of PEAs targeting the lowest Indicators from their Rubric for Action Plan initiatives rose an additional 12% to 83% in fall of SY 2021–2022. By targeting these and other areas for improved fidelity, and according to the Fidelity Feedback Guide, the average overall fidelity of activity completion for the SGR and AP was 76%.

After aligning with MOWR, a stronger impetus for collecting literacy data, improved data reliability with consistency between assessments and subtests, and context for growth toward the SiMR have provided for improved outcomes in accordance with the SSIP Evaluation Plan. As MOWR has a state mandate for reporting literacy screener data, and by aligning the dates for data submission, this not only provides the PEA with the opportunity for collaboration, but it also has provided for consistent submission and timeline between measures. For example, 77% of PEAs submitted complete literacy benchmark data for the first submission of SY 2020–2021. For the first submission of SY 2021–2022, however, 97% of PEAs have submitted complete literacy screener data. In SY 2020–2021, while most PEAs reported the administration of their fall literacy benchmark assessment in August and September, there were several PEAs that reported administration into the month of October. In SY 2021–2022 however, with the mandate to report literacy screener data to MOWR by October 1, the first assessment administration only goes beyond September for one of 34 PEAs. In SY 2020–2021, there was no consistency in the tools being used and reported for literacy benchmark data. In the first submission of SY 2021–2022, however, only eight different screening tools comprised 91% of all screening tools reported. The shift from benchmark to screener data has led to the outcome of more reliable data.

The alignment of submission timelines with MOWR supports collaboration between special and general education at PEAs for literacy screener data collection, analysis, and subsequently toward continuous improvement initiatives. This alignment will assist in sustainability over time at the PEA level and aid in increased collaboration, at the PEA level, for SSIP related activities. From the SY 2021–2022 SSIP Survey, just as many respondents indicated an occasional level of collaboration between special and general education involving SSIP activities as reported engagement in frequent to continuous levels of collaboration. Subsequently, in an effort to collect further information and illuminate a pathway for improving support, special education directors from around the state were asked to characterize the frequency of some specific areas of collaboration within their learning community at the January Director's Feedback session. On that survey, 90% of respondents characterized collaboration on "Planning Instruction" as between "Occasional" and "Non-Existent." In addition, 80% of respondents characterized collaboration on "Setting Student Goals" and "Planning School Programs" as between "Occasional" and "Non-Existent." This data seems to indicate that not only does alignment with MOWR provide the opportunity for greater collaboration, but this continues to be an area of need for PEAs, and the SEA-SSIP Team now has a good idea where to infuse that collaborative support. In accordance with the SSIP Evaluation Plan and toward the outcome of improved collaboration at the PEA-level, this will be a direction for growth in SSIP moving forward, and this data will be used as a baseline for tracking progress.

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

YES

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

The most dynamic new infrastructure improvement is SiMR alignment with MOWR, which is a part of K-12 Academic Standards at the SEA. In addition to the resulting shift from collecting benchmark data to the more reliable screener data as mentioned in ongoing improvements, comparisons can now be made between SSIP and statewide screener data for students in SSIP PEAs. While there has been extensive research to indicate a growing divide between students with and without challenges to literacy development in elementary school, alignment with MOWR has allowed for reliable data to show how this applies to SSIP targeted students with disabilities in Arizona. In reference to scoring benchmark on literacy screeners, the subgroup of students with disabilities in SSIP are behind the aggregate by an average of 7.5% in grade 1, 15.5% in grade 2, and 24.8% by grade 3. The new alignment has also resulted in the ability to make connections between initiatives. As a part of the legislative initiative, PEAs must submit and update literacy plans to MOWR in our state database three times each year. SSIP and MOWR are beginning to look at similarities and differences between these literacy plans and SSIP Action Plans, in order to highlight opportunities for aligning these initiatives and making connections to professional development opportunities that may address both.

Another new infrastructure improvement is in changing all activity forms that are used throughout all three years in SSIP to three-year activity forms. Prior to this improvement, new forms would be completed for each submission. This was the case when PEAs completed the SGR and AP in the fall and spring, and for the literacy benchmark data forms in the fall, winter, and spring each year. This was also the case for the SEA completing the Feedback Form each time the SGR and AP was submitted. While this would result in 22 forms being completed through the three-year process for each PEA, the new structure allows for one form to be completed for each of these activities during the three-year process, for a total of three forms. Rather than completing a new form at each submission, each form has a new structure that allows for updates to be added during SSIP development. It is easier to keep track of documentation, to reference within forms rather than between them for the context that prior submissions provide, to see growth and development, and, in the case of the Action Plan, having continuous information on a single form allows the PEA to progress through initiatives with more continuity. As a result, this streamlining of SSIP forms shifts the time and energy that PEAs spend on activities, from documentation to implementation, resulting in an increased capacity to pursue initiatives.

Prior to SY 2021–2022, the structure of data analysis remained isolated by activity and by year. At the beginning of SY 2021–2022 however, all structures were transferred to spreadsheets that allow for historical data, ongoing data, and different activities that share a relationship. For example, the analysis spreadsheet for the SGR now goes back to when Cohort 3 began SSIP in SY 2019–2020, will continue to incorporate future data, and includes Fidelity Feedback Guide data and both Action Plans and Literacy Plans from MOWR. The EBP data analysis structure includes the beginning of SY 2020–2021, when the current collection structure was put in place, will continue to incorporate new data, and contains notations from the EBP Survey. Although the Literacy Screener data analysis spreadsheet begins this year at its inception, it will always include historical data, and contains MOWR literacy screener data for General Education and state testing data for both general and special education. This new data analysis structure will allow for the determination of outcomes, trends, growth, correlation, and targets. By looking at the data with the broadest perspective and specific detail, it will also allow for making data-driven decisions with the highest degree of accuracy, development, and outcomes.

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

While the initial revisions to the SGR and AP submission timeline appear appropriate to provide for student outcomes, based on the extent to which PEAs are now able to implement initiatives during the year and according to stakeholder feedback, the SEA-SSIP Team will monitor the feedback and effectiveness going forward. As SSIP expands analyzing the relationship between MOWR literacy plans and SSIP Action Plans, particularly in regard to addressing the aligned initiatives, there will be particular attention paid to the appropriateness of this revised submission timeline.

Expanding the time between EBP Walkthrough Tool submissions in response to data analysis did maintain growth in practices but was also expected to result in growth that exceeded the prior year. While adding two weeks between submissions did result in half of the PEAs with 45 or more days between submission dates, there were still 20% of PEAs that submitted Tools with under 45 days between submissions. When again disaggregated, the growth of EBPs with less than 45 days between measures was significantly less than those with 45 or more days between measures in SY 2021–2022. Analysis seems to suggest that adding at least an additional week between submissions to account for PEA scheduling would go further toward improving overall growth in classroom practices. In addition, SSIP plans to include specific guidance about the data and process during the 45-day period.

As SSIP experiences the benefits of aligning with MOWR, especially regarding collaboration on literacy initiatives and data, the SEA-SSIP Team will continue to strengthen this relationship and explore opportunities to align with other interagency and intra-agency groups for the benefit of development and outcomes. For example, alignment with the SEA's School Support and Improvement division may be advantageous, given that they also use a system of self-analysis and initiatives promoting evidence-based practices for the benefit of student populations that are exhibiting below average outcomes. With respect to improving collaboration within PEAs, the SEA-SSIP Team will focus on guidance and modeling. After being identified for participation in SSIP, PEAs will receive a short presentation at setup meetings that emphasize opportunities for collaboration through each SSIP activity with a growing body of data to show how collaboration supports activity and student outcomes. Directions within activities and discourse with PEAs will reinforce the positive messaging toward collaboration. Then, as PEAs progress throughout each year, they will see evidence of SSIP and MOWR collaborating on literacy screener submissions, in finding alignment between MOWR literacy plans and SSIP Action Plans, and in making connections to professional development opportunities that meet common needs.

In relationship to the new infrastructure improvement of MOWR alignment, the resulting shift in collecting literacy screener data as opposed to benchmark data will allow the SEA-SSIP Team to make appropriate data-driven decisions toward leveraging growth and development. Literacy screener data has revealed a proficiency deficit of 7.6% in Grade 1, 14.7% in Grade 2, and 23.1% in Grade 3. This newly-available data provides a more comprehensive picture of the growing deficit between special and general education outcomes, allowing for reliable targets and plans for reducing this deficit yearly. Beyond sharing this data with the possibility of initiating a response from collaborative partnerships, the SEA-SSIP Team will also put more emphasis on PEAs conducting EBP Walkthroughs at the primary grades and earlier in this growing divide.

Regarding the revisions to both the SGR and AP and Feedback structures that have resulted in improved fidelity, there are still components that can be targeted toward improving the overall planning of the activity with fidelity. Moving up Levels of Implementation for several Indicators in the SGR and AP depend on the PEA implementing an evidence-based practice in their learning community with fidelity. As implementing practices with fidelity was often overlooked in past narrative Evidence sections by PEA-SSIP Teams, the SEA-SSIP Team created specific Evidence sections to explicitly target indicator language, including prompts to respond particularly to the fidelity of practices. Then, this targeting of fidelity in documentation would result in a higher incidence of targeting practice fidelity within subsequent initiatives. While revisions have resulted in PEAs completing the SGR and AP with improved fidelity overall, the specific area of PEAs providing evidence and targeting initiatives involving the fidelity of implementing practices has room for continued improvement. For example, PEAs outline Action Plan steps that account for fidelity in practices, such as reviewing lesson plans or conducting classroom observations, 69% of the time. Going forward, the SEA-SSIP Team will provide targeted guidance and support to PEAs in Action Plans that lead more consistently to higher levels of implementation. This will provide for improved activity outcomes and improved student outcomes as a consequence.

The new structure of providing three-year activity forms to PEAs has been well-received by the stakeholders involved in activity completion, despite an issue that arose from the transition. Creating the new activity format with the most current version of Microsoft Office caused some information to shift on the page when PEAs used Google Docs and even prior versions of Office to complete the SGR and AP. While this issue was mitigated by simplifying the format to work with both programs mentioned, the SEA-SSIP Team can further improve its positive effect of working efficiently within capacity constraints. Replicating the forms in a web portal would not only eliminate the shifting issue but would also allow for a more efficient transfer of information between the three-year activity forms and the new format of comprehensive data-analysis spreadsheets. If the opportunity to use a web portal for activity completion is not available for SY 2022–2023 however, the SEA-SSIP Team can still make minor alterations to allow for more efficient transfer while also making sure not to reinitiate the shifting issue.

Then the SEA-SSIP Team can use the new analysis spreadsheet format to incorporate even more data sources for comparison and toward making developmental connections. For example, not just the literacy screener but all of the analysis spreadsheets should incorporate literacy outcome data for SWD in SSIP PEAs, SWD not in SSIP, General Education in SSIP, and General Education not in SSIP. The EBP Diagnostic Tool data should also include screener data, and the spreadsheet for literacy screener data should also include data for MOWR literacy plans and SSIP Action Plans. By including related data sets together, the SEA-SSIP Team will be able to make more comprehensive and reliable connections and to use those connections toward further improvements and outcomes.

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

- The Success Gaps Rubric: https://www.azed.gov/sites/default/files/2021/07/3-%20SGR%20and%20AP%20%20-%20FINAL%21_.docx
- Indicator Group 1: Data-Based Decision Making
- Decisions about curriculum, instructional programs, academic/behavioral supports, and school improvement are based on data.
- Indicator Group 2: Cultural Responsiveness
- Culturally responsive instructional interventions and teaching strategies are used throughout the school or district.

- Indicator Group 3: Well-Articulated Curriculum
- A consistent, well-articulated curriculum is in place and is implemented with fidelity.
- Indicator Group 4: Universal Screening and Progress Monitoring
- Universal screening is used to identify needs for early intervention or targeted supports.
- Indicator Group 5: Interventions and Supports
- Evidence-based behavioral interventions and supports are multi-tiered and implemented with fidelity.

-The EBP Diagnostic Walkthrough Tool: <https://www.azed.gov/sites/default/files/2021/07/6-%20EBP%20Diagnostic%20Tool%20-%20SSIP%20SY21-22.docx>

- Quadrant 1: Inclusive Learning Environment
- Classrooms exhibit an inclusive learning environment that is student-centered and engaging.
- Quadrant 2: Instructional Practices
- Classroom instruction is evidence-based, engaging, and responsive.
- Quadrant 3: Student Interactions
- Student interactions are collaborative and support learning objectives.
- Quadrant 4: Student Engagement
- Students are engaged in meaningful activities that support learning objectives.

Provide a summary of each evidence-based practices.

Indicator Group 1 of the SGR focuses on data-based decision making. This includes making decisions about the school curriculum, instructional programs, academic and behavior supports, and school improvement initiatives, based on data. It also includes the use of screener and benchmark assessments, making decisions with subgroups in mind, and evidence of use from the administrative to classroom levels for the benefit of student outcomes.

Indicator Group 2 of the SGR focuses on cultural responsiveness. This includes celebrating diversity with professional development and during gatherings and with supporting linguistic accessibility diversity with families in all correspondence and interactions.

Indicator Group 3 of the SGR focuses on implementing a well-articulated curriculum. This includes ensuring both horizontal and vertical alignment, flexible grouping, instructional technology, differentiated instruction with accommodations and modifications, providing for student learning styles and interests, instructional collaboration, professional development of curriculum and practices, implementation with fidelity, and informing families about the core curriculum and how it is differentiated for their student.

Indicator Group 4 of the SGR focuses on the incorporation of tools for universal screening and progress monitoring. This includes the use of universal screeners and progress monitoring tools for both academics and behavior, the use of benchmark assessments, and informing families about results.

Indicator Group 5 of the SGR focuses on practices involving interventions and supports. This includes a proactive and restorative district-level discipline policy that is implemented responsively and with fidelity. It includes employing a multi-tiered system of supports for both academics and behaviors, guidance by screeners and diagnostic tools, and interventions that are continually monitored for progress by teachers who are trained to use resources and operate with cultural sensitivity and fidelity within this system of supports. It also includes continually informing families about how their student fits within this system of supports.

Quadrant 1 of the EBP Tool focuses on classroom practices involving an inclusive learning environment. These include the display of measurable learning outcomes, classroom expectations, and word/sound walls that students can use toward learning goals, a classroom library that provides for choices and reading accessibility, the use of manipulatives for connections to abstract concepts and relevance, and effective transitions between activities.

Quadrant 2 of the EBP Tool focuses on instructional classroom practices. These practices include "I Do" practices involving frontloading, adequate response wait times, and explicit-systematic explanations that incorporate a variety of learning modalities and fosters engagement. It includes "We Do" practices that involve scaffolding, provides immediate and specific feedback, informal formative assessment that is responsive prior to independent practice, and a variety of problem-solving methods. It involves "You Do" practices for independent practice that are responsive and include coaching, monitoring, and time for mastery. It also includes lesson closure that reviews learning targets and learning assessment.

Quadrant 3 of the EBP Tool focuses on student interaction in the classroom. This includes students engaging in a variety of collaborative learning expressions, text activities, goal setting and planning, and higher order learning modalities. It also includes the ability for students to make choices and present learning in a variety of ways.

Quadrant 4 of the EBP Tool focuses on student engagement in the classroom. This includes students involved in activities with real-world relevance that are targeted to the zone of proximal development, are considerate of strength and needs, involve self-regulation, and allow for a high degree of student-lead communication. Quadrant 4 also includes differentiated activities with accommodations and modifications to content and process.

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.

Focusing on data-based decision making allows PEAs to appropriately meet the needs of their learning community. This is not only done with data for general education but also for subgroups such as English language learners and special education students. It is only by the juxtaposition of both the aggregated and disaggregated data that administrators and teachers can make the most appropriate decisions, from curriculum to intervention and from the masses to the individual. Comprehensively and specifically using data to inform decisions is a foundational piece for providing outcomes.

Focusing on cultural responsiveness allows PEAs to appropriately meet the needs of their learning community. As an individual's outcomes are a product of their learning, learning is a product of experiences, and culture is a key component of a student's experiences. It is important to respect the cultural similarities and differences of all members in the learning community. The cultural diversity within and amongst people is a key component of how they have learned and of how they will continue to learn. Respecting this diversity allows students and stakeholders to feel appreciated, to buy in to the learning community, and to be motivated to learn within it. It can also be used as a filter to understand perspective, which is the window to understanding what an individual needs to learn and develop. Beyond the inherent nature of how important language is toward accessing learning, culture is also an important part. As it is particularly important to understand the learning needs for a student with disabilities, it is particularly important to understand that individual's perspective and learning components, including how culture has guided and continues to guide the process of learning.

Focusing on implementing a well-articulated curriculum, allows PEAs to appropriately meet the needs of their learning community. When the learning community develops a curriculum that accounts for the variety of learning components and equips the curriculum with tools that meet the variety of ways in which students learn, teachers can flexibly use that comprehensive framework to deliver that instruction with evidence-based practices to meet the needs of learners in general and as individuals. The tools for differentiating the curriculum are particularly important for students with disabilities to provide access to the curriculum.

Focusing on the incorporation of universal screening and progress monitoring allows PEAs to appropriately meet the needs of their learning communities. By screening at several points through the year, members of the learning community have reliable data for growth and the development of foundational learning skills. The resulting data can then be used for comparison to prior learning and other groups/subgroups for the development of learning targets and toward the categorization and initial application of learning groups. Then after diagnostic and refinement where needed, the learning plan and progress can be monitored to make adjustments that provide for developmental precision and the highest potential for positive outcomes. This includes screening and monitoring for behavioral development as a factor for learning access and their resulting outcomes.

Focusing on interventions and supports allows PEAs to appropriately meet the needs of their learning community. After reliable data is used to determine the needs of a student, it is vitally important for the progression of learning to meet the more specific and involved needs with a structure and learning plan to meet those needs. While this may mean that a zone for optimal learning can be found within a small group structure, it may also mean that the zone for optimal learning can only be met through the application of an individualized learning structure and plan. Meeting student needs includes having interventions and supports for behavioral development as a factor for learning access and their resulting outcomes.

Focusing on having an inclusive classroom learning environment allows teachers to appropriately meet the needs of the students in their classrooms. Much like the dynamic of respecting cultural diversity, having an inclusive learning environment provides students the ability to feel appreciated, to buy in to the learning community, and to be motivated to learn within it. As well, it can provide a support structure that offers learning accessibility and paves the way for improved outcomes.

Focusing on instructional classroom practices especially allows teachers to appropriately meet the needs of the students in their classroom. At the center of pedagogy, effective instructional practices include an intimate knowledge of subject matter, learning tools, and of students from the individual members of the group, to the dynamics of the group itself. Further, effective instructional practices involve a nuanced plan to meet these needs and a skillful implementation of scaffolding that also requires constant monitoring of feedback and adjustment throughout the process toward skill independence. Particular attention has to be paid to this arena of practices because of how multi-faceted, interconnected, and critical these practices are for positive student outcomes.

Focusing on student interactions allows teachers to appropriately meet the needs of the students in their classrooms. When students experience a variety of ways to interact with the learning process, content, materials, and with others, they can make cognitive connections and experience development to a greater degree. They also have more opportunity to make choices, to take ownership of their learning, and to experience drive toward positive outcomes.

Focusing on student engagement allows teachers to appropriately meet the needs of the students in their classroom. In connection with interactions, engagement also includes the identification of strengths and needs, and the skillful use of differentiation to meet those needs. Targeting these individual facets of learning will provide for the positive outcome of individuals.

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

The completion of SSIP activities with fidelity begins with making sure that activity forms provide the proper format and guidance. Toward improvements in SY 2021–2022, PEA and stakeholder feedback and data analysis were reviewed, and restructure of the activity forms was made accordingly. Feedback was especially helpful in making form directions that took past questions and issues into consideration. In the SGR, both feedback and analysis were used to make the specific prompts for the Evidence sections and moving them in front of the self-assessment. In the AP, this meant making the field prompts with more explicit guidance for PEA-SSIP Teams to make the connection toward using the lowest levels of implementation from the SGR for their action initiatives. It also meant making the forms as easy to use as possible, knowing that cumbersome activity documentation can lead to a feeling of completing the form with irreverence. Toward this end, drop-down options, check boxes, and navigation hyperlinks were embedded wherever possible.

Fidelity assurance extends to ensuring activity support resources are available to PEAs. For example, the EBP Diagnostic Walkthrough Process has three tiers of understanding for evidence-based practices to aid PEA-SSIP Team members in coming to a common understanding of practices prior to conducting walkthroughs. The first tier is the EBP Diagnostic Tool itself, as it contains not only a list of practices but also brief summaries of the practices for each Indicator. The second tier can be found within the EBP Tool and Process Presentation, and the third tier is an Examples and Non-Examples document. Created with differentiation in mind, these flexible documents are used with question and navigation prompts in mind during presentation to PEA-SSIP Teams by the SEA, and also give the ability to PEAs to use the question and navigation prompts during internal use. After the background information in the EBP Presentation, rather than scrolling through each practice description, the user can click on specific Indicators that the PEA-SSIP Team wants to explore with more depth. After a video narrative that explains the practices and their relationship to learning, hyperlinks are available to go back to that quadrant or to the next for review. Using the same system of navigation, which allows the user to differentiate for his or herself, the Examples and Non-Examples document goes through specific classroom scenarios where each practice might be observed, and through adjacent examples that would not serve as evidence of the practice.

The next step toward fidelity is with the timing, availability, and presentation of the SSIP activities. As PEA-SSIP Team members are busy doing their other responsibilities at the PEA, to conduct activities with fidelity they need to have the necessary information with a sufficient degree of explanation and advanced notice and to be given courtesy reminders when necessary. At the SEA, this means making yearly revisions to the SSIP Tracking Sheets for PEAs and to the Internal Specialist Checklist for SEA Specialists so that each document has an overview of submission responsibilities to be used as a guide throughout the school year. SEA Specialists then email activity submission prompts at least one month in advance to prompt the activity initiation, describing the activity, and to either attach resources or provide links to the resources that are always available on the SSIP Website. They also provide a reminder email to PEAs at the beginning of the week that the activity submission is due, when applicable.

In addition, PEAs are offered a presentation meeting one month prior to both the SGR and AP and the EBP Diagnostic Tool activities. Prior to COVID-19, SEA onsite support was offered to PEAs, aiding in activity completion with fidelity. Since the third quarter of SY 2019–2020, only remote presentations have been made available to support PEAs. When again available to provide onsite support, the SEA will be able to use remote presentation as a tool to provide support where onsite opportunities are prohibitive due to capacity, thereby expanding capacity to provide support and fidelity of activity completion overall. While local control does not allow for the mandate of presentations, those that accept the invitation have consistently provided the feedback that they have a greater understanding and feel more comfortable completing the activity with fidelity. Specialists

make sure that PEAs always have an open channel to feel comfortable asking questions and providing feedback throughout the activity completion and beyond with timely response.

After completing the activity, points of fidelity are tracked on an analysis spreadsheet. The analysis includes a comparison to other cohorts, to all SSIP PEAs, and to former fidelity for trend analysis and for improving future fidelity. The Indicators with the most improved fidelity on the SGR are with addressing horizontal/vertical alignment and flexible grouping in Indicator 3a and instructional technology in Indicator 3b. Both fidelity indicators showed that 90% or more of PEAs addressed these evidence-based practices within the SGR and/or AP. This is substantially up from previous years, where there were never half of the PEAs addressing these practices in the past, despite it being core to the Indicator descriptions, to moving up levels of implementation, and as being targeted for action initiative more than most other Indicators. It is also a positive trend that of the three cohorts currently in SSIP, the two that have entered during this period of improved emphasis on fidelity have fidelity percentages of addressing evidence-based practices in their SGR and/or AP at 79.97% on average, above the remaining cohort that entered SSIP prior to this improved emphasis on fidelity. By improving the fidelity of PEAs addressing the evidence-based practices within the activity, PEA learning communities will target the practices for growth more consistently, which will result in positive activity and student outcomes.

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.

As the SEA has not had the opportunity to visit PEAs and collect data on implementation fidelity during this time of COVID-19 and coincidental correspondence of emphasis on fidelity, the SSIP and EBP Surveys have demonstrated indications of both activity fidelity and the effectiveness of evidence-based practices. For example, all PEA-SSIP Teams responded that they meet at least quarterly to discuss the progress of their SSIP activities, with over half meeting either weekly or monthly. Pertaining to the SGR and AP, 84% report having challenges to action initiatives that can be overcome and lead to positive outcomes, and 96% report that their SSIP action initiatives provide at least some positive effect, up to being highly effective. Pertaining to the EBP Walkthrough Process, two-thirds of the PEAs in Year 2 reported using the resources that support fidelity of implementation, no PEAs reported the process as being a substantial challenge to implement properly, and all PEAs reported positive activity outcomes that included improved collaboration and classroom instruction.

Between the SY 2019–2020 fall submission and SY 2020–2021 spring submission, the evidence-based practices for data-based decision making had the lowest growth of any Indicator group, showing PEA growth averaging 38% of a full level of implementation during that time. The SY 2021–2022 fall submission, however, showed a decline of 14% as compared to the prior submission, now only netting 24% growth since the beginning of SY 2019–20.

Between the SY 2019–2020 fall submission and the SY 2020–2021 spring submission, the evidence-based practices for cultural responsiveness had a growth of 48% toward an additional full level of implementation during that time. Not only is this below average growth as compared to the overall average growth, but the SY 2021–2022 fall submission declined by 45%, only netting 3% growth since the beginning of SY 2019–2020.

Between the SY 2019–2020 fall submission and SY 2020–2021 spring submission, the evidence-based practices for a well-articulated curriculum had an average growth of one full level of implementation, and 39% toward an additional full level of implementation, during that time period. While the SY 2021–2022 fall submission declined by 25%, the Indicator group still netted over one full level of growth since the beginning of SY 2019–2020. As this this group of practices contains curriculum, classroom practices, and differentiation, it is also one of the most targeted and supported practice groups, with growth that supersedes all other practice groups.

Between the SY 2019–2020 fall submission and SY 2020–2021 spring submission, the evidence-based practices for universal screening and progress monitoring, had an average growth of 69% toward an additional full level of implementation. Subsequently, however, the SY 2021–2022 fall submission declined by 52%, only netting 17% growth since the beginning of SY 2019–2020.

Between the SY 2019–2020 fall submission and SY 2020–2021 spring submission, the evidence-based practices for interventions and supports had an average growth of 71% toward an additional full level of implementation. Subsequently, however, the SY 2021–2022 fall submission declined by 81%, showing a decline in practices of 10% since the beginning of SY 2019–2020.

In comparing the number of evidence-based classroom practices reported within the quadrants of Inclusive Learning Environment and Student Engagement on the EBP Diagnostic Tool between November–December of SY 2020–2021 and November–December of SY 2021–2022, both showed an average of between two and three additional evidence-based classroom practices this school year, as opposed to last school year. In contrast, when comparing the number of evidence-based classroom practices reported within the quadrants of Instructional Practices and Student Interactions on the EBP Diagnostic Tool between November–December of SY 2020–2021 and November–December of SY 2021–2022, both showed an average of between one and two fewer evidence-based classroom practices this school year, as opposed to last school year. Further emphasizing the depreciation of data in the quadrants of Instructional Practices and Student Interactions, while November–December submissions were from the first classroom walkthroughs of last year, the November–December submissions were from the second walkthroughs of this year. Unlike last year, this year's November–December submission came after an opportunity for growth and development between measures.

In an effort to collect more information toward the possibility of targeting support improvements, the SEA-SSIP Team presented this data at the January Directors' Feedback session for Indicator Stakeholders at learning communities around the state of Arizona. After asking special education directors to use their experience to rate what they feel may have led to fewer EBPs this year as opposed to last year in the quadrants of Instructional Practices and Student Interactions, 90% reported "Overwhelmed Teachers" as the most significant factor, and 80% also reported "Staff Turnover" as a very significant factor. As these stressful factors within the learning community are not inherent to the evidence-based practices themselves but are rather external factors that appear to have had a negative effect on the growth in practices in these two quadrants, the EBP Tool will continue to include and monitor these evidence-based practices in their current form, and the SEA-SSIP Team will keep this stressful dynamic in mind during collaboration and while making any SSIP process improvements.

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

As prior data for evidence-based practices in Data-Based Decision Making had the lowest growth of any Indicator group in the SGR and AP, the SEA-SSIP Team will target this Indicator for improved growth. Collaboration will take place with agency partners regarding the possibility for professional development supports being made available.

As prior data for the evidence-based practices in Cultural Responsiveness also had below average growth in prior data on the SGR and AP, this Indicator group will also be targeted for improved evidence-based practices going forward. The SEA-SSIP Team will look toward collaborating with interagency partners such as School Support and Innovation, which has information on culturally responsive teaching practices, for organized opportunities of future professional development.

As prior data for evidence-based practices in Core Instructional Program had the most prior growth of any other practice group on the SGR and AP, the SEA-SSIP Team will continue to monitor the well-articulated curriculum group for growth as emphasis is expanded to other practice groups of need.

Since all Indicator groups within Universal Screening and Progress Monitoring showed a decline on the SGR and AP to start SY 2021–2022, and because this group should be supported by the recent MOWR legislation and alignment with SSIP, the SEA-SSIP Team will continue to monitor this group for growth in practices commensurate with or exceeding growth prior to this school year.

Despite showing average growth prior to SY 2021–2022, the extent of decline in SY 2021–2022 of practices concerning Interventions and Supports on the SGR and AP point toward an emphasis in the practice group going forward. The SEA-SSIP Team will look to strengthening collaboration with interagency departments of Professional Learning and Sustainability and School Support and Innovation to pair their professional development opportunities with SSIP PEAs for multi-tiered systems of supports. The SEA-SSIP Team will continue to monitor this group for growth in practices that are commensurate with or exceeding growth prior to this school year.

Although the data showed some decline in the growth of evidence-based practices on the EBP Diagnostic Tool, stakeholder feedback reveals that, more than ever, any activity changes to improve growth have to be done with the consideration of PEA capacity. While changes to the walkthrough process that include expanding the observational set and support for growth specifically pertaining to Instructional Practices and Student Interactions between observations could be pursued cautiously, the SEA-SSIP Team will refrain from any process revisions that could result in further taxing of already stressed teachers and administrators, especially while COVID-19 is a contributing factor.

Section C: Stakeholder Engagement

Description of Stakeholder Input

As data and other information became available after the close of the 2020–2021 school year, individuals from the ADE/ESS staff reported to the Special Education Advisory Panel (SEAP), Arizona's advisory group. SEAP was established in accordance with the IDEA. The purpose of SEAP is to provide policy input concerning special education and related services for children with disabilities in Arizona. SEAP is composed of a broad range of stakeholders throughout Arizona. Groups represented on the panel include parents of children with disabilities, individuals with disabilities, teachers, early childhood educators, charter schools, school districts, institutions of higher education that prepare special education and related services personnel, secure care facilities, and public agencies. SEAP provides input and feedback during the process of determining targets, and ADE/ESS representatives respond to questions and comments from SEAP members regarding indicator data. In addition to the SEAP meetings, ADE solicited input on targets from the following stakeholder groups:

- Inclusion Task Force
- Raising Special Kids (Arizona's Parent Training and Information Center)
- East Valley Community of Practice on Transition
- Post School Outcome Focus Group
- Northern Regional Cohort
- Southern Regional Cohort
- Eastern Regional Cohort
- Western Regional Cohort
- Central Regional Cohort

These efforts resulted in 214 stakeholders who completed the SPP/APR surveys. These stakeholders represented a variety of races/ethnicities. Survey completers identified their primary roles as individuals with a disability, community members, special education professionals, agency representatives, parent/guardians, or vocational/business professionals.

For SSIP, stakeholders include all people who are invested in the outcomes for students with disabilities in SSIP PEAs. Stakeholders include, but are not limited to, individuals with disabilities, teachers, administrators, parents and family members of students with disabilities, intra-agency partners, interagency partners, officials for homeless assistance, representatives for foster care and juvenile facility placement, and SEA specialists.

Stakeholder input includes any collaborative efforts toward documenting and implementing activities and providing feedback, whether collected formally or informally, through correspondence or verbal discourse. Feedback may be received in the body of an email, during meetings, or through survey results.

Other than SEAP, as described above, the stakeholder groups that contribute toward the outcomes for students with disabilities include:

PEA-SSIP Teams

PEA-SSIP Teams are typically comprised of 4–6 members of learning community leadership, often including the special education director, principals and assistant principals, instructional specialists and coaches, and teachers in both special and general education. These PEA-SSIP Teams are the primary stakeholders involved with the SGR self-assessment, the AP documentation and implementation, and in conducting EBP walkthroughs for the collection and development of classroom practices. They meet between monthly and quarterly to review initiative goals, available resources to meet those goals, how to mitigate or circumvent barriers to goal progress, and to use progress monitoring data toward fortifying or revising plans toward goals.

PEA-SSIP Learning Community Members

As the implementation of initiatives from the SGR and AP activity depend on a variety of stakeholders within PEA learning communities, they are integral SSIP stakeholders. This not only includes administrators, but also school leadership, instructional coaches and specialists, teachers, support staff, and families. School principals are a primary source of feedback for the EBP survey.

Raising Special Kids (RSK)

RSK is a group of parents and guardians of students with disabilities that provides feedback specifically from the perspective of families. It is also Arizona's Parent Training and Information Center.

Special Education Directors

Special education directors are the leaders of PEA-SSIP Teams, are members of SEAP, are the exclusive source of feedback at Directors' Check-In meetings, and are the primary respondents of the SSIP Survey. They also provide continuous communication through the progress of SSIP activities as the primary contact for the SEA at PEAs.

Literacy Initiatives Work Group (LIWG)

The LIWG is an opportunity for literacy development stakeholders between special and general education within the SEA to come together and share progress on agency initiatives, progress toward outcomes, professional development status, and alignment opportunities. The group includes members from K-12 Academic Standards, ESS Professional Learning and Sustainability (PLS), Early Childhood Education, ESS Early Childhood, Assessment, ESS Program Support and Monitoring, and ESS Special Projects.

ADE/ESS Program Support and Monitoring (PSM)

Specialists in ESS/PSM are the primary contacts between the SEA and PEA, involving the initiation, submission, and progress through SSIP activities. They are also a source for ongoing feedback through all forms of communication and from monthly PSM meetings.

ADE/Exceptional Student Services (ESS)

ADE/ESS holds monthly meetings to share information and progress and to collect feedback from other perspectives within the SEA. The ESS group includes PSM, Professional Learning and Sustainability (PLS), Operations, Special Projects, Early Childhood Special Education, and Dispute Resolution. It also collaborates regularly with agency partners such as Assessment, Unique Populations, and K-12 Academic Standards.

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

The SEA collects informal feedback continuously while collaborating with PEAs. Through ESS/PSM Specialists and the ESS/SSIP Coordinator, the SEA communicates directly with PEA Special Education Directors and PEA-SSIP Teams prior to each activity submission and throughout the year whenever questions arise. Directors and PEA-SSIP Teams collaborate together toward documenting and implementing SSIP activities. PEA-SSIP Teams then engage their learning community to become active stakeholders toward goals and outcomes.

Feedback from PEA learning communities is communicated through PEA SSIP Teams and special education directors and is collected through meeting notes and written correspondence. The feedback is aggregated and categorized into a document for continuous improvement. To determine if feedback would provide for activity and student outcomes and is actionable, it is presented to agency leadership during collaboration. If both criteria are met, depending on when it is actionable, the feedback is put into practice.

The SEA collects formal feedback through the SSIP and EBP Survey in early December of each year and through surveys after presentations to stakeholder groups, such as Arizona's special education directors, SEAP, and RSK. This feedback is then used toward continuous improvement efforts. In SY 2021–2022, for example, SEAP survey feedback was directed toward setting SPP/APR targets, and RSK survey feedback was directed toward collecting the parent perspective concerning SGR Indicators that involve family engagement to make data comparison with levels of implementation from PEA-SSIP Teams.

Interagency presentations are delivered quarterly to LIWG, to SEA members within ESS, and to PEA specialists within PSM. In addition to feedback toward activity improvements, collaboration within the SEA often includes opportunities to connect professional development with ongoing PEA initiatives from agency partners. PEAs are generally alerted to professional development opportunities from various SEA listserv emails but are specifically alerted when there is an opportunity to pair an expressed need from an action initiative with a professional development offering.

PEA-SSIP Teams, Special Education Directors, and Learning Community Members

While special education directors are the primary contact for every communication between the SEA and PEA learning communities, PEA-SSIP Teams are often included in the regular correspondence that takes place to discuss activity submission and progress. Then, at opportune times for deeper discussion, such as at the beginning of the school year and prior to new submissions for activities such as the SGR and AP and the EBP Walkthrough Process, the SEA extends opportunities for PEA-SSIP Teams to meet with the SEA. This collaborative structure is not only how key improvement efforts circulate from the SEA to PEA-SSIP Teams and PEA learning communities but is also the most consistent means of collecting feedback from PEA learning communities and PEA-SSIP Teams for SSIP Improvements. Feedback is encouraged, recorded, shared with agency stakeholders, and used toward SSIP improvement efforts continuously. In addition, PEA-SSIP Teams share targeted feedback on the EBP Survey in Year 2 and on the SSIP Survey annually. Examples of SSIP improvements that have resulted from these communications, include activity forms that reflect continuous progress, using links for navigating within and outside of documents for added support, and in dissecting compiled resource videos and presentations to make them more targeted and flexible for PEA-SSIP Teams to use efficiently.

SEAP

Annually, the SEA-SSIP Team presents activity and student outcomes to SEAP. The SEA-SSIP Team then receives feedback on progress and process implementation through meeting and survey response. Some examples of feedback that has been collected and that has led to key SSIP improvements include the alignment with MOWR and setting six-year targets for progress toward the SIMR.

RSK

Annually, the SEA-SSIP Team presents activity and student outcomes to RSK. In SY 2021–2022, the SEA-SSIP Team asked RSK stakeholders for their perspective on SGR Indicators 2c, 3d, 4c, and 5d. As these Indicators ask PEA-SSIP Teams to relay information pertaining to family perspectives, and with SGR evidence rarely showing an indication of parent survey, the SEA-SSIP Team took advantage of the opportunity to ask families about their experience directly. With a small sample size of response and not receiving feedback that deviated in any way from PEA-SSIP Team responses, the SEA-SSIP Team will need to rely on future results for actionable response and improvement.

LIWG

Although the LIWG meets quarterly, collaboration takes place continuously throughout the year. For example, when MOWR corresponds with an SSIP PEA pertaining to MOWR literacy plans and screener data, the SSIP Coordinator and the PEA's PSM Specialist is included in the correspondence. That leads to collaborative opportunities for aligning initiatives and discussing progress. Subsequently, PLS may then be contacted, regarding the connection between the initiatives and professional development opportunities, which may then be extended directly to the PEA.

ESS, ESS Leads, PSM, and PSM Leads

At monthly meetings, intra-agency stakeholders for the positive outcomes of students with disabilities come together to discuss all facets of supporting PEAs toward student growth, including literacy outcomes. Especially significant, these groups all contain the primary contact for regular communication with PEA learning communities. Feedback toward improvement efforts often involves the consideration of PEA capacity, regularity and form of communication, and PEA community needs and concerns.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

An example of how feedback is continuously collected and used to inform SSIP practices can be seen through the evolution of the SGR and AP support video. Through informal feedback at a virtual meeting during SY 2020–2021, the Special Education Director from an SSIP PEA mentioned that, while

they found the support video helpful, it would be more helpful if it provided not only direction for the completion of the activity but also example responses for each section. This feedback was recorded, the feedback shared, and the video was realigned not only to an eventual reformatting of the SGR and AP, but also to include specific examples for each section. It was then made available to PEAs on the SSIP website and was referenced in correspondence with PEAs at the beginning of SY 2021–22, prior to the fall SGR and AP submission. Then, through formal feedback in the SY 2021–2022 SSIP Survey, while there were many resources that PEA-SSIP Teams found useful toward completing the SGR and AP activity, only a small percentage of PEA-SSIP Teams reported finding the video useful. Upon dissemination of these results to stakeholders, informal feedback was collected, suggesting that Year 2 and Year 3 PEA-SSIP Teams may not have found the need to watch the video or that the effort toward covering examples comprehensively may have also made the overall length of the video time-prohibitive. Through the collaboration, a plan was devised to make the resource more valuable toward completing the activity with fidelity in SY 2022–2023 by embedding links to shorter videos that are specific to each section within the SGR and AP document and so that PEA-SSIP Teams can more easily make the choice to use the targeted resource during completion.

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.

In association with the SSIP Logic Model, the SEA-SSIP Team will be analyzing data and feedback to expand the capacity for providing PEA-SSIP Teams with differentiated supports. On the SSIP Survey, while most PEAs reported SSIP resources positively, 29% expressed the desire for more guidance and support in using the resources toward activity completion. By becoming more targeted in supporting PEAs through the documentation and implementation of their activities, this should provide for fidelity of implementation, which in turn would result in improved literacy outcomes. To initially assess PEA needs, the SEA-SSIP Team will collect information based on PEA capacity. The information collected would include such things as staffing and existing initiatives. While the SEA-SSIP Team can offer virtual support to introduce all new PEAs to SSIP and for initial submissions of an SSIP activity, it can also use capacity information for additional and targeted onsite support, when available.

The SEA-SSIP Team will also use prior fidelity data from PEA activity submissions to extend enhanced support. For example, when fidelity analysis reveals a group of PEAs with common and moderate issues to fidelity, a presentation can be extended to these PEAs as a group, including time for questions and group collaboration. Where fidelity analysis shows PEAs with more extensive and intensive issues to completing the activity with fidelity, a presentation can be tailored and presented to specific PEAs and their SSIP Teams with time for questions and team collaboration. When available and where appropriate, onsite visits will be offered to improve both the collection and support of implementation fidelity.

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

Prior to the SY 2021–2022 submission, the SEA-SSIP Team will develop the structure for collecting and organizing information pertaining to PEA capacity, and for organizing supports based on fidelity data. Through the month of April 2022, the SEA-SSIP Team will create an overview presentation for Cohort 6—Year 1 PEAs. The SEA-SSIP Team will deliver these presentations with PSM Specialists at Monitoring Set-Up meetings in May 2022 and will offer enhanced support toward the creation of their PEA-SSIP Team and the initial completion of the SGR and AP in the fall of SY 2022–2023. For those that would like this differentiated level of support, the SEA-SSIP Team will collaborate with the PEA to collect information pertaining to the current structure and systems of their PEA and assist PEAs in creating tools that not only aid in the documentation and implementation of the SGR and AP but are also individualized to the specific needs of PEA learning communities.

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

The dynamic of local control is always a barrier to collecting consistent and reliable data, to providing support, and to activity implementation with fidelity. The alignment with MOWR was a significant step toward collecting more consistent and reliable literacy progress data. While the SEA-SSIP Team will continue to look for ways to improve the collection of data with further consistency and reliability, steps will also need to focus on providing PEAs with support toward completing activities with fidelity. The SEA will need to ensure messaging makes it clear that PEAs have the choice to attend additional support opportunities and, at the same time, show the value of pursuing SSIP activities with fidelity toward positive outcomes. Toward this end, the SEA will include data to support these connections in presentations. Personalizing presentations whenever possible will help PEAs to not only see value, but also to feel valued.

Capacity will be a potential barrier for both the PEA and SEA. To overcome capacity issues with PEAs, the SEA will find opportunities to integrate existing initiatives in the SGR and AP. For the SEA, especially if onsite support becomes available from the subsidence of COVID-19-related concerns, the SEA will need to begin the implementation of supports with small groups of like-fidelity issues and the ability to conduct the supports remotely. The SEA will slowly integrate individualized supports and monitor capacity issues during regulated expansion.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - 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.

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:

Alissa Trollinger

Title:

Deputy Associate Superintendent, Exceptional Student Services

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Submitted on:

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