

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2022**

Kentucky



PART B DUE February 1, 2024

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

Introduction

Instructions

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

Intro - Indicator Data

Executive Summary

The Kentucky Department of Education (KDE) presents Kentucky's federal fiscal year (FFY) 2022 State Performance Plan and Annual Performance Report (SPP/APR). The Individuals with Disabilities Education Act (IDEA) of 2004 requires state education agencies (SEAs) to meet the requirements of the IDEA and education programs throughout the state to provide a free appropriate public education (FAPE) to all students with disabilities. The KDE's Office of Special Education and Early Learning (OSEEL) is responsible for monitoring compliance with federal and state requirements (20 U.S.C. Sec. 1400) with a primary focus on improving educational results and functional outcomes for all students with disabilities. This annual report provides an update on the performance of the SEA and of each local education agency (LEA) in meeting the requirements of the IDEA for FFY 2022.

The OSEEL is committed to providing the necessary support and technical assistance to LEAs so students with disabilities are equipped to pursue a successful future. To that end, the OSEEL's North Star priorities include the following:

1. Bridging preschool to kindergarten
2. Effective instruction
3. Foundation of compliance
4. Parents and families
5. Attract, recruit and retain
6. Discipline practices
7. Diversity, equity, inclusion and belonging
8. Stakeholder Engagement

The KDE relies upon the SPP/APR, including the State Systemic Improvement Plan (SSIP) along with the State Personnel Development Grant (SPDG), as the essential components in its work to ensure compliance with the IDEA, in providing a FAPE to students with disabilities and in improving educational and functional outcomes for students with disabilities. Additional information about the KDE's SSIP and SPDG can be found below.

Additional information related to data collection and reporting

The Kentucky School for the Blind (KSB) and the Kentucky School for the Deaf (KSD) are LEAs within Kentucky. However, the funding for these state schools is separate from other LEAs. For FFY 2022 Kentucky has 173 LEAs including the KSB and the KSD.

Number of Districts in your State/Territory during reporting year

173

General Supervision System:

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

SPP/APR-

Kentucky uses the SPP/APR to evaluate the state's efforts in implementing and achieving the requirements of the IDEA. Kentucky engaged with a broad range of stakeholders to set rigorous measurable annual targets. Stakeholder groups followed a consistent process for reviewing, analyzing and providing proposed measures to ensure improved outcomes for students with disabilities.

SSIP-

Kentucky uses a linked teaming structure that includes a practice-to-policy communication process connecting the feedback from the classrooms with the SEA. Kentucky designed this mechanism to ensure support is provided to improve student performance in mathematics and in meeting the goals of the State-identified Measurable Result (SIMR).

Effective Policies and Procedures-

Along with the Every Student Succeeds Act 2015 (ESSA), the IDEA 2004, the Americans with Disabilities Act 1990, the Family Educational Rights and Privacy Act 1974 (FERPA) and the Rehabilitation Act of 1973 Section 504, Kentucky has a regulatory framework to provide structure for LEA implementation of the IDEA Part B requirements available at (<https://apps.legislature.ky.gov/law/kar/TITLE707.HTM>).

Integrated Onsite and Offsite Monitoring Activities-

In FFY 2022, based on feedback from stakeholders, including local superintendents, directors of special education (DoSEs), the chair of the State Advisory Panel for Exceptional Children (SAPEC) and technical assistance providers the KDE implemented a new monitoring system to meet general supervision requirements. To increase transparency, collaboration and effectiveness, the KDE developed Differentiated Monitoring and Tiered Engagement (DMTE). The DMTE encompasses all monitoring activities and includes a tiered support system with universal engagement for every LEA. The DMTE differentiates monitoring and support for each LEA based on the LEA's unique strengths and areas for improvement.

Tier 1 – Universal: Statewide resources that are available to all LEAs in Kentucky.

Tier 2 – Targeted: Individualized, targeted assistance for LEAs with noncompliance discovered in self-assessments, indicator desk reviews and district noncompliance within alternate assessment aligned with alternate academic achievement standards (AA-AAAS) desk reviews, justifications and assurances.

Tier 3 – Intensive: In depth, intensive engagement for a small number of LEAs facilitated through one of the following processes: Risk Focused Monitoring (RFM), Comprehensive Special Education Review, Kentucky Educational Collaborative for State Agency Children (KECSAC) and Correctional Facilities Monitoring, Management Reviews and Fiscal Reviews.

Included in DMTE is RFM, which is a differentiated monitoring process developed by the KDE to meet IDEA's general supervision requirement; it is risk-

based, cyclical and individualized. RFM includes desk reviews, on-site monitoring and utilizes the Corrective Action Plan (CAP) process when noncompliance is identified. The KDE uses data from LEA Annual Determinations and the Risk Assessment Rubric to identify LEAs' level of risk. The KDE analyzes data for each LEA identified for RFM to determine the monitoring focus area(s), thus allowing for differentiated monitoring. The KDE conducts RFM throughout the school year.

In addition to RFM, the KDE conducts other types of monitoring to exercise general supervision responsibilities including Comprehensive Special Education Reviews, Management Audits, KECSAC and Correctional Facilities Reviews, SPP/APR compliance Indicator Desk Reviews, Fiscal Reviews, LEA Annual Determinations and AA-AAAS desk reviews.

The KDE's monitoring manual can be found at (<https://education.ky.gov/specialed/excep/forms/Documents/DMTEManual.pdf>).

Improvement, Correction, Incentives and Sanctions-

Through Kentucky's system of monitoring, the state identifies noncompliance present in its LEAs which result in CAPs. The CAPs are used to correct noncompliance and to improve outcomes for students with disabilities. When sanctions are necessary, the KDE applies these sanctions consistently across the LEAs as specified in 707 KAR 1:380, Section 3, which can be found at (<https://apps.legislature.ky.gov/law/kar/707/001/380.pdf>).

Effective Dispute Resolution-

Kentucky has dispute resolution processes in place to resolve disagreements between parents of students with disabilities and LEAs. The OSEEL investigates formal written complaints and collaborates with the KDE's Office of Legal Services (OLS) on due process hearings, expedited due process hearings and mediation. More information on KDE's dispute resolution processes can be found at (https://education.ky.gov/specialed/excep/Pages/Dispute_Resolution_Process.aspx).

Fiscal Management-

KRS 156.265 authorizes the State Committee for School District Audits (SCSDA) to conduct audits of the financial records of Kentucky's local boards of education. The audits must be performed by a certified public accountant, approved by the SCSDA and conducted according to current auditing standards. The SCSDA requires all local boards to have an annual audit of the financial records and accounts under the board's control. In addition, the Office of Management and Budget Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards sets forth cost principles and standards for determining the allowable costs of federally funded grants and contracts administered by the state and local governments and contains provisions for determining indirect cost rates for grantees and subgrantees of federal grants.

The KDE's Office of Financial Operations (OFO) tracks and manages federal title funds for the agency. The KDE's OSEEL and OFO work collaboratively. The KDE takes additional steps to provide sound fiscal management and oversight of the IDEA funds received by the state. For the state share of IDEA funds, both for administrative purposes and other state-level activities, the KDE organizes regular reconciliation meetings with the OSEEL and OFO to monitor the expenditure of these funds throughout the period of availability. The OSEEL and the OFO reconcile funds for each area of expenditure. Staff from both offices ensure the funds are spent appropriately, timely and as budgeted. For a complete outline of the KDE's fiscal management including monitoring policies and procedures, identification of noncompliance and corrections of noncompliance see the IDEA Fiscal Monitoring Manual at (https://www.education.ky.gov/specialed/excep/MonitoringnResults/Documents/OSEEL_IDEA_Fiscal_Monitoring_Manual_2023.pdf).

Data on Processes and Results-

Kentucky collects data to meet reporting requirements, target LEA support and measure the effectiveness of an LEA's compliance with requirements of the IDEA. The KDE reports statewide special education data publicly, and this information can be accessed at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

To ensure data is consistently entered statewide, the KDE implements data standardization to establish practices and procedures for consistency and comparability across different student databases. Data standards dedicated to students with disabilities provide LEAs with a set of guidelines for entering data into Kentucky's Student Information System utilizing the platform Infinite Campus (IC). The data standards provide a series of screenshots and explanations of the data elements required for state and federal reporting. Kentucky's data standards meet the Federal Reporting Requirements under section 618 of the IDEA. The data standards include data collection for Child Count, Special Education Exit Report, Special Education Behavior/Safe Schools Report and the SPP/APR. Kentucky's data standards are located at (https://education.ky.gov/districts/tech/sis/Documents/Standard-Special_Education-Processes.pdf).

Technical Assistance System:

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

Kentucky's Special Education Technical Assistance Network supports the efforts and initiatives of the KDE in building the capacity of LEAs to serve students who receive special education and related services. Each year under Part B of IDEA, the U.S. Department of Education (USED) awards federal funds to all states under Section 611 (Grants to States) and Section 619 (Preschool). Of these funds, states allocate a substantial portion to the LEAs, and award smaller amounts for what the IDEA refers to as "Other Activities". The KDE uses the amount it sets aside for "Other Activities" to fund a statewide network of technical assistance (TA) providers. Kentucky's statewide TA network provides related support to its LEAs intending to expand services and programs at the local level to improve student performance and outcomes. A full list of TA providers may be found at (<https://education.ky.gov/specialed/Pages/techassist.aspx>).

As part of the statewide TA network, the KDE provides technical assistance through nine Special Education Regional Technical Assistance Centers (SERTACs) and five early childhood Regional Training Centers (RTCs). These service providers are located throughout the state and provide Kentucky's LEAs with professional development and specialized instructional support.

The focus of the SERTACs is improving educational opportunities and outcomes for students with disabilities by providing regional leadership and delivering specialized services. The SERTACs work in partnership with the KDE, LEAs, institutions of higher learning and other service providers. The SERTACs also serve as a regional collaborative forum to support quality education, provide a wide range of support services and model innovative practices for the benefit of students with disabilities. The SERTACs employ consultants in areas such as literacy, math and behavior. These consultants assist with building LEA capacity and support teachers working with students with disabilities.

All of Kentucky's local school districts are eligible to receive TA at no cost to the LEA through the SERTACs. These services align with the KDE initiatives to meet the federal requirements of the IDEA and the priorities established by the Office of Special Education Programs (OSEP).

The early childhood RTCs provide a range of services for early childhood programs, including regional trainings and workshops, on-site consultations, a lending library of materials and annual statewide and regional collaborative institutes. The RTCs are dedicated to promoting high-quality learning

environments and continuous quality improvement for children with disabilities in state-funded preschool settings.

Additional information on Kentucky's SERTACs and RTCs may be found at (<https://www.education.ky.gov/specialed/Pages/techassist.aspx>). Kentucky's SSIP focuses on supporting teachers with the implementation of evidence-based math practices and Positive Behavioral Interventions and Supports (PBIS). Using the Active Implementation Frameworks (AIF), the SSIP centers around developing systems of support to close achievement gaps and improve math outcomes for students with disabilities. Through the SSIP, the KDE collaborates with SERTACs in a limited number of LEAs known as Transformation Zones (TZ). Using continuous improvement cycles, these regions are supporting the participating LEAs in reaching the goals of Kentucky's SiMR.

The KDE creates, maintains and updates resources for a broad spectrum of stakeholders. The KDE provides a variety of publications and resources to stakeholders to support their understanding, implementation and compliance with the IDEA.

The most recent monitoring guidance, including the updated Compliance Record Review, may be found at (https://www.education.ky.gov/specialed/except/forms/Documents/Compliance_Record_Review.pdf). The KDE developed this guidance to assist Kentucky's LEAs in conducting accurate student due process record reviews.

Through monitoring of its LEAs, Kentucky emphasizes improving the development and implementation of Individual Education Programs (IEPs). The KDE has developed additional guidance around IEPs including a guide for determining Specific Learning Disability (SLD) eligibility, an IEP and Lesson Plan Development Handbook and an IEP Development Guide. In addition, the KDE has created guidance documents on other relevant topics such as special transportation in Kentucky, IEP progress monitoring, specially designed instruction (SDI) and related services. These guidance documents and resources are available at (<https://www.education.ky.gov/specialed/except/GuidanceResources/Pages/arciep.aspx>).

To further assist with improving outcomes for students with disabilities, the KDE contracts with the University of Kentucky's Human Development Institute (HDI) to provide TA for LEAs through web-based training on how to determine and document participation in the AA-AAAS. The KDE posts its guidance documents for determining and documenting AA-AAAS participation at (<https://www.education.ky.gov/specialed/except/GuidanceResources/Pages/kyaltassesspartwaiver.aspx>).

The KDE also partners with HDI for Indicators 8 and 14. For Indicator 8, the HDI develops the parent survey and analyzes the responses to the survey. The HDI then provides the data to the KDE for Indicator 8 reporting.

For Indicator 14 the Kentucky Post School Outcomes Center (KYP SO), a department within the HDI, develops and oversees the administration of the Youth One Year Out (YOYO) Former Student Interview. The KYP SO provides information to Kentucky's LEAs regarding programs and practices to support students' secondary transition and provides Indicator 14 data to the KDE. More information about KYP SO may be found at (<https://www.kypso.org/>).

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.

The SPDG is a five-year competitive grant that has been awarded to Kentucky by the OSEP since the late 1990s. In partnership with personnel from the University of Kentucky, the University of Louisville, Kentucky's Parent Training and Information Center, known as Kentucky Special Parent Involvement Network (KY-SPIN) and professional learning providers across the state, Kentucky's former SPDG replicated processes within the SSIP to provide support to teachers on mathematics and positive behavioral interventions and supports (PBIS). The former SPDG addressed two primary goals:

Goal 1: To improve the capacity of TZ teams (LEAs, regional partners and schools) to implement and sustain Multi-Tiered Systems of Support (MTSS) by aligning related initiatives at each level and provide ongoing professional learning for LEA and school personnel.

Goal 2: To improve student achievement in TZ LEAs through multiple, sustained professional learning strategies within an MTSS framework that impacts teachers, school administrators, students and families.

A key objective of the SPDG was the integration of activities between Kentucky's ESSA plan and the SSIP, along with the Collaboration for Effective Educator Development, Accountability and Reform (CEEDAR) Center and the State Implementation and Scaling-up of Evidence-Based Practices (SISEP) Center.

Kentucky was recently awarded another SPDG in 2023. The focus is on improving post-school outcomes for students with disabilities through a professional development program for capacity building in the area of postsecondary transition. The SPDG will leverage the implementation knowledge gained in the SSIP to support data collection and processes. More information on Kentucky's 2023 SPDG will be included in the FFY 2023 APR.

In 2020, the KDE was awarded the Kentucky Leading, Educating, Advocating for Directors of Special Education (LEADS) grant. In partnership with the KDE, Kentucky's Part C Early Intervention Services, Morehead State University, Western Kentucky University, Murray State University and the KY-SPIN, Kentucky's LEADS Academy is working toward three goals:

1. Recruit-Increase the number of persons who attain the state's initial level of Advanced Educational Leader/DoSE certification to ensure that there is an adequate pipeline of eligible applicants to serve as state, regional and local leaders to promote high expectations and improve early childhood outcomes for children with disabilities and their families.
2. Retain- Increase and nurture the number of persons whose job description includes supervising, directing, administering or coordinating special education programs who have attained the state's highest level of Advanced Educational Leader/DoSE certification.
3. Increase capacity- Expand and enhance the existing state network to ensure state, regional and local leaders have the knowledge, skills and access necessary to improve early childhood and educational outcomes for children with disabilities and their families through the systems that serve them.

Stakeholder Engagement:

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

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of

students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

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

YES

Number of Parent Members:

Parent Members Engagement:

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

No revisions were made to any Indicator baselines or targets for FFY 2022

Target Setting for FFY 2020-2025-

Parents were critical partners in setting targets. Individual parents of students with disabilities, staff from the KY-SPIN and advocacy organizations were included in stakeholder engagement activities. The KY-SPIN engaged with parents on how to collaborate with the KDE on statewide target setting efforts. Additionally, a broader range of parents unable to attend public or virtual forums provided input on targets through an online survey. Links to the survey were sent via email to parents and posted on the KDE's public reporting web page. To solicit further feedback, target setting information was provided to every LEA's DoSE through the statewide listserv, allowing local directors to solicit parent feedback. Additionally, parent members of Kentucky's SAPEC were given the opportunity to actively engage in target setting.

In FFY 2022, the KDE provided the SAPEC with a yearly update on the SPP/APR and SSIP progress which included analysis and evaluation of the data. The SAPEC had the opportunity to provide feedback to the KDE during an open public forum and through an electronic feedback form. The feedback form allowed members of the SAPEC to ask additional clarifying questions, suggest improvement strategies and provide input on indicator data. Feedback from SAPEC members included the request for more guidance around Indicators 9 and 10 specifically referring students for special education and making eligibility decisions.

The KDE worked with parents and KY-SPIN to create resources for students with hearing impairments (HI) and/or visual impairments (VI) following changes to Kentucky's regulation. Input from parents included the need for further parent training using frequently asked questions. A question and answer document and training video related to the revisions to the special education definitions was created and released. Based on the feedback from parents and OSEEL staff, the Resources for Professionals and Families of Students with Visual Impairment webpage and Resources for Professionals and Families of Students Who Are Deaf or Hard of Hearing (DHH) webpage were updated. These web pages now include additional agencies, organizations and resources to assist individuals who have a HI and/or VI. These pages can be found at (https://education.ky.gov/specialed/blindef/Pages/Resources-for-Students-with-Visual-Impairment.aspx?utm_medium=email&utm_source=govdelivery) and (https://education.ky.gov/specialed/blindef/Pages/Resources-for-Students-with-Hearing-Impairment.aspx?utm_medium=email&utm_source=govdelivery).

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 KDE has identified an OSEEL consultant to partner with stakeholders including parent groups, Kentucky Collaborative for Families and Schools (KYCFS), KY-SPIN, LEAs and SERTACs to increase response rate and representativeness. The KDE has analyzed parent participation data and identified the need to build the capacity of underrepresented groups, particularly Hispanic and Black/African American families as well as families living in the Southeast/South Central and Greater Louisville regions of Kentucky. The KDE is working with SERTACs on developing plans to increase engagement within these underrepresented groups as well as a plan to increase community partnerships. In addition, the KDE has a Diversity, Equity, Inclusion and Belonging (DEIB) consultant to assist in problem solving and developing strategies to reach more underrepresented parent groups. The KDE has adapted the Indicator 8 survey to include additional languages and developed a printer-friendly version of the survey to increase participation of underrepresented families. The KDE will continue to provide technical assistance and support to LEAs, SERTACs and other stakeholders accordingly. This includes strategies that relate to specific barriers identified by underrepresented SERTAC regions and racial/ethnic groups across the state.

Soliciting Public Input:

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

For FFY 2020 target setting, the KDE sought and obtained public input through various mechanisms, including virtual meetings with stakeholders, virtual and in-person meetings with the SAPEC and online surveys. Engagement activities took place from August of 2021 and continued through January 2022.

In FFY 2021, the KDE reset baseline for Indicator 3. Stakeholder input was obtained through email and an online survey. Engagement activities took place in August of 2022 and continued through January of 2023.

In FFY 2022, no baseline or targets were reset. The KDE engaged with stakeholders to create new resources for students with HI and/or VI. Stakeholders met virtually in the Spring of 2023 to develop new guidance with the goal of improving student outcomes and results.

The KDE continually engages with the SAPEC to improve practices for students with disabilities. The SAPEC meets quarterly to analyze data, discuss the state's progress, identify barriers and discuss improvement strategies.

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.

The KDE annually shares the SPP/APR and indicator data for each LEA publicly on its website. This data is located at: (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>). Additional publicly reported data can be found at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/speddatadashboard.aspx>).

The KDE publicizes updated releases with press announcements. Information is disseminated broadly through the TA Network including the SERTACs and RTCs. In addition, the KDE communicates improvement strategies, data analysis and timelines through a variety of communications including a weekly email update titled News You Can Use and a quarterly OSEEL newsletter sent out via a listserv to all stakeholders.

For FFY 2020 target setting, online surveys were distributed to stakeholders in October 2021 and remained open until January 2022.

Additionally, the KDE publicly released the results of the target setting activities in January 2022 on its public reporting web page which can be found at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Reporting to the Public

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

The KDE publicly reports the performance of Kentucky LEAs on the SPP/APR targets on its website. For more information regarding statewide Section 618 data, the SPP/APR and Kentucky's IDEA Part B State Application, please visit (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

The KDE also publicly reports the state summative assessment results for all students, including students participating in the alternate assessment aligned with the AA-AAAS. These data are publicly reported as required by OSEP at (https://education.ky.gov/specialed/excep/MonitoringnResults/Documents/FFY22_Public_Reporting_Instructions_For_OSEP.pdf).

This explains how to view and navigate the participation data posted on OSEEL's Public Reporting page (https://www.education.ky.gov/_layouts/download.aspx?SourceUrl=https://www.education.ky.gov/specialed/excep/MonitoringnResults/Documents/FFY2022_Assessment_Participation_for_SWDs.xlsx) and how to review the performance data for regular assessment and alternate assessment in Kentucky's School Report Card (<https://kyschoolreportcard.com/datasets?year=2023>).

Kentucky's website has been redesigned and FFY 2021 assessment data has moved. It may be found on OSEEL's Public Reporting page listed above. It can be found specifically at the link (<https://education.ky.gov/specialed/excep/MonitoringnResults/Documents/InstructionsforNavigatingPublicReportingofAssessmentDataforStudentswithDisabilities.pdf>).

Kentucky strictly adheres to the provisions of the FERPA to protect the privacy of student education records. Some individual grade or grade range performance results are suppressed to protect student identity. Individual Student Reports (ISRs) identifying individual student results are shared with LEAs for distribution to schools and parents. The results are not made public due to FERPA guidelines.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	81.85%

FFY	2017	2018	2019	2020	2021
Target >=	79.60%	79.60%	79.60%	81.85%	81.85%
Data	74.42%	74.83%	75.49%	81.85%	84.18%

Targets

FFY	2022	2023	2024	2025
Target >=	81.99%	82.50%	84.00%	85.00%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky’s State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders’ understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky’s historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE’s future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics.

Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	3,429
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	412
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	25
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	417

FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
3,429	4,283	84.18%	81.99%	80.06%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

From FFY 2021 to FFY 2022, the percent of youth with IEPs who exited special education by graduating with a regular high school diploma decreased by 4.12 percentage points resulting in slippage. The KDE investigated potential reasons for the decrease. The KDE found an increased number of students with IEPs who exited special education with a certificate, reaching maximum age or due to dropping out which directly correlates to the number of students graduating. In addition, the KDE found that COVID-19 continued to impact LEAs. During the COVID-19 pandemic, the number of graduates increased due to additional opportunities and flexibility for students to complete and make up credits aligned with their course of study. Many students who would have otherwise dropped out graduated during this time because of the opportunities to complete work virtually on their own schedule. LEAs in Kentucky have returned to in person learning and the data is now consistent with the graduation data that was reported prior to COVID-19.

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

The academic conditions that students with IEPs must meet to graduate with a regular diploma are the same as the conditions of students without disabilities. The KDE identifies the minimum credits required for graduation and LEAs establish local graduation requirements in policies consistent with state regulation. For youth to graduate with a high school diploma the youth must earn 22 credits. Specific graduate credit information can be found at (<https://apps.legislature.ky.gov/law/kar/titles/704/003/305/>). Kentucky schools must provide students with disabilities the opportunity and necessary instructional support and accommodations to progress through a course of study leading to a diploma. Students with disabilities who earn the required high school credit through successful completion of the required content areas and elective work are awarded a regular high school diploma.

The graduation rate is based on the Special Ed Exit Report (FS009). The formula divides the number of students with IEPs ages 14-21 who exited special education with a regular high school diploma by the number of students with IEPs ages 14-21 who exited special education with one of the following: received a regular high school diploma, received a certificate, reached maximum age or dropped out. Kentucky does not have an option for a state-identified alternate diploma. The term regular high school diploma means the standard high school diploma awarded to students by the LEA with a curriculum fully aligned with the state's academic content standards. It does not include a General Equivalency Diploma (GED) or any alternative diplomas that are not aligned with Kentucky's academic content standards.

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

NO

Provide additional information about this indicator (optional)

1 - Prior FFY Required Actions

None

1 - OSEP Response
1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	7.97%

FFY	2017	2018	2019	2020	2021
Target <=	1.91%	1.71%	1.71%	7.97%	7.97%
Data	2.01%	1.86%	1.79%	7.97%	6.40%

Targets

FFY	2022	2023	2024	2025
Target <=	7.77%	7.00%	6.00%	5.00%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/except/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

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Prepopulated Data

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SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	25
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	417

FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
417	4,283	6.40%	7.77%	9.74%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

From FFY 2021 to FFY 2022, the percent of youth with IEPs who exited special education due to dropping out increased by 3.34 percentage points resulting in slippage. The KDE investigated potential reasons for the increase. The KDE found that LEAs continued to be impacted by COVID-19. During the COVID-19 pandemic, the KDE experienced an increase in students graduating due to additional opportunities for virtual course completion which correlated to fewer students dropping out. Additionally, during COVID-19 students became more transient. This led to fewer students enrolled which impacted the number of students coded as dropping out. With a smaller sample size, the percentage of Kentucky students dropping out increased. LEAs in Kentucky have returned to in person instruction and the data now reflects that.

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

Kentucky counted students as dropping out if students were enrolled at the start of the reporting period but were not enrolled at the end of the reporting period. This included dropouts, runaways, GED recipients, expulsions, status unknown and students who moved and were not known to be continuing in another education program.

Students with IEPs who dropped out were included in this calculation. Students with IEPs who were enrolled at the start of the reporting period but were not enrolled at the end of the reporting period and had not exited special education through any of the other previously stated means were counted as dropouts.

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

NO

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

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using ED *Facts* 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	2021	99.41%
Reading	B	Grade 8	2021	98.51%
Reading	C	Grade HS	2021	94.42%
Math	A	Grade 4	2021	99.38%
Math	B	Grade 8	2021	98.54%
Math	C	Grade HS	2021	94.19%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	96.50%	96.50%	96.50%	96.50%
Reading	B >=	Grade 8	96.50%	96.50%	96.50%	96.50%
Reading	C >=	Grade HS	96.50%	96.50%	96.50%	96.50%
Math	A >=	Grade 4	96.50%	96.50%	96.50%	96.50%
Math	B >=	Grade 8	96.50%	96.50%	96.50%	96.50%
Math	C >=	Grade HS	96.50%	96.50%	96.50%	96.50%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison

attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE 's work to support all LEAs.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

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

Date:

01/10/2024

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	8,371	6,492	5,861
b. Children with IEPs in regular assessment with no accommodations (3)	2,348	1,002	1,344
c. Children with IEPs in regular assessment with accommodations (3)	5,437	4,846	3,723
d. Children with IEPs in alternate assessment against alternate standards	572	582	570

Data Source:

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

Date:

01/10/2024

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	8,374	6,493	5,861
b. Children with IEPs in regular assessment with no accommodations (3)	2,349	1,005	1,334
c. Children with IEPs in regular assessment with accommodations (3)	5,436	4,843	3,718
d. Children with IEPs in alternate assessment against alternate standards	572	581	571

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

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

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

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	8,357	8,371	99.41%	96.50%	99.83%	Met target	No Slippage
B	Grade 8	6,430	6,492	98.51%	96.50%	99.04%	Met target	No Slippage
C	Grade HS	5,637	5,861	94.42%	96.50%	96.18%	Did not meet target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	8,357	8,374	99.38%	96.50%	99.80%	Met target	No Slippage
B	Grade 8	6,429	6,493	98.54%	96.50%	99.01%	Met target	No Slippage
C	Grade HS	5,623	5,861	94.19%	96.50%	95.94%	Did not meet target	No Slippage

Regulatory Information

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

Public Reporting Information

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

The public reporting of IDEA B Data webpage (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>) provides information regarding the public reporting of special education data, SPP and information regarding Kentucky's IDEA State Application.

To access Math and Reading Assessment Participation and Performance for Grades 3, 4, 5, 6, 7, 8 and HS with and without accommodations on the alternate and regular assessments by State/District and Schools-

1. Go to the KDE's OSEEL Public Reporting of IDEA Part B Data page (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).
2. Click on the link that says, "Instructions for Navigating FFY22 Public Reporting of Assessment Data for Students with Disabilities". This will take you to instructions for navigating the data (https://education.ky.gov/specialed/excep/MonitoringnResults/Documents/FFY22_Public_Reporting_Instructions_For_OSEP.pdf).
3. The instructions include directions to open the link that says, "FFY2022 Assessment Participation for Students with Disabilities" (https://www.education.ky.gov/_layouts/download.aspx?SourceUrl=https://www.education.ky.gov/specialed/excep/MonitoringnResults/Documents/FFY2022_Assessment_Participation_for_SWDs.xlsx).
4. The instructions will walk the user through how to navigate the data file.

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response
3A - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2021	26.03%
Reading	B	Grade 8	2021	12.93%
Reading	C	Grade HS	2021	11.84%
Math	A	Grade 4	2021	20.59%
Math	B	Grade 8	2021	11.92%
Math	C	Grade HS	2021	8.53%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	27.03%	28.03%	29.03%	30.03%
Reading	B >=	Grade 8	13.93%	14.93%	15.93%	16.93%
Reading	C >=	Grade HS	12.84%	13.84%	14.84%	15.84%
Math	A >=	Grade 4	21.59%	22.59%	23.59%	24.59%
Math	B >=	Grade 8	12.92%	13.92%	14.92%	15.92%
Math	C >=	Grade HS	9.53%	10.53%	11.53%	12.53%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets.

Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

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

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	7,785	5,848	5,067
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	886	154	156
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,315	612	525

Data Source:

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

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	7,785	5,848	5,052
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	777	122	99
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,017	517	369

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

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	2,201	7,785	26.03%	27.03%	28.27%	Met target	No Slippage
B	Grade 8	766	5,848	12.93%	13.93%	13.10%	Did not meet target	No Slippage
C	Grade HS	681	5,067	11.84%	12.84%	13.44%	Met target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	1,794	7,785	20.59%	21.59%	23.04%	Met target	No Slippage
B	Grade 8	639	5,848	11.92%	12.92%	10.93%	Did not meet target	No Slippage
C	Grade HS	468	5,052	8.53%	9.53%	9.26%	Did not meet target	No Slippage

Regulatory Information

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

Public Reporting Information

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

1. Go to the KDE's OSEEL Public Reporting of IDEA Part B Data page (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).
2. Click on the link that says, "Instructions for Navigating FFY22 Public Reporting of Assessment Data for Students with Disabilities". This will take you to instructions for navigating the data (https://education.ky.gov/specialed/excep/MonitoringnResults/Documents/FFY22_Public_Reporting_Instructions_For_OSEP.pdf).
3. Follow the instructions under "Steps for finding public reporting of assessment proficiency of students with disabilities" in the document to view the proficiency rate for children with IEPs against regular academic achievement standards and the proficiency rate for children with IEPs against alternate academic achievement standards.

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

None

3B - OSEP Response

3B - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2021	27.10%
Reading	B	Grade 8	2021	34.22%
Reading	C	Grade HS	2021	23.32%
Math	A	Grade 4	2021	19.65%
Math	B	Grade 8	2021	20.04%
Math	C	Grade HS	2021	25.50%

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	28.10%	29.10%	30.10%	31.10%
Reading	B >=	Grade 8	35.22%	36.22%	37.22%	38.22%
Reading	C >=	Grade HS	24.22%	25.22%	26.22%	27.22%
Math	A >=	Grade 4	20.65%	21.65%	22.65%	23.65%
Math	B >=	Grade 8	21.04%	22.04%	23.04%	24.04%
Math	C >=	Grade HS	26.50%	27.50%	28.50%	29.50%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison

attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE 's work to support all LEAs.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

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

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	572	582	570
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	131	131	127

Data Source:

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

Date:

01/10/2024

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	572	581	571
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	117	151	171

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	131	572	27.10%	28.10%	22.90%	Did not meet target	Slippage
B	Grade 8	131	582	34.22%	35.22%	22.51%	Did not meet target	Slippage
C	Grade HS	127	570	23.32%	24.22%	22.28%	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

From FFY 2021 to FFY 2022, the proficiency rate for students in Grade 4 with IEPs against alternate academic achievement reading standards decreased by 4.20 percentage points resulting in slippage. The state investigated potential reasons for the decrease. The state found that test scores are reflective of the impact the COVID-19 pandemic had on Kentucky students. For Kentucky's alternate assessment students, the pandemic greatly affected this population as these students do well with repetition and consistency. The pandemic interrupted this one-on-one time with teachers as well as the consistency and repetition these students need to reach proficiency. Many students taking the AA-AAAS moved into a virtual setting for learning due to health concerns which had an impact on the type of instruction teachers were able to provide. In addition, teacher shortages and chronic absenteeism have impacted student outcomes. With student chronic absenteeism at 29.8% across the state, it is difficult for teachers to provide instruction to students.

Provide reasons for slippage for Group B, if applicable

From FFY 2021 to FFY 2022, the proficiency rate for students in Grade 8 with IEPs against alternate academic achievement reading standards decreased by 11.71 percentage points resulting in slippage. The state investigated potential reasons for the decrease. The state found that test scores are reflective of the impact the COVID-19 pandemic had on Kentucky students. For Kentucky's alternate assessment students, the pandemic greatly affected this population as these students do well with repetition and consistency. The pandemic interrupted this one-on-one time with teachers as well as the consistency and repetition these students need to reach proficiency. Many students taking the AA-AAAS moved into a virtual setting for learning due to health concerns which had an impact on the type of instruction teachers were able to provide. In addition, teacher shortages and chronic absenteeism have impacted student outcomes. With student chronic absenteeism at 29.8% across the state, it is difficult for teachers to provide instruction to students.

Provide reasons for slippage for Group C, if applicable

From FFY 2021 to FFY 2022, the proficiency rate for students in high school with IEPs against alternate academic achievement reading standards decreased by 1.04 percentage points resulting in slippage. The state investigated potential reasons for the decrease. The state found that test scores are reflective of the impact the COVID-19 pandemic had on Kentucky students. For Kentucky's alternate assessment students, the pandemic greatly affected this population as these students do well with repetition and consistency. The pandemic interrupted this one-on-one time with teachers as well as the consistency and repetition these students need to reach proficiency. Many students taking the AA-AAAS moved into a virtual setting for learning due to health concerns which had an impact on the type of instruction teachers were able to provide. In addition, teacher shortages and chronic absenteeism have impacted student outcomes. With student chronic absenteeism at 29.8% across the state, it is difficult for teachers to provide instruction to students.

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	117	572	19.65%	20.65%	20.45%	Did not meet target	No Slippage
B	Grade 8	151	581	20.04%	21.04%	25.99%	Met target	No Slippage
C	Grade HS	171	571	25.50%	26.50%	29.95%	Met target	No Slippage

Provide reasons for slippage for Group A, if applicable

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.

1. Go to the KDE's OSEEL Public Reporting of IDEA Part B Data page (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).
2. Click on the link that says, "Instructions for Navigating FFY22 Public Reporting of Assessment Data for Students with Disabilities". This will take you to instructions for navigating the data (https://education.ky.gov/specialed/excep/MonitoringnResults/Documents/FFY22_Public_Reporting_Instructions_For_OSEP.pdf).
3. Follow the instructions under "Steps for finding public reporting of assessment proficiency of students with disabilities" in the document to view the proficiency rate for children with IEPs against regular academic achievement standards and the proficiency rate for children with IEPs against alternate academic achievement standards.

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

3C - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2021	20.11
Reading	B	Grade 8	2021	31.22
Reading	C	Grade HS	2021	33.83
Math	A	Grade 4	2021	18.84
Math	B	Grade 8	2021	24.52
Math	C	Grade HS	2021	29.14

Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A <=	Grade 4	19.61	19.11	18.61	18.11
Reading	B <=	Grade 8	30.72	30.22	29.72	29.22
Reading	C <=	Grade HS	33.33	32.83	32.33	31.83
Math	A <=	Grade 4	18.34	17.84	17.34	16.84
Math	B <=	Grade 8	24.02	23.52	23.02	22.52
Math	C <=	Grade HS	28.64	28.14	27.64	27.14

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic

backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/except/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

FFY 2022 Data Disaggregation from EDFacts

Data Source:

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

Date:

01/10/2024

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	46,933	49,133	49,284
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	7,785	5,848	5,067
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	20,653	20,868	22,110
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,782	671	574
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	886	154	156
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,315	612	525

Data Source:

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

Date:

01/10/2024

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	47,332	49,502	49,531
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	7,785	5,848	5,052
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	18,559	17,036	16,606
d. All students in regular assessment with accommodations scored at or above proficient against grade level	1,452	607	412
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	777	122	99
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,017	517	369

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

FFY 2022 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	28.27%	47.80%	20.11	19.61	19.53	Met target	No Slippage
B	Grade 8	13.10%	43.84%	31.22	30.72	30.74	Did not meet target	No Slippage
C	Grade HS	13.44%	46.03%	33.83	33.33	32.59	Met target	No Slippage

FFY 2022 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	23.04%	42.28%	18.84	18.34	19.23	Did not meet target	No Slippage
B	Grade 8	10.93%	35.64%	24.52	24.02	24.71	Did not meet target	No Slippage
C	Grade HS	9.26%	34.36%	29.14	28.64	25.09	Met target	No Slippage

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

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

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

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

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

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

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

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

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

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2017	5.85%

FFY	2017	2018	2019	2020	2021
Target <=	1.14%	1.14%	1.14%	5.88%	5.88%
Data	5.85%	5.88%	2.92%	3.53%	1.78%

Targets

FFY	2022	2023	2024	2025
Target ≤	5.65%	5.41%	4.94%	4.00%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was

comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

FFY 2022 SPP/APR Data

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

YES

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

4

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
12	169	1.78%	5.65%	7.10%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

From FFY 2021 to FFY 2022 the percent of LEAs that had 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 increased by 5.32 percentage points resulting in slippage. The state investigated potential reasons for the increase by comparing and analyzing data as well as reviewing root cause analyses completed by LEAs. During the 2020-2021 school year, many LEAs were providing virtual instruction when quarantining was mandated due to COVID-19. Virtual instruction led to fewer student removals. In the 2021-2022 school year Kentucky LEAs primarily returned to in person learning. LEAs reported that upon the return to in person learning they faced several obstacles that led to student removals including an increase in staff turnover which resulted in the need for new training on manifestation determination and positive behavioral supports, increased social and emotional issues among children as a result of being isolated during COVID-19 and lack of communication between administrators and IEP teams.

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

A Kentucky LEA is found to have a significant discrepancy under Indicator 4A if the LEA subjected students with disabilities to out-of-school removals (suspensions or expulsions) for more than 10 days during a school year at a rate that is at least three times higher than the state rate for these types of removals. For the 2021-2022 school year, the state rate was 0.45%.

The out-of-school removal rate is calculated for each LEA based on its local discipline data and the number of students with IEPs. Kentucky uses a minimum n-size of 50 students with disabilities enrolled in the LEA. During the 2021-2022 school year, there were 173 LEAs in Kentucky. Of the 173 LEAs, four did not meet the n-size requirement of 50 students with disabilities. Therefore, four LEAs were excluded from the calculation based on the n-size requirement.

For FFY 2022, using 2021-2022 data, 12 LEAs, out of 169 that met the n-size, had discrepancies that were at least three times higher than the state rate of 0.45%.

Provide additional information about this indicator (optional)

The KSB and the KSD are included in the denominator. Although all students at the KSB and the KSD are students with disabilities, there was a comparison group for this indicator. Calculations for Indicator 4A compare the disciplinary rates for students with disabilities to the state rate, rather than for students without disabilities. Therefore, the KSB and the KSD are not excluded from the calculations based on the comparison group.

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

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

The KDE analyzed 618 discipline data for students with disabilities and IDEA December 1 Child Count data to compare the LEA rate of suspensions/expulsions for children with IEPs to the state rate. The KDE then calculated each LEA's data for significant discrepancy. The KDE contacted all LEAs identified as having a significant discrepancy in the rates of suspension and expulsion greater than 10 school days in a school year for students with IEPs via a notification letter. Following notification, the KDE conducted desk reviews that aligned with the requirements of 34 C.F.R. §300.170(b). The KDE required LEAs to provide additional data and information regarding the LEA's policies, procedures and practices. The KDE examined records of students to determine whether the LEA followed applicable IDEA requirements and to determine if the LEA's policies, procedures or practices comply with the requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports and procedural safeguards. The KDE staff completed student-level record reviews for a sample of students from each LEA. The KDE reviewed due process files from the 2021-2022 school year, including IEPs, conference summaries, manifestation determinations, functional behavior assessments (FBAs), behavior intervention plans (BIPs), attendance records, PBIS, enrollment records and behavior detail reports.

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

If YES, select one of the following:

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

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

The KDE identified noncompliance in 12 LEAs and identified all students with disabilities in those LEAs who were subject to out-of-school removals of more than 10 days. The KDE reviewed a sample of student records. When non-compliance was identified by the KDE, a written Report of Findings was issued to the LEA. The report included the LEA's percentage of suspensions and expulsions, the statewide rate for comparison and findings of student-specific and systemic noncompliance.

The LEA, with assistance as needed from the SERTAC and the KDE, reviewed student-specific and systemic noncompliance items identified in the Report of Findings and conducted a root cause analysis to determine why problem areas existed. The results of the root cause analyses were utilized to develop meaningful CAPs which included action steps to ensure policies, procedures and practices were revised to comply with IDEA requirements. The LEAs will be required to correct all individual cases of noncompliance as part of their CAP. The KDE will ensure all noncompliance is corrected as soon as possible but not longer than one year from the date of notification of the noncompliance.

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

4A - Prior FFY Required Actions

None

4A - OSEP Response

4A - Required Actions

The State must report, in the FFY 2023 SPP/APR, on the correction of noncompliance that the State identified in FFY 2022 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	2.30%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	8.00%	4.00%	2.29%	2.30%	0.00%

Targets

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

FFY 2022 SPP/APR Data

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

YES

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

0

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell-size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
26	16	173	0.00%	0%	9.25%	Did not meet target	Slippage

Provide reasons for slippage, if not applicable

From FFY 2021 to FFY 2022 the percent of LEAs that had a significant discrepancy by race/ethnicity, 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 increased by 9.25 percentage points resulting in slippage. The state investigated potential reasons for the increase by comparing and analyzing data as well as reviewing root cause analyses completed by LEAs. During the 2020-2021 school year, many LEAs were providing virtual instruction when quarantining was mandated due to COVID-19. Virtual instruction led to fewer student removals. In the 2021-2022 school year Kentucky LEAs primarily returned to in person learning. LEAs reported that upon the return to in person learning they faced several issues that led to student removals including an increase in staff turnover which resulted in the need for new training on manifestation determination and positive behavioral supports, increased social and emotional issues among children as a result of being isolated during COVID-19 and lack of communication between administrators and IEP teams.

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

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

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

A Kentucky LEA is found to have a significant discrepancy under Indicator 4B if the following two criteria are met:

1. The LEA subjected students with disabilities by race and ethnicity to out-of-school removals (suspensions or expulsions) for more than 10 days during a school year at a rate that is at least three times higher than the state average rate of 0.45% for these types of removals; and
2. The LEA has at least 10 students with disabilities in the racial or ethnic category being examined.

The out-of-school removal rate to determine significant discrepancy is calculated for each LEA based on its local discipline data and the number of students with IEPs. Kentucky uses a minimum n-size of 10 students with disabilities in a specific race/ethnicity category enrolled in the LEA. The state compared each LEA's rate for students with disabilities by race/ethnicity to the state's threshold of three times the state's rate for students with disabilities to determine if significant discrepancy(ies) existed. The threshold of three times higher than the state rate of 0.45% is used for all races and ethnicities examined. The same threshold is used across all racial/ethnic categories.

During the 2021-2022 school year, there were 173 LEAs in Kentucky. All 173 LEAs met the n-size.

Provide additional information about this indicator (optional)

The KSB and the KSD are included in the denominator. Although all students at the KSB and the KSD are students with disabilities, there was a comparison group for this indicator. Calculations for Indicator 4B compare the disciplinary rates for students with disabilities to the state rate, rather than for students without disabilities. Therefore, the KSB and the KSD are not excluded from the calculations based on the comparison group.

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

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

The KDE analyzed 618 discipline data for students with disabilities and IDEA December 1 Child Count data to compare the LEA rate of suspensions/expulsions for children with IEPs in specific racial/ethnic categories to the state rate. The KDE then calculated each LEA's data for significant discrepancy. The KDE contacted all LEAs identified as having a significant discrepancy in the rates of suspension and expulsion greater than 10 school days in a school year for students in specific racial/ethnic groups with IEPs via a notification letter. Following notification, the KDE conducted desk reviews that aligned with the requirements of 34 C.F.R §300.170(b). The KDE required LEAs to provide additional data and information regarding the LEA's policies, procedures and practices. The KDE examined records of students to determine whether the LEA followed applicable IDEA requirements and to determine if the LEA's policies, procedures or practices comply with the requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports and procedural safeguards. The KDE staff completed student-level record reviews for a sample of students from each LEA. The KDE reviewed due process files from the 2021-2022 school year, including IEPs, conference summaries, manifestation determinations, FBAs, BIPs, attendance records, PBIS, enrollment records and behavior detail reports.

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

If YES, select one of the following:

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

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

The KDE identified noncompliance in 16 LEAs and identified all students with disabilities in those LEAs in specific racial/ethnic categories who were subject to out-of-school removals of more than 10 days. The KDE reviewed a sample of student records. When noncompliance was identified by the KDE, a written Report of Findings was issued to the LEA. The report included the LEA's percentage of suspensions and expulsions, the statewide rate for comparison and findings of student-specific and systemic noncompliance.

The LEA, with assistance as needed from the SERTAC and the KDE, reviewed student-specific and systemic noncompliance items identified in the Report of Findings and conducted a root cause analysis to determine why problem areas existed. The results of the root cause analyses were utilized to develop meaningful CAPs which included action steps to ensure policies, procedures and practices were revised to comply with IDEA requirements. The LEAs will be required to correct all individual cases of noncompliance as part of their CAP. The KDE will ensure all noncompliance is corrected as soon as possible but not longer than one year from the date of notification of the noncompliance.

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

4B - Prior FFY Required Actions

None

4B - OSEP Response

4B- Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the districts identified with noncompliance in FFY 2022 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions

that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2017	2018	2019	2020	2021
A	2020	Target >=	71.80%	71.80%	71.80%	75.00%	74.99%
A	74.99%	Data	73.43%	73.57%	73.90%	75.00%	75.54%
B	2020	Target <=	8.70%	8.70%	8.70%	8.38%	8.38%
B	8.38%	Data	8.27%	8.48%	8.58%	8.38%	8.33%
C	2020	Target <=	1.90%	1.90%	1.90%	1.55%	1.55%
C	1.55%	Data	1.78%	1.71%	1.82%	1.55%	1.75%

Targets

FFY	2022	2023	2024	2025
Target A >=	75.24%	75.49%	76.00%	77.00%
Target B <=	8.15%	7.91%	7.44%	6.50%
Target C <=	1.51%	1.48%	1.40%	1.25%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician

identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/speciald/except/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	98,075
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	74,652

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	8,181
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	422
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	257
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	857

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

NO

FFY 2022 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	74,652	98,075	75.54%	75.24%	76.12%	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	8,181	98,075	8.33%	8.15%	8.34%	Did not meet 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]	1,536	98,075	1.75%	1.51%	1.57%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

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

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

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

Part	FFY	2017	2018	2019	2020	2021
A	Target >=	64.00%	64.00%	64.00%	76.87%	76.87%
A	Data	69.27%	70.47%	71.24%	76.87%	76.05%
B	Target <=	6.00%	6.00%	6.00%	4.13%	4.13%
B	Data	3.48%	4.52%	3.89%	4.13%	6.41%
C	Target <=				0.27%	0.27%
C	Data				0.27%	0.30%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets.

Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

Targets

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

Inclusive Targets

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

Target Range not used

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

Part	Baseline Year	Baseline Data
A	2020	76.87%
B	2020	4.13%
C	2020	0.27%

Inclusive Targets – 6A, 6B

FFY	2022	2023	2024	2025
Target A >=	77.14%	77.40%	77.94%	79.00%
Target B <=	4.05%	3.97%	3.82%	3.50%

Inclusive Targets – 6C

FFY	2022	2023	2024	2025
Target C <=	0.27%	0.27%	0.26%	0.25%

Prepopulated Data
Data Source:

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

Date:

08/30/2023

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	3,588	5,691	2,395	11,674
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	2,706	4,215	1,781	8,702
b1. Number of children attending separate special education class	277	445	171	893
b2. Number of children attending separate school	11	18	5	34
b3. Number of children attending residential facility	2	1	0	3
c1. Number of children receiving special education and related services in the home	6	6	4	16

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

NO

FFY 2022 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	8,702	11,674	76.05%	77.14%	74.54%	Did not meet target	Slippage

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B. Separate special education class, separate school or residential facility	930	11,674	6.41%	4.05%	7.97%	Did not meet target	Slippage
C. Home	16	11,674	0.30%	0.27%	0.14%	Met target	No Slippage

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

To understand the slippage better, the state investigated potential reasons for the increase by comparing and analyzing data from FFY 2020 to FFY 2022. A root cause analysis completed by the state identified two factors impacting the data:

- 1) Enrollment of preschool students with disabilities increased throughout the state, while enrollment of students without disabilities decreased throughout the state;
- 2) Five LEAs reported a significant increase of preschool students in Indicator 6B, disproportionately impacting the overall percentage.

While more preschool students enrolled in state-funded preschool during the 2022-2023 school year, enrollment has not yet returned to pre-pandemic levels. Kentucky is reporting 10.93% fewer overall preschool students in 2022 than in 2019. Kentucky enrolls students without disabilities in early childhood programs based on income eligibility. For the 2022-2023 school year, there were 11.28% fewer students without disabilities enrolled in preschool programs than in the year before the COVID-19 pandemic. While students without disabilities reduced in number, students with disabilities increased 12.86% during the same school year. In Kentucky, a preschool program is coded as a separate classroom if 50% or more of the students in the classroom have an IEP. For FFY 2022, the increased number of students with disabilities resulted in more classrooms being coded as separate classes. Additionally, five LEAs reported a significant increase of preschool students in Indicator 6B, disproportionately impacting the overall percentage.

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

To understand the slippage better, the state investigated potential reasons for the increase by comparing and analyzing data from FFY 2020 to FFY 2022. A root cause analysis completed by the state identified two factors impacting the data:

- 1) Enrollment of preschool students with disabilities increased throughout the state, while enrollment of students without disabilities decreased throughout the state;
- 2) Five LEAs reported a significant increase of preschool students in Indicator 6B, disproportionately impacting the overall percentage.

While more preschool students enrolled in state-funded preschool during the 2022-2023 school year, enrollment has not yet returned to pre-pandemic levels. Kentucky is reporting 10.93% fewer overall preschool students in 2022 than in 2019. Kentucky enrolls students without disabilities in early childhood programs based on income eligibility. For the 2022-2023 school year, there were 11.28% fewer students without disabilities enrolled in preschool programs than in the year before the COVID-19 pandemic. While students without disabilities reduced in number, students with disabilities increased 12.86% during the same school year. In Kentucky, a preschool program is coded as a separate classroom if 50% or more of the students in the classroom have an IEP. For FFY 2022, the increased number of students with disabilities resulted in more classrooms being coded as separate classes. Additionally, five LEAs reported a significant increase of preschool students in Indicator 6B, disproportionately impacting the overall percentage.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

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

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2017	2018	2019	2020	2021
A1	2013	Target >=	50.00%	50.50%	50.50%	30.41%	30.41%
A1	49.29%	Data	48.98%	41.84%	40.18%	30.41%	73.21%

A2	2013	Target >=	40.00%	40.50%	40.50%	37.18%	37.18%
A2	39.11%	Data	44.50%	45.30%	44.50%	37.18%	27.14%
B1	2013	Target >=	68.00%	68.50%	68.50%	57.12%	57.12%
B1	67.42%	Data	67.95%	65.97%	68.40%	57.12%	73.09%
B2	2013	Target >=	40.50%	41.00%	41.00%	39.72%	39.72%
B2	39.85%	Data	45.49%	47.78%	48.45%	39.72%	29.03%
C1	2013	Target >=	51.50%	52.00%	52.00%	42.51%	42.51%
C1	50.67%	Data	55.10%	52.55%	53.18%	42.51%	77.00%
C2	2013	Target >=	36.50%	37.00%	37.00%	35.37%	35.37%
C2	35.67%	Data	42.75%	42.74%	43.05%	35.37%	26.42%

Targets

FFY	2022	2023	2024	2025
Target A1 >=	32.92%	35.43%	40.46%	50.50%
Target A2 >=	38.35%	39.51%	41.84%	46.50%
Target B1 >=	59.48%	61.84%	66.56%	76.00%
Target B2 >=	41.07%	42.42%	45.11%	50.50%
Target C1 >=	44.07%	45.63%	48.76%	55.00%
Target C2 >=	36.57%	37.78%	40.19%	45.00%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

FFY 2022 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

3,005

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	64	2.13%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	664	22.10%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	653	21.73%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,201	39.97%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	423	14.08%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,854	2,582	73.21%	32.92%	71.80%	Met target	No Slippage

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	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>	1,624	3,005	27.14%	38.35%	54.04%	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	67	2.23%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	689	22.93%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	606	20.17%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,243	41.36%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	400	13.31%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: $(c+d)/(a+b+c+d)$</i>	1,849	2,605	73.09%	59.48%	70.98%	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>	1,643	3,005	29.03%	41.07%	54.68%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	71	2.36%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	603	20.07%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	459	15.27%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,221	40.63%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	651	21.66%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who	1,680	2,354	77.00%	44.07%	71.37%	Met target	No Slippage

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
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>							
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>	1,872	3,005	26.42%	36.57%	62.30%	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 (COS) process? (yes/no)

YES

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

LEAs choose from an approved list of five continuous assessments for this indicator: Work Sampling System, 5th Edition, Assessment, Evaluation and Programming System for Infants and Children, 3rd Edition, Teaching Strategies Gold, Carolina Curriculum Assessment for Children with Special Need or The COR Advantage from High Scope.

Continuous assessment information is used, along with input from a parent/caregiver, teaching staff and related service providers to triangulate ratings for the Child Outcome Summary (COS) Process. The COS ratings are collected in Kentucky's state student information system. Reports are taken from IC and the information is put into the Early Childhood Outcome (ECO) calculator created by The Early Childhood Technical Assistance Center. The ECO is used to process the data into a usable format for reporting outcomes of preschool students with disabilities.

Provide additional information about this indicator (optional)

To maximize data quality and usefulness, Kentucky is in year two of transitioning from using an outside agency for Indicator 7 data collection to an internal process using the COS process and the statewide student information system, IC. The KDE reported FFY 2021 outcomes based on a subset of the raw data from six LEAs. For FFY 2022, the KDE has access to COS data from all Kentucky LEAs for all exiting four year old students. In FFY 2023, the KDE will have collected entry and exit data for a longitudinal data set that includes three and four year old students from entry to exit of the preschool program. At that time, with a full data set, the KDE will engage stakeholders to re-set baseline and targets for Indicator 7.

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/except/MonitoringResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

Historical Data

Baseline Year	Baseline Data
2013	80.45%

FFY	2017	2018	2019	2020	2021
Target >=	80.85%	80.95%	80.95%	80.45%	80.45%
Data	88.94%	89.90%	90.04%	89.10%	92.10%

Targets

FFY	2022	2023	2024	2025
Target >=	81.89%	83.34%	86.23%	92.00%

FFY 2022 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
16,373	17,607	92.10%	81.89%	92.99%	Met target	No Slippage

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

At the beginning of the six-month survey window, the KDE sends an email to all LEAs within the state as part of the process to obtain data for Indicator 8. The email is sent to both DoSEs and Preschool Coordinators. The email includes information and directions for the survey, as well as a sample parent letter explaining the purpose of the survey and a link to the electronic survey. The email requests that LEAs share the survey link and the letter with all parents whose children had IEPs within the LEA.

The survey is intended for parents of both preschool and school-age students with IEPs. While the results can be broken down between the two groups, they are not separate surveys and results are automatically combined.

The number of parents to whom the surveys were distributed.

109,672

Percentage of respondent parents

16.05%

Response Rate

FFY	2021	2022
Response Rate	14.65%	16.05%

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

For Indicator 8, the state used the representativeness calculator developed by the National Post School Outcomes Center. The state considers each sub-group to be representative of the population if its percentage of respondents is within +/- 3% of the percentage of the population.

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

Kentucky analyzed representativeness using race/ethnicity and geographical region. The following subgroups were over or underrepresented by more than 3 percentage points from population figures:

Race/Ethnicity:

White (overrepresented by 9.2 percentage points);
Black or African-American (underrepresented by 5.3 percentage points);
Hispanic (underrepresented by 4.2 percentage points)

SERTAC region:

Kentucky Educational Development Cooperative (overrepresented by 4.9 percentage points);
Kentucky Valley Education Cooperative (overrepresented by 10.2 percentage points);
Southeast/Southcentral Education Coop (underrepresented by 9.1 percentage points);
Western Kentucky Education Coop (overrepresented by 3.3 percentage points);
Greater Louisville Education Coop (underrepresented by 7 percentage points).

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

NO

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

The KDE will develop a team to review current data, complete a root cause analysis and develop an action plan. This team will include, among others, a DEIB consultant to provide guidance on how to increase responses from underrepresented populations. The KDE will continue to review data on a routine basis throughout the survey window, monitoring response rates by LEA and SERTAC regions. The KDE will provide technical assistance and support to LEAs, SERTACS, RTCs and other stakeholders accordingly.

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 KDE will develop a team to review current data, conduct a root cause analysis and develop an action plan. This team will include, among others, a DEIB consultant to provide guidance on how to increase responses from underrepresented populations. The KDE will continue to review data on a routine basis throughout the survey window, monitoring response rates by LEAs and SERTAC regions. The KDE will provide technical assistance and support to LEAs, SERTACS, RTCs and other stakeholders accordingly. Data will be shared in the quarterly OSEEL newsletter throughout the survey

window.

The OSEEL will also develop a brief video that highlights the importance of the survey, ways to increase response rates and the value of the survey data. The video will be shared with LEAs, SERTACs and RTCs at the beginning of the survey window.

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.

To assess the degree to which nonresponse bias impacted results for Indicator 8, the HDI conducted one-way Analysis Of Variance (ANOVA) tests with a dichotomous variable indicating membership in each underrepresented group as an independent variable (i.e., Hispanic vs. non-Hispanic) and the Indicator 8 score as the dependent variable. As noted below, the underrepresented groups were parents of African-American or Black students, parents of Hispanic/Latino students, and parents of students going to school in the Southeast/Southcentral (SESC) and Greater Louisville Education Cooperative (GLEC) regions. This method functions as a difference of means test, although it does not compare two subgroups to one another, but one subgroup to all others.

Parents of Black students had a mean score of 90.7%, significantly lower than non-Black students (93.1%). The F-statistic for this parameter is 7.29 yielding a p-value of <.01. Nonresponse bias by parents of Black students created a significant impact on overall results. Parents of Hispanic students had a mean score of 92.3%, slightly lower than non-Hispanic (93.0%). The F-statistic for this parameter is 0.31 yielding a p-value that is not statistically significant. Nonresponse bias by parents of Hispanic students did not create a significant impact on overall results.

Parents of students in the GLEC region had a mean score of 84.4%, significantly lower than the mean for other regions (93.4%). The F-statistic for this model was 92.9, yielding a p-value of <.01. Nonresponse bias by parents of students in the GLEC region created a significant impact on overall results. Parents of students in the SESC region had a mean score of 93.8%, the mean for other regions was (93.0%). The F-statistic for this model was 0.88, yielding an insignificant p-value. Nonresponse bias by parents of students in SESC did not create a significant impact on overall results.

The KDE's analysis of the response rate data demonstrated discrepancies in Black/African American families as well as families in the GLEC region. To reduce nonresponse bias and promote responses, the KDE routinely provided reports on participation rate data to the SERTAC regions. Following those reports, the SERTACs encouraged participation within the LEAs in their regions. Previous feedback and anecdotal data from the SERTACs and LEAs indicated a need for additional language options for the survey, as well as access to an improved printer-friendly version of the survey, to support families in underrepresented regions and groups. The KDE responded by providing an improved printer-friendly version of the survey and began analyzing data to determine additional languages that may be translated in future surveys. The response rate has grown each of the past three years but may not have grown among all ethnicities equally.

Sampling Question	Yes / No
Was sampling used?	NO

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

Provide additional information about this indicator (optional)

8 - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

As noted above, the State reported on the representativeness of the data in the Indicator 8 section entitled, "Include the State's analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services." Kentucky analyzed representativeness using race/ethnicity and geographical region. The following subgroups were over or underrepresented by more than 3 percentage points from population figures:

Race/Ethnicity: White (overrepresented by 9.2 percentage points); Black or African-American (underrepresented by 5.3 percentage points); Hispanic (underrepresented by 4.2 percentage points)

SERTAC region: Kentucky Educational Development Cooperative (overrepresented by 4.9 percentage points); Kentucky Valley Education Cooperative (overrepresented by 10.2 percentage points); Southeast/Southcentral Education Coop (underrepresented by 9.1 percentage points); Western Kentucky Education Coop (overrepresented by 3.3 percentage points); Greater Louisville Education Coop (underrepresented by 7 percentage points).

Survey result analyses indicated that families identifying as Black/African American and Hispanic/Latino were less likely to complete the survey, as were families of students living in SESC and GLEC regions. In contrast, White families and families residing in the KEDC, KVEC and WKEC regions were more likely to respond to the survey. The State reported on the actions it is taking to address representativeness in the Indicator 8 section entitled, "Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics." To ensure that future response data are more representative, the KDE will develop a team to review current data, complete a root cause analysis and develop an action plan. This team will include a DEIB consultant to provide guidance on how to increase responses from underrepresented groups. The KDE will continue to review data routinely throughout the survey window and monitor response rates by LEAs.

8 - OSEP Response

8 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of children receiving special education services.

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group. Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

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

Targets must be 0%.

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	1.17%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	1.17%	0.58%

Targets

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

FFY 2022 SPP/APR Data

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

YES

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

2

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1	0	171	0.58%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

The KDE uses the “risk ratio” methodology to determine disproportionate representation. This methodology identifies LEAs that have disproportionate representation in the identification of students in particular racial or ethnic groups. Disproportionate representation exists under Indicator 9 in the identification of students with disabilities when the following conditions exist:

- There are at least 30 students in the racial or ethnic group being examined who are enrolled in the LEA;
- There are at least 10 students in the racial or ethnic group being examined who were identified as eligible for special education; and
- The rate at which students in the racial or ethnic group being examined meets or exceeds the threshold of 2.25 times or greater than the rate of students in all other races who are identified.

There were 171 LEAs that met the n-size for Indicator 9. One year of data was used to review LEAs for Indicator 9.

For Indicator 9, data are reviewed in the rate of identification of students individually for each of the seven federal racial or ethnic groups as compared to the rate of identification of students in all other racial or ethnic groups (i.e., the rate of white students compared to the rate of non-white students; rate of Hispanic students to the rate of non-Hispanic students). “Risk” for Indicator 9 means the percentage of the LEAs’ students in a specific racial or ethnic group who receive special education and related services.

The percentage is determined by taking the number of students in each specific racial or ethnic group identified as eligible under the IDEA and dividing it by the total number of enrolled students from that racial or ethnic group. These data come from the LEA’s December 1 Child Count under the IDEA and the enrollment data for all students as reported on the same year’s membership data as of December 1. Below is an example, not based on actual student or school district data, of calculating risk for Asian students in Indicator 9:

- Sixty-three Asian students are reported on the December 1 Child Count under the IDEA in the Blue County School District.
- A total of 270 Asian students are enrolled in the Blue County School District.
- The risk for an Asian student identified for special education in the Blue County School District is 63 divided by 270 equals 0.233 or 23.3%. (63 Asian special education students divided by 270 Asian students enrolled in the LEA, multiplied by 100 to obtain a percentage of 23.3%.)

Risk ratio methodology requires that the risk for the specific race or ethnic group is compared to the risk of students not of that race or ethnic group to be identified. Below is an example, not based on actual student or school district data, of calculating the risk of the comparison group (non-Asian students) for Indicator 9:

- Six hundred non-Asian students are reported on the December 1 Child Count under the IDEA in the Blue County School District.
- A total of 6,000 non-Asian students are enrolled in the Blue County School District.
- The risk for non-Asian students identified for special education in the Blue County School District is 600 divided by 6,000 equals 0.100 or 10.0%. (600 non-Asian special education students divided by 6,000 non-Asian students enrolled in the LEA, multiplied by 100 to obtain a percentage of 10.0%).

The risk ratio methodology compares the risk of students from each racial or ethnic group to the risk of all other students not in the same race or ethnic group enrolled in the LEA. Thus, the risk ratio considers the question: What is the ratio of the risk for a student in a specific racial or ethnic group to be identified for special education services compared to the risk for all other students in the LEA to be identified for special education?

To determine the risk ratio in this example, not based on actual student or school district data, divide the risk of Asian students identified as eligible for special education (23.3%) by the risk of all other students identified as eligible for special education (10.0%).

Below is an example, not based on actual student or school district data, of risk ratio comparison for Indicator 9:

- The risk for identifying Asian students from the example above is 0.233 or 23.3%.
- The risk of the comparison group of all non-Asian students is 0.100 or 10.0%.
- The risk ratio is calculated by dividing the risk of the target group (Asian) by the risk of the comparison group (non-Asian students).
- Thus, 23.3% divided by 10.0% or 0.233 divided by 0.100 results in the risk ratio for Asian students of 2.33. This means Asian students are 2.33 times more likely than non-Asian students to be identified as eligible for special education.

In this example, not based on actual student or school district data, because the LEA has a risk ratio of 2.33 for Asian students, which is greater than the threshold of 2.25, the KDE must examine data from the LEA specific to the identification of students for special education to determine if the

disproportionate representation is the result of inappropriate policies, procedures or practices. If the KDE determines the disproportionate identification of Asian students is due to inappropriate policies, procedures or practices, the LEA is identified under Indicator 9 as having disproportionate representation of Asian students in special education and related services that is the result of inappropriate identification.

Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

The KDE analyzed LEA child count data located in the statewide student information system. The KDE notified districts that were identified as having disproportionate representation in specific racial/ethnic categories. Any LEA identified with disproportionate representation with a risk ratio of 2.25 or greater was selected for a desk review. Following the LEA notification, the KDE conducted desk reviews of student due process records and reviewed evaluation and eligibility determinations per racial and ethnic groups. Additionally, the KDE reviewed LEA policies, procedures and practices as part of the desk review.

The KDE used the Compliance Record Review document to determine if the students had been appropriately identified under the IDEA. When the KDE found, through the desk review, that students had been inappropriately identified, the KDE cited the LEA as having disproportionate representation due to inappropriate identification. The KDE's Compliance Record Review Document can be found at (https://education.ky.gov/specialed/except/forms/Documents/Compliance_Record_Review.pdf).

Out of 171 LEAs, one LEA was identified as having disproportionate representation and was reviewed. Based on the KDE's desk review findings, no LEAs were cited as having disproportionate representation due to inappropriate policies, procedures or practices.

Provide additional information about this indicator (optional)

For this indicator, there are 171 LEAs. Two LEAs were excluded from the calculation. The KSB and the KSD were excluded from the denominator because there is no comparison group for these schools as all students attending the KSB and the KSD are students with disabilities.

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

For FFY 2021, one LEA was identified for one student-specific finding of noncompliance under Indicator 9. The LEA, with assistance as needed from the SERTAC and the KDE, reviewed the student-specific noncompliance items identified in the written Report of Findings. The LEA developed a CAP to address the noncompliance of the student-specific file.

The LEA conducted a root cause analysis to determine why the noncompliance occurred. The results of the root cause analysis found that due to a shortage of qualified staff, the LEA contracted with a school psychologist from out of state who did not document all required information as part of the student's assessment and eligibility. The KDE identified any noncompliant policies, procedures or practices in the written Report of Findings for the LEA. The LEA was required to change any noncompliant policies, procedures or practices as part of their CAP.

The KDE ensured all noncompliance was corrected as soon as possible, but no more than one year from the date of notification of the noncompliance. The LEA was required to submit CAP status reports to the KDE on a quarterly basis.

To verify the LEA was correctly implementing regulatory requirements, the KDE reviewed changes the LEA made to the noncompliant policies, procedures, or practices, reviewed updated data from the Statewide Student Information System and determined the LEA was correctly implementing regulatory requirements at 100% compliance consistent with OSEP QA 23-01 and specifically Question B-10. Additionally, the KDE ensured the LEA corrected the individual student noncompliance through the CAP process as well as ensured that all services were provided to the student. With verification of the CAP completion, verification that each individual case of noncompliance was corrected to 100% compliant, and all updated data from the Statewide Student Information System verified as 100% compliant, the KDE reported the noncompliance as corrected and closed the CAP.

The one LEA identified for FFY 2021 successfully implemented the regulatory requirements at 100% compliance and closed their CAP.

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

For FFY 2021, one LEA was identified for one student-specific finding as having noncompliant practices under Indicator 9. The KDE reviewed the student due process record and issued a written Report of Findings including student-specific corrective action. The LEA developed a CAP to address noncompliance and included the correction of the student-specific file as part of the CAP activities.

The LEA, with assistance as needed from the SERTACs and the KDE, reviewed the student-specific items identified in the written Report of Findings. The KDE required all student-level noncompliance to be corrected as soon as possible but not more than one year from the date of notification of the noncompliance. The LEA was required to submit CAP status reports to the KDE on a quarterly basis.

The KDE provided guidance and technical assistance and reviewed the evidence submitted to verify the implementation and completion of student-specific corrections and CAP activities. The KDE reviewed the evidence and verified that the one LEA had corrected the individual case of noncompliance.

With verification of CAP completion and all updated data verified as 100% compliant in the areas identified, the KDE reported the noncompliance as corrected. The KDE determined the one LEA corrected the individual case of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

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

9 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2021 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. The State must demonstrate, in the FFY 2022 SPP/APR, that the district identified in FFY 2021 with disproportionate representation of racial and ethnic groups in special education and related services that were the result of inappropriate identification is in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Response to actions required in FFY 2021 SPP/APR

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	3.51%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	7.43%	4.00%	5.23%	3.51%	0.00%

Targets

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

FFY 2022 SPP/APR Data

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

YES

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

2

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
21	3	171	0.00%	0%	1.75%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

From FFY 2021 to FFY 2022 the percentage of LEAs with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification increased by 1.75 percentage points resulting in slippage. The KDE investigated potential reasons for the increase by comparing and analyzing data as well as reviewing input from LEAs. The KDE found that LEAs need additional training in how to clearly document interventions, referrals and decisions made by the IEP team. Additionally, LEAs reported administrators who chair IEP meetings need additional training on how to lead the meetings.

Were all races and ethnicities included in the review?

YES

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

The KDE uses the "risk ratio" methodology to determine disproportionate representation. This methodology identifies LEAs that have disproportionate representation in the identification of students in particular racial or ethnic groups in a certain disability category. Disproportionate representation exists under Indicator 10 in the identification of students in a specific disability category in a particular race or ethnic group when the following conditions exist:

- There are at least 30 students in the racial or ethnic group being examined who are enrolled in the LEA;
- There are at least 10 students in the racial or ethnic group with a specific disability category being examined who were identified as eligible for special education; and
- The rate at which students in the racial or ethnic group with a specific disability category being examined meets or exceeds the threshold of 2.25 times or greater than the rate of students in all other races and specific disability categories who are identified.

There were 171 LEAs that met the n-size for Indicator 10. One year of data was used to review LEAs for Indicator 10.

For Indicator 10, data are reviewed in the rate of identification of students individually for each of the seven federal racial or ethnic groups who are also identified as a child with a specific disability category as compared to the rate of identification of students in all other racial or ethnic categories who are also identified as a child with a specific disability category (i.e., rate of white students with Autism compared to the rate of non-white students with Autism; rate of Hispanic students with Autism to the rate of non-Hispanic students with Autism). "Risk" for Indicator 10 means the percentage of an LEA's students in a specific racial or ethnic category who receive special education and related services in specific disability categories. The percentage is determined by taking the number of students in each specific racial or ethnic group who are receiving special education and related services in specific disability categories who are identified as eligible under the IDEA and dividing it by the total number of enrolled students from that racial or ethnic group. These data come from the LEA's December 1 Child Count under the IDEA and the enrollment data for all students as reported on the same year's membership data as of December 1.

Below is an example of calculating risk for Asian students with Autism in Indicator 10:

- Sixty-three Asian students with Autism are reported on the December 1 Child Count under the IDEA in the Blue County School District.
- A total of 270 Asian students are enrolled in the Blue County School District.
- The risk for an Asian student with Autism identified for special education in the Blue County School District is 63 divided by 270 equals 0.233 or 23.3%. (63 Asian special education students with Autism divided by 270 Asian students enrolled in the LEA, multiplied by 100 to obtain a percentage of 23.3%.)

Risk ratio methodology requires that the risk for the specific race or ethnic group is compared to the risk of students not of that race or ethnic group to be identified.

Below is an example, not based on actual student or school district data, of calculating the risk of the comparison group (non-Asian students) for Indicator 10:

- Six Hundred non-Asian students with Autism are reported on the December 1 Child Count under the IDEA in the Blue County School District.
- A total of 6,000 non-Asian students are enrolled in the Blue County School District.
- The risk for non-Asian students identified with Autism in the Blue County School District is 600 divided by 6,000 equals 0.100 or 10.0%. (600 non-Asian

special education students with Autism divided by 6,000 non-Asian special education students enrolled in the LEA, multiplied by 100 to obtain a percentage of 10.0%).

The risk ratio methodology compares the risk of students from each racial or ethnic group who are identified as a child with a specific disability category to the risk of all other students not in the same race or ethnic group who are identified as a child with the same specific disability category enrolled in the LEA. Thus, the risk ratio considers the question: "What percentage of an LEA's students are falling within a specific racial or ethnic group who are receiving special education and related services in specific disability categories?"

To determine the risk ratio, divide the risk of Asian students identified as eligible for special education (23.3%) in the category of Autism by the risk of all other students identified as eligible for special education (10.0%) in the category of Autism.

Below is an example, not based on actual student or school district data, of risk ratio comparison for Indicator 10:

- The risk for identifying Asian students with Autism from the example above is 0.233 or 23.3%.
- The risk of the comparison group of all non-Asian students with Autism is 0.100 or 10.0%.
- The risk ratio is calculated by dividing the risk of the target group (Asian students with Autism) by the risk of the comparison group (non-Asian students with Autism).
- Thus, 23.3% divided by 10.0% or 0.233 divided by 0.100 results in the risk ratio for Asian students with Autism of 2.33. This means Asian students are 2.33 times more likely than non-Asian students to be identified as eligible for special education in the category of Autism.

In this example, not based on actual student or school district data, because the LEA has a risk ratio of 2.33 for Asian students with Autism, which is greater than the threshold of 2.25, the KDE must examine data from the LEA, specific to the identification of students for special education, to determine if the disproportionate representation is the result of inappropriate policies, procedures or practices. If the KDE determines the disproportionate identification of Asian students with Autism is due to inappropriate policies, procedures or practices, the LEA is identified under Indicator 10 as having disproportionate representation of Asian students with Autism in special education and related services that is the result of inappropriate identification.

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

The KDE analyzed LEA child count data located in the statewide student information system. The KDE notified districts that were identified as having disproportionate representation in specific racial/ethnic categories within a specific disability category. Any LEA identified with disproportionate representation with a risk ratio of 2.25 or greater was selected for a desk review. Following the LEA notification, the KDE conducted desk reviews of student due process records and reviewed evaluation and eligibility determinations per racial and ethnic groups. Additionally, the KDE reviewed LEA policies, procedures and practices as part of the desk review.

The KDE used the Compliance Record Review document to determine if the students had been appropriately identified under the IDEA. When the KDE found, through the desk review, that students had been inappropriately identified, the KDE cited the LEA as having disproportionate representation due to inappropriate identification. The KDE's Compliance Record Review Document can be found at (https://education.ky.gov/specialed/excep/forms/Documents/Compliance_Record_Review.pdf).

Out of 171 LEAs, 21 LEAs were identified as having disproportionate representation and were reviewed. Based on the KDE's desk review findings, three LEAs were cited as having disproportionate representation due to inappropriate policies, procedures or practices.

Provide additional information about this indicator (optional)

For this indicator, there are 171 LEAs. Two LEAs were excluded from the calculation. The KSB and the KSD are excluded from the denominator because there is no comparison group for these schools as all students attending the KSB and the KSD are students with disabilities.

Correction of Findings of Noncompliance Identified in FFY 2021

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

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Because the State reported less than 100% compliance for FFY 2022 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. The State must demonstrate, in the FFY 2023 SPP/APR, that the three districts identified in FFY 2022 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

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

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

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

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

Instructions

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

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

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

Targets must be 100%.

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

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

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	95.43%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.43%	99.91%	97.30%	98.79%	99.79%

Targets

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

FFY 2022 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2,748	2,725	99.79%	100%	99.16%	Did not meet target	No Slippage

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

23

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.

1-10 days over- 16
 11-20 days over- 4
 21-30 days over- 1
 31-40 days over- 1
 41-50 days over -1
 50+ days-

Reasons for the delays included scheduling conflicts and missed timelines by school psychologists contracted from outside the LEA as well as the need for additional training for newly hired psychologists employed by the LEA.

Indicate the evaluation timeline used:

The State used the 60 day timeframe within which the evaluation must be conducted

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

State 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.

For Indicator 11, all LEAs reviewed their data for compliance and submitted self-reported data. The KDE randomly reviewed student records for 10% of the LEAs that reported 100% compliance. From those LEAs, 10% of students initially evaluated during the 2022-2023 school year were randomly selected for desk reviews conducted by the KDE. Reviewers used the Compliance Record Review Document and the statewide student information system to access student due process records to determine whether a student's file was compliant with Indicator 11. Following the desk reviews, the KDE issued a written Report of Findings addressed to the LEA's superintendent and DoSE. The report included notification of IDEA noncompliance discovered during the review and the requirement that the noncompliance is corrected as soon as possible but in no case more than one year from notification. If noncompliance was identified during the review, the KDE required a CAP and provided technical assistance and support to the LEA.

The KDE reviews self-reported noncompliance data and, as necessary, data from IC to exercise due diligence and confirm in a reasonable amount of time whether the information submitted represents noncompliance. The KDE issues a written report to the LEA based on the self-reported noncompliance, requires a CAP and provides technical assistance and support to the LEA.

For FFY 2022, the KDE received self-reported data from all LEAs. Four LEAs self-reported noncompliance. Additionally, the KDE randomly reviewed records from 10% of the LEAs that self-reported 100% compliance. Through desk reviews, two additional LEAs were cited for noncompliance. In total, six LEAs (representing 23 students) had due process records identified as noncompliant.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The three noncompliant LEAs (representing five students), with assistance from SERTACs and the KDE, reviewed student-specific and systemic noncompliance items identified in the written Report of Findings. The KDE identified the percentage level of noncompliance for each LEA. Each noncompliant LEA was required to conduct a root cause analysis to determine why problem areas existed.

The results of the root cause analyses showed a lack of school psychologists available for hire led to a delay in evaluations resulting in missed timelines. Those results were utilized to develop meaningful CAPs that included action steps to ensure the LEA corrected the root cause of noncompliance, ensure the LEA was correctly implementing the regulatory requirements and improve LEA practices. The KDE identified noncompliant policies, procedures and practices in the written Report of Findings for each LEA. Each LEA was required to change any noncompliant policies, procedures and practices within their CAP. Additional CAP activities varied by LEA and were related to the root cause of noncompliance in the LEA. Training activities identified in the CAP were provided by KDE approved trainers which included consultants from the SERTACs. Prior to training events, the KDE reviewed the training materials to ensure all areas of noncompliance were sufficiently addressed.

The KDE verified all noncompliance was corrected as soon as possible, but no more than one year from the date of notification of the noncompliance.

LEAs were required to submit CAP status reports to the KDE on a quarterly basis.

To verify the LEA was implementing the regulatory requirements, the KDE reviewed additional student due process records, known as the review of updated data, as part of the CAP process. The number of records reviewed was determined by the size of the LEA's child count in the area reviewed. The process for selecting files is documented in the KDE's DMTE manual which can be found at (<https://education.ky.gov/specialed/excep/forms/Documents/DMTEManual.pdf>).

If any record was found noncompliant during the review of updated data, the LEA was required to correct the noncompliance pursuant to OSEP QA 23-01. All original records were verified as 100% compliant in the areas originally cited. Additional folders were verified as 100% compliant before the KDE determined the LEA had corrected all areas of noncompliance. The review of updated data was repeated until the LEA was correctly implementing the regulatory requirements at 100% compliance. With verification of CAP completion and all updated data verified as 100% compliant, the KDE reported the noncompliance as corrected and closed the CAP.

All LEAs identified for FFY 2021 successfully implemented the regulatory requirements at 100% compliance and closed their CAPs.

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

For FFY 2021, three LEAs (representing five students) were identified as having noncompliant practices under Indicator 11. The KDE reviewed all identified student due process records and issued a written Report of Findings which included student-specific corrective action when necessary. LEAs developed CAPs to address noncompliance and included the correction of individual due process files as part of the CAP activities.

The LEAs, with assistance from the SERTACs and the KDE, reviewed student-specific items identified in the written Report of Findings. The KDE verified all student-level noncompliance was corrected as soon as possible but no more than one year from the date of the notification of noncompliance. LEAs were required to submit CAP status reports to the KDE quarterly.

The KDE provided guidance, technical assistance and reviewed the evidence submitted to verify the implementation and completion of student-specific corrections and CAP activities. The KDE reviewed the evidence and verified that the LEAs had corrected all five cases of noncompliance.

With verification of CAP completion and all updated data verified as 100% compliant in the areas identified, the KDE reported the noncompliance as corrected. The KDE determined the three LEAs (representing five students) corrected all individual cases of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

11 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	93.74%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.41%	99.36%	91.52%	87.57%	99.76%

Targets

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

FFY 2022 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	3,113
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	376

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	2,405
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.	292
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	34
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	2,405	2,411	99.76%	100%	99.75%	Did not meet target	No Slippage

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

6

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.

1-10 days- 1 student

11-25 days- 1 student

26-100 days- 4 students

Reasons for the delays included the use of contracted school psychologists from out of state and the long term hospitalization of two students.

Attach PDF table (optional)

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.

For Indicator 12, all LEAs reviewed their data for compliance and submitted self-reported data to the KDE through an electronic survey. The KDE randomly reviewed student records for 10% of the LEAs that reported 100% compliance. From those LEAs, 10% of student due process records were randomly selected for desk reviews conducted by the KDE. Reviewers used the Compliance Record Review Document and the statewide student information system to access student due process records to determine whether a student's file was compliant with Indicator 12. Following the desk reviews, the KDE issued a written Report of Findings addressed to the LEA's superintendent and DoSE. The report included notification of IDEA noncompliance discovered during the review and the requirement that the noncompliance is corrected as soon as possible but in no case more than one year from notification. If noncompliance was identified during the review, the KDE required a CAP and provided technical assistance and support to the LEA.

The KDE reviews self-reported noncompliance data and, as necessary, data from IC to exercise due diligence and confirm in a reasonable amount of time whether the information submitted represents noncompliance. The KDE issues a written report to the LEA based on the self-reported noncompliance, requires a CAP and provides technical assistance and support to the LEA.

For FFY 2022, the KDE received self-reported data from all LEAs. Four LEAs self-reported noncompliance. Additionally, the KDE randomly reviewed due process records from 10% of the LEAs that self-reported 100% compliance. Through desk reviews, one additional LEA was cited for noncompliance. In total, five LEAs (representing six students) had due process records identified as noncompliant.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

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

FFY 2021 Findings of Noncompliance Verified as Corrected

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

The one noncompliant LEA (representing 5 students), with assistance from SERTACs and the KDE, reviewed student-specific and systemic noncompliance items identified in the written Report of Findings. The KDE identified the percentage level of noncompliance for the LEA. The noncompliant LEA was required to conduct a root cause analysis to determine why problem areas existed.

The results of the root cause analysis were utilized to develop a CAP that included action steps to ensure the LEA corrected the root cause of noncompliance, ensure the LEA was correctly implementing the regulatory requirements and improve LEA practices. The KDE identified noncompliant policies, procedures and practices in the written Report of Findings for the LEA. The LEA was required to change any noncompliant policies, procedures

and practices within their CAP. Training activities identified in the CAP were provided by KDE approved trainers which included consultants from the SERTACs. Prior to training events, the KDE reviewed the training materials to ensure all areas of noncompliance were sufficiently addressed.

The KDE ensured all noncompliance was corrected as soon as possible, but no more than one year from the date of notification of the noncompliance. The LEA was required to submit CAP status reports to the KDE on a quarterly basis.

To verify the LEA was implementing the regulatory requirements, the KDE reviewed additional student due process records, known as the review of updated data, as part of the CAP process. The number of records reviewed was determined by the size of the LEA's child count in the area reviewed. The process for selecting files is documented in the KDE's DMTE manual which can be found at (<https://education.ky.gov/specialed/excep/forms/Documents/DMTEManual.pdf>).

If any record was found noncompliant during the review of updated data, the LEA was required to correct the noncompliance pursuant to OSEP QA 23-01. All original records were verified as 100% compliant in the areas originally cited. Additional folders were verified as 100% compliant before the KDE determined the LEA had corrected all areas of noncompliance. The review of updated data was repeated until the LEA was correctly implementing the regulatory requirements at 100% compliance. With verification of CAP completion and all updated data verified as 100% compliant, the KDE reported the noncompliance as corrected and closed the CAP.

The one LEA (representing 5 students) identified for FFY 2021 successfully implemented the regulatory requirements at 100% compliance and closed their CAP.

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

For FFY 2021, one LEA (representing 5 students) was identified as having noncompliant practices under Indicator 12. The KDE reviewed all identified student due process records with noncompliance and issued a written Report of Findings which included student-specific corrective action when necessary. The LEA developed a CAP to address noncompliance and included the correction of individual due process files as part of the CAP activities.

The LEA, with assistance from the SERTACs and the KDE, reviewed student-specific items identified in the written Report of Findings. The KDE ensured all student-level noncompliance was corrected as soon as possible but no more than one year from the date of the notification of noncompliance. The LEA was required to submit CAP status reports to the KDE quarterly.

The KDE provided guidance, technical assistance and reviewed the evidence submitted to verify the implementation and completion of student-specific corrections and CAP activities. The KDE reviewed the evidence and verified that the LEA had corrected all five cases of noncompliance.

With verification of CAP completion and all updated data verified as 100% compliant in the areas identified, the KDE reported the noncompliance as corrected. The KDE determined the one LEA (representing five students) corrected all individual cases of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

12 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

12 - OSEP Response

12 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of

noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

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

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	92.95%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	99.40%	93.94%	96.74%	94.52%	98.00%

Targets

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

FFY 2022 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
2,148	2,307	98.00%	100%	93.11%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

From FFY 2021 to FFY 2022, the percentage of youth aged 16 and above with IEPs that contained each of the required components of secondary transition decreased by 4.89 percentage points resulting in slippage. The KDE investigated potential reasons for the decrease by comparing and analyzing data as well as reviewing root cause analyses completed by LEAs. LEAs reported an increase in new staff, particularly teachers who are pursuing alternative routes to certification, resulting in the need for additional training on the post-secondary transition requirements. Additionally, LEAs indicated the need to develop stronger review processes and protocols at the LEA level using the KDE's Compliance Record Review document.

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.

For Indicator 13, all LEAs reviewed their data for compliance and submitted self-reported data to the KDE. The KDE randomly reviewed student records for 10% of the LEAs that reported 100% compliance. From those LEAs, 10% of students aged 16 or older with IEPs, during the 2022-2023 school year, were randomly selected for desk reviews conducted by the KDE. Reviewers used the Compliance Record Review Document and the statewide student information system to access student due process records to determine whether a student's file was compliant with Indicator 13. Following the desk reviews, the KDE issued a written Report of Findings addressed to the LEA's superintendent and DoSE. The report included notification of IDEA noncompliance discovered during the review and the requirement that the noncompliance is corrected as soon as possible but in no case more than one year from notification. If noncompliance was identified during the review, the KDE required a CAP and provided technical assistance and support to the LEA.

The KDE reviews self-reported noncompliance data and, as necessary, data from IC to exercise due diligence and confirm in a reasonable amount of time whether the information submitted represents noncompliance. The KDE issues a written report to the LEA based on the self-reported noncompliance, requires a CAP and provides technical assistance and support to the LEA.

For FFY 2022, the KDE received self-reported data from all LEAs. Noncompliance was self-reported by 15 LEAs. Additionally, the KDE randomly reviewed records from 10% of the LEAs that self-reported 100% compliance. Through desk reviews, 13 additional LEAs were cited for noncompliance. In total, 28 LEAs (representing 159 students) had due process records that were identified as noncompliant for Indicator 13.

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

Provide additional information about this indicator (optional)**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
45	45	0	0

FFY 2021 Findings of Noncompliance Verified as Corrected**Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements**

The 15 LEAs (representing 45 students), with assistance as needed from the SERTACs and the KDE, reviewed student-specific and systemic noncompliance items identified in the written Report of Findings. The KDE identified the percentage level of noncompliance for each LEA. Each noncompliant LEA was required to conduct a root cause analysis to determine why problem areas existed.

Those results were utilized to develop meaningful CAPs that included action steps to ensure the LEAs corrected the root cause of noncompliance, ensure the LEAs were correctly implementing the regulatory requirements and improve LEA practices. The KDE identified noncompliant policies, procedures and practices in the written Report of Findings for each LEA. The LEAs were required to change any noncompliant policies, procedures and practices within their CAP. Additional CAP activities varied by LEA and were related to the root cause of noncompliance in the LEA. Training activities identified in the CAP were provided by KDE approved trainers which included consultants from the SERTACs. Prior to training events, the KDE reviewed the training materials to ensure all areas of noncompliance were sufficiently addressed.

The KDE ensured all noncompliance was corrected as soon as possible, but no more than one year from the date of notification of the noncompliance. LEAs were required to submit CAP status reports to the KDE on a quarterly basis.

To verify the LEAs were implementing the regulatory requirements, the KDE reviewed additional student due process records, known as the review of updated data, as part of the CAP process. The number of records reviewed was determined by the size of the LEAs' child count in the area reviewed. The process for selecting files is documented in the KDE's DMTE manual which can be found at (<https://education.ky.gov/specialed/excep/forms/Documents/DMTEManual.pdf>).

If any record was found noncompliant during the review of updated data, the LEA was required to correct the noncompliance pursuant to OSEP QA 23-01. All original records were verified as 100% compliant in the areas originally cited. Additional folders were verified as 100% compliant before the KDE determined the LEA had corrected all areas of noncompliance. The review of updated data was repeated until the LEA was correctly implementing the regulatory requirements at 100% compliance. With verification of CAP completion and all updated data verified as 100% compliant, the KDE reported the noncompliance as corrected and closed the CAP.

All 15 LEAs (representing 45 students) identified for FFY 2021 successfully implemented the regulatory requirements at 100% compliance and closed their CAPs.

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

For FFY 2021, 15 LEAs (representing 45 students) were identified as having noncompliant practices under Indicator 13. The KDE reviewed all identified student due process records with noncompliance and issued a written Report of Findings which included student-specific corrective action when

necessary. LEAs developed CAPs to address noncompliance and included the correction of individual due process files as part of the CAP activities.

The LEAs, with assistance from the SERTACs and the KDE, reviewed student-specific items identified in the written Report of Findings. The KDE ensured all student-level noncompliance was corrected as soon as possible but no more than one year from the date of the notification of noncompliance. LEAs were required to submit CAP status reports to the KDE quarterly.

The KDE provided guidance, technical assistance and reviewed the evidence submitted to verify the implementation and completion of student-specific corrections and CAP activities. The KDE reviewed the evidence and verified that the LEAs had corrected all 45 cases of noncompliance.

With verification of CAP completion and all updated data verified as 100% compliant in the areas identified, the KDE reported the noncompliance as corrected. The KDE determined all 15 LEAs (representing 45 students) corrected all individual cases of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2021

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

13 - Prior FFY Required Actions

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

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

Response to actions required in FFY 2021 SPP/APR

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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

Instructions

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

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

I. Definitions

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

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

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

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

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

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

II. Data Reporting

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

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

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

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

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

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

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

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

III. Reporting on the Measures/Indicators

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

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

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

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

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

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

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2018	Target ≥	25.50%	25.50%	25.50%	17.15%	17.15%
A	16.98%	Data	17.96%	16.98%	17.77%	17.15%	15.99%
B	2018	Target ≥	55.80%	56.00%	56.00%	53.75%	53.75%
B	54.23%	Data	59.51%	54.23%	52.19%	53.75%	50.03%
C	2018	Target ≥	66.50%	66.70%	69.96%	64.79%	64.79%
C	69.76%	Data	69.49%	69.76%	68.05%	64.79%	70.93%

FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A ≥	17.63%	18.11%	19.08%	21.00%
Target B ≥	54.16%	54.56%	55.38%	57.00%
Target C ≥	65.69%	66.59%	68.40%	72.00%

Targets: Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants

with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

FFY 2022 SPP/APR Data

Total number of targeted youth in the sample or census	4,432
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	2,925
Response Rate	66.00%

1. Number of respondent youth who enrolled in higher education within one year of leaving high school	529
2. Number of respondent youth who competitively employed within one year of leaving high school	1,140
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)	82
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).	358

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Enrolled in higher education (1)	529	2,925	15.99%	17.63%	18.09%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,669	2,925	50.03%	54.16%	57.06%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	2,109	2,925	70.93%	65.69%	72.10%	Met target	No Slippage

Please select the reporting option your State is using:

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

Response Rate

FFY	2021	2022
Response Rate	62.60%	66.00%

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

For Indicator 14, the state used the representativeness calculator developed by the National Post School Outcomes Center. This method considers respondents to be representative of the population when the percentage of respondents in sub-categories are within three percentage points of their population category. The KDE has complete population data for students aged 14-21 with IEPs who exited special education with an IEP and compares this to the demographics of respondents.

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

Representativeness by Race Population Respondents Representativeness (Difference in percentage points)
 White..... 76%.....80%..... 4%

Black.....	4%.....	12%.....	2%
Hispanic.....	6%.....	5%.....	-1%

Representativeness by Region

CKEC.....	15%.....	16%.....	..1%
GRREC.....	18%.....	20%.....	2%
KEDC.....	7%.....	7%.....	0%
KVEC.....	8%.....	10%.....	2%
NKCES.....	8%.....	7%.....	-1%
OVEC.....	8%.....	6%.....	-2%
SESC.....	14%.....	16%.....	2%
WKEC.....	9%.....	10%.....	1%
GLEC.....	14%.....	9%.....	-5%

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.

As noted in the above table, the FFY 2022 data is representative of the demographics of youth who exited secondary school with an IEP, except for underrepresentation in a single geographic region and overrepresentation of one ethnic group. The KDE will work with SERTACs to develop and share strategies to support LEAs within that geographic region to increase response rates. The SERTACs hold regularly scheduled meetings with DoSEs in their regions. These meetings include regular updates about current and past response rate data. In addition, the KDE will share regular updates in communications with LEAs through weekly emails, quarterly newsletters and technical assistance provided by the KDE and the KYPSO. To improve response rates, LEAs have been encouraged to collect contact information for students prior to exiting and to review contact information before the data collection window. Increasing access to current contact information should help reduce the over-representation of White students and the underrepresentation in the GLEC region. The KYPSO has had ongoing conversations with staff from the GLEC region to provide targeted instruction and strategies to improve the response rate.

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

Throughout the survey collection window, the KDE will continue to monitor LEA's response rates and provide regular updates to the LEAs. Additional support and technical assistance will be provided to LEAs with the lowest response rates throughout the reporting window. The KDE will collaborate with the SERTACs to develop and share strategies to support LEAs to increase response rates, particularly within the underrepresented geographic regions identified. The SERTACs hold regularly scheduled meetings with the LEA's DoSE in their regions. These meetings include regular updates regarding current and past response rate data. Additionally, the SERTACs are collaborating with KYPSO to develop informational flyers for students and LEA staff to help understand the Indicator 14 survey including the purpose of the survey and how the information from the survey is used. The KDE will share regular updates in communications with LEAs through weekly emails, quarterly newsletters and technical assistance provided by the KDE and the KYPSO Center. To improve response rates, the KDE encourages LEAs to collect contact information for students prior to exiting and to review contact information prior to the data collection window.

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.

For FFY 2022 the overall response rate was 66.00%, which is a 3.56% point gain from the previous year. This represents 2925 respondents out of a total population of 4432 students aged 14-21 with IEPs who exited special education.

To assess the degree to which nonresponse bias impacted results for Indicator 14 A, B and C, the HDI conducted one-way ANOVA tests with a dichotomous variable indicating membership in each underrepresented group as an independent variable and the Indicator 14 scores as the dependent variable. As noted below, the only underrepresented group was former students in the GLEC region.

For 14A, the mean was 18.7% for GLEC respondents and 18.0% for non-GLEC respondents. This yields an F-statistic of 0.79 and an insignificant p-value. Nonresponse bias did not contribute to the results for 14A. For 14B the mean was 48.3% for GLEC respondents and 50.1% for non-GLEC respondents. This yields an F-statistic of 9.2 and a p-value of $p < .01$. Nonresponse bias did contribute to results for 14B, and the statewide rate is inflated due to this. For 14C GLEC respondents, the mean was 71.1%, while for non-GLEC respondents the mean was 72.1%. This yields an F-statistic of 0.13 and an insignificant p-value. Nonresponse bias did not contribute to results for 14C.

While nonresponse bias was identified for GLEC for 14B, this region has made improvements over the last year. For FFY 2021, the region was underrepresented by 8% while for FFY 2022 the region was underrepresented by 5%. The GLEC region includes Kentucky's largest LEA which is diverse in race, ethnicity and socioeconomic status. The underrepresented region has a slightly higher percentage of former students going on to higher education as compared to the state. It also has a lower rate of competitive employment, but a higher rate of non-competitive employment. The overrepresented ethnic category (White students) comprises most of Kentucky's population, and results are largely consistent with overall state totals.

To address nonresponse bias, the questions on the survey remained the same as the previous year. Questions were composed using feedback from LEAs, parents, students and other stakeholders. In addition, all interviewers were directly trained by the HDI. Interviewers were unable to access the survey without first completing a training quiz. Additional training and support were also provided by the HDI if requested by an interviewer, LEA or SERTAC.

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

Sampling Question	Yes / No
If yes, is it a new or revised survey?	NO

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

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

Response to actions required in FFY 2021 SPP/APR

As noted above, the State reported on the representativeness of the data in the Indicator 14 section entitled, "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." Kentucky analyzed representativeness using race/ethnicity and geographical region. The following subgroups were over or underrepresented by more than 3 percentage points from population figures:

Race/Ethnicity: White (overrepresented by 4 percentage points)

SERTAC region: GLEC (underrepresented by 5 percentage points)

The results of the analysis indicated that respondents from the GLEC region were underrepresented and that White student respondents were overrepresented. The State reported on the actions it is taking to address representativeness in the Indicator 14 section entitled, "Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics." The KDE will work with the SERTAC in the one underrepresented region to develop strategies to increase response rates. Additionally, SERTACs hold regularly scheduled meetings with DoSEs in their regions to include regular updates about current and past response rate data. The KDE regularly shares updates with LEAs through weekly emails, quarterly newsletters and technical assistance provided by the KDE and KYPSO. To improve response rates, LEAs have been encouraged to collect contact information for students prior to exiting and to review contact information before the data collection window.

14 - OSEP Response

14 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 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 not used

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	6
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	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

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE

regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/excep/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

Historical Data

Baseline Year	Baseline Data
2017	45.45%

FFY	2017	2018	2019	2020	2021
Target >=	70.00% - 80.00%	70.00% - 80.00%	70.00%-80.00%	45.45%	45.45%
Data	45.45%	34.62%	35.71%	75.00%	50.00%

Targets

FFY	2022	2023	2024	2025
Target >=	46.02%	46.59%	47.73%	50.00%

FFY 2022 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
3	6	50.00%	46.02%	50.00%	Met target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

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

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	15
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	8
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	4

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

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/except/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

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Historical Data

Baseline Year	Baseline Data
2017	66.67%

FFY	2017	2018	2019	2020	2021
Target >=	61.00% - 85.00%	61.00% - 85.00%	61.00%-85.00%	66.67%	66.67%
Data	66.67%	100.00%	75.00%	100.00%	100.00%

Targets

FFY	2022	2023	2024	2025
Target >=	67.71%	68.75%	70.84%	75.00%

FFY 2022 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
8	4	15	100.00%	67.71%	80.00%	Met target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

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

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

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

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

C. Stakeholder Engagement

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

Additional Implementation Activities

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

17 - Indicator Data

Section A: Data Analysis

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

To increase the percentage of students with disabilities performing at or above proficient in middle school math, specifically at the 8th-grade level, with emphasis on reducing novice performance, by providing professional learning, technical assistance and support to elementary and middle school teachers around implementing, scaling and sustaining Positive Behavioral Interventions and Supports (PBIS) and evidence-based practices (EBP) in math.

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)

NO

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

NO

Please provide a link to the current theory of action.

<https://education.ky.gov/specialed/except/instrresources/Documents/SSIPTheoryofAction.pdf>

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2021	11.92%

Targets

FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	12.92%	13.92%	14.92%	15.92%

FFY 2022 SPP/APR Data

Number of children with IEPs scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
639	5,848	11.92%	12.92%	10.93%	Did not meet target	No Slippage

Provide the data source for the FFY 2022 data.

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

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

The SiMR uses the Kentucky Summative Assessment (KSA) data to measure the percent of students with disabilities performing at or above proficiency in math at the eighth-grade level. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. The SiMR data and target are aligned with Indicator 3B for eighth-grade mathematics. Student outcome data is analyzed in conjunction with implementation data at each level of the system (state, region, district, school).

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

YES

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

Capacity Assessments-

Capacity assessment data is collected once per year and used to inform the system of support at all levels (state, region, district, school). Implementation teams use these data to develop/refine action plans to improve infrastructure to support the EBP.

Active Implementation Frameworks (AIF) Training Outcome Data-

Transformation Zone (TZ) implementation teams at the regional and district level receive training in Implementation Science fundamentals during the installation phase. The data is used to improve the quality of training and meet the learning needs of participants.

EBP training outcome data-

Districts are responsible for the provision of EBP training for administrators and teachers. District Implementation Teams (DITs) are encouraged to collect math training component worksheets that align training development to adult learning strategies and the Kentucky Math Practice Profile. Participants in the training complete the Math Training Efficacy survey. When appropriate, math training also includes a pre/post-knowledge assessment. Data is collected as training occurs. The data is used in conjunction with fidelity, coaching and capacity data to make informed decisions on how best to support teachers.

EBP Fidelity Data -

In Kentucky, districts have the option to use multiple classroom walkthrough tools to measure fidelity of EBP implementation. Data is collected at least three times per year. Implementation teams triangulate implementation data (coaching, training, capacity) with fidelity data to inform the system of support for teachers.

Student Mathematics Benchmark Data-

Districts are encouraged to submit benchmark data and analyze it three times per year (Spring, Winter, and Fall) using mathematics benchmark data. This data can demonstrate how students are making growth on benchmark goals prior to statewide end of year assessment results. This allows districts to make data-based decisions in implementation of math EBPs.

Linked-Teaming Survey-

A common survey given to Regional Implementation Teams (RIT) and DITs within the linked teaming infrastructure is collected annually to assess the system of support.

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)

NO

Section B: Implementation, Analysis and Evaluation

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

<https://www.education.ky.gov/specialed/excep/instresources/Documents/KySSIPEvalPlan.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.

The revised evaluation plan focuses on activities, outputs and outcomes related to maintaining and scaling. Project measures have been updated.

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

The initial evaluation plan was written to reflect activities and strategies necessary to plan for and build initial infrastructure for the state's TZs. Although the theory of action remains relevant, the project measures in the initial plan no longer reflect the work and incremental goals within the current implementation stages.

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

State Implementation Team (SIT)

The SIT focused on the adjusted intermediate outcomes to support capacity, sustainability and scaling of the TZ. The team focused on addressing the barrier of staff turnover which is impacting scaling within the TZ. The SIT specifically identified the need for targeted support based on stakeholder feedback and developed a targeted support plan for DITs. Other activities included using improvement cycle results to update:

-TZ data dashboard: Streamlined data entry for capacity assessments

-SSIP evaluation plan: Met with stakeholders to review and update project measures

-Communication plan: Established reoccurring meetings for two-way communication with regional stakeholders

-System for training for fidelity, coaching and data use: Developed improved training plans based on usability in TZs for sustainability and onboarding

TZ Infrastructure

Kentucky continues to use a linked teaming structure (state, region, district, school) to provide support on the use of implementation science to effectively implement EBPs to meet the goals of the SiMR.

State Personnel Development Grant (SPDG)

The KDE leveraged the implementation knowledge gained through the TZs with the SSIP to align with the former SPDG. This provided a roadmap to utilize the infrastructure needed to engage in effective implementation of PBIS and EBPs in mathematics for students with disabilities. Kentucky applied for a new SPDG focused on post-secondary transition. The SSIP team members supported the development of the proposal by guiding the SPDG team using active implementation and effective practices utilized in the SSIP. Kentucky was awarded another SPDG in 2023 and will continue leveraging the implementation capacity gained from the SSIP to support data collection and processes. Additionally, an implementation team including multiple stakeholders (career and technical education, regional technical assistant center, field staff) previously came together to identify barriers to implementation of practices that support post-secondary transition. Feedback from this team indicated that mathematics may be impacting whether students with disabilities participate in career and technical education programs. As a result, the SSIP team and transition team are working closely to establish connections between the new SPDG and the SSIP. The SSIP can help support the new SPDG by focusing on quality mathematics instruction so that students have the math skills needed to be successful in these programs.

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.

TZ Infrastructure:

The TZ work aims to build a multi-tiered system of training, coaching and technical assistance (short-term outcomes) to build capacity for local systems to sustain improvement in evidence-based math instruction and scale up as capacity builds. Ultimately, it is anticipated that these successes in short-term outcomes will lead to the achievement of the SiMR.

Based on feedback and input from stakeholders regarding barriers to scale-up, the SIT created a more streamlined process for data-informed decision making which includes:

- Capacity assessments completed annually
- Fidelity to data-informed action planning
- Reflection on the system of support
- Linked Teaming Survey annually
- Effective use of measures within the TZ data dashboard (fidelity, training, coaching and student benchmark)

Capacity Assessments

Capacity assessments represent an expected output of infrastructure development and capacity-building activities initiated as a part of TZ work. The assessments represent sustained adherence to accountability monitoring, quality standards, and professional development and are necessary for sustaining systems improvement efforts. The Capacity Assessment is used for the following project measures:

- 50% of DITs report having a coaching system present to support schools in the use of Usable Innovations.
- 100% of districts secure training on Usable Innovation for all district/school personnel.
- Each year, 80% of RITs engage in exploration activities.
- 80% of RITs report having access to relevant SSIP data.

Among the 4 RITs who completed capacity assessments, 100% reported having access to relevant data. Among the 6 DITs that completed capacity assessments, only 67% reported having access to data for effective implementation.

Linked Teaming Survey (LTS)

For the present reporting period, as part of the update to the evaluation plan, the LTS was modified to match updated project measures and to include stakeholder feedback. As a result, it was administered in Fall 2023 and participants were asked to reflect on the support received during the 22-23 school year. As of October 2023, 55 DIT members from 7 districts and 25 RIT members from 6 regions participated.

The LTS represents an expected output of infrastructure development and capacity-building activities. Attainment of these measures represents adherence to accountability monitoring, quality standards and are necessary for sustainability of systems improvement efforts. The LTS project measures include:

- 80% of RITs and DITs report creating an action plan each year that is based on capacity assessment findings.
 - Among those with an action plan, 80% of RITs and DITs reported using the capacity assessment action plan to support decision-making.
- Across all 80 participants, 75 (94%) reported that their implementation team had created an action plan based on capacity assessment findings for the previous school year. In addition, 68 (85%) reported that their team consistently used their capacity assessment action plan to support decision-making. Finally, 77 (96%) reported that the linked teaming communication strategy was adhered to with 77 (96%) of RIT and DIT members saying that the State or Regional Implementation Team, respectively, followed through with the communication protocol that was planned.

Outcomes:

The following project measures were measured through the LTS, assessing the effectiveness of the linked teaming approach. These measures pertain to professional development and technical assistance offered through the linked teaming structure. When consistently met, they can contribute to 1) ongoing systems change and scale-up, especially for enhancing competency in implementation science, and 2) meeting the SiMR, especially for enhancing teacher support for EBP instruction.

Increase districts' experience with implementation science:

- Each year, 80% of RIT members report the Kentucky Department of Education (KDE) Implementation Team provided high-quality support to increase the use of Implementation Science
- Each year, 80% of DIT members report the RIT provided high-quality support to increase the use of Implementation Science.

Specifically, among the 80 DIT and RIT respondents to the LTS, 100% reported either agreed or strongly agreed with three statements indicating that for the previous school year, the [SIT or RIT] provided high-quality support to increase our [RIT's or DIT's] 1) use of implementation science (e.g. effective systems), 2) capacity to use implementation data to make informed decisions, and 3) capacity to support districts' use of implementation science (e.g., effective systems). When averaging scores across these three statements, RIT respondents rated the support received slightly higher than DITs:

average score of 3.69 (92%) vs. 3.39 (85%) respectively.

Enhanced support for teachers in instruction of evidence-based math practices:

- Each year, 80% of RIT members report the KDE Implementation Team provided high-quality support to improve the implementation of math EBPs.
- Each year, 80% of DIT members report the RIT provided high-quality support to improve the implementation of math EBPs.

Among the 80 RIT and DIT respondents to the LTS, 100% reported either agreed or strongly agreed that the [SIT or RIT] has provided high-quality support to increase the capacity to support districts to implement EBPs to improve math outcomes. The average score for this question was slightly higher at the RIT level than the DIT level: mean score of 3.68 (92%) vs. 3.36 respectively (84%).

Input to Inform Future Implementation:

On the LTS 79% RIT and DIT participants (99%) agreed/strongly agreed that they were satisfied with the quality of communication with the SIT and RIT respectively. Mean scores were slightly higher for RIT compared to DIT members: 3.68 (92%) vs. 3.47 (87%) respectively. When asked about desired supports 44% of RIT respondents said no changes were needed at this time; just over a quarter (28%) asked for tailoring support based on needs, goals and context. Just under half of DIT members (47%) requested modeling of effective practices, followed by providing scaffolding supports and resources (36%) and developing capacity to improve student outcomes in mathematics (33%).

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

NO

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

The KDE will continue to work with the Scaling-up of Evidence-based Practices Center (SISEP) to support the use of active implementation within the linked teaming structure (State, Region, District, School). All planned activities will continue to support effective mathematics instruction to improve educational outcomes for students with disabilities.

SIT

Next Step 1: The SIT will continue to meet and focus on the initial implementation and installation of the targeted support plan. Usability testing or improvement cycles will be used to make adjustments to the targeted support plan. Intensive support TZs will continue to build capacity through the linked teaming structure.

Anticipated Outcome 1: Scale to additional districts and schools using the targeted approach model to participate in the TZ to impact the progress toward the SiMR.

Next Step 2: Increase universal support by providing online training modules to encourage more widespread use of the mathematics toolkit.

Anticipated Outcome 2: More teachers across the state will use effective mathematics teaching practices and support improved outcomes for students.

TZ Infrastructure

Next Step 3: The LTS will be administered in the spring to assess fidelity of action planning efforts and outcomes associated with multi-tiered support infrastructure.

Anticipate Outcome 3: Spring administration will allow the opportunity for feedback regarding desired support to be planned for and provided in the upcoming school year.

SPDG

Next Step 4: The SSIP team and transition team will continue to establish connections between the new SPDG and the SSIP.

Anticipated Outcome 4: The SSIP will support the new SPDG by focusing on quality mathematics instruction so that students have the math skills needed to be successful.

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

EBP in Mathematics that align to the Kentucky Mathematics Practice Profile.

Active Implementation Frameworks (AIFs).

Provide a summary of each evidence-based practices.

EBP in Mathematics:

To meet the goals of the SiMR, the KDE supports districts and regions in the implementation of EBP in mathematics grounded in the eight mathematics teaching practices using the Kentucky Mathematics Practice Profile. While the KDE does not mandate a specific EBP, districts use the hexagon tool to select a mathematics EBP that is aligned with the Every Student Succeeds Act Levels of Evidence and best meets the needs of students.

Active Implementation Frameworks:

In 2005, the National Implementation Research Network (NIRN) released a monograph that synthesized implementation research findings across a range of fields. Based on these findings, the evolving field of research and practice evidence, NIRN developed five overarching frameworks referred to as the Active Implementation Frameworks. Implementation science, the multi-disciplinary study of methods and strategies to promote the use of research findings in practice, seeks to address this by providing frameworks to guide the creation of conditions and activities that facilitate the use of EBP (<https://implementation.fpg.unc.edu/wp-content/uploads/Active-Implementation-Overview.pdf>).

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.

EBP in Mathematics:

The district-selected math EBP along with the Kentucky Mathematics Practice Profile supports teacher practices in the classroom. The fidelity, training, and coaching implementation data within the data dashboard is anchored in the eight mathematics teaching practices. DITs meet monthly to analyze the system of support for teachers to effectively implement EBPs. Districts and coaches use the results of the analysis to provide feedback and support to teachers to impact student outcomes in mathematics and support the SiMR.

AIFs:

The AIFs are intended to impact the SiMR by providing support at each level of the system to increase the effective implementation of EBP and achieve improved student outcomes. To accomplish these goals, the formula for success is used to put the frameworks in place by,

1. Usable Innovation: An EBP or program that is intended to improve results is chosen based on need, the best available evidence to achieve the specified goal and is operationalized to be teachable, learnable, doable and measurable.
2. Effective Implementation and Improvement: Teams receive training, coaching and feedback to effectively use the EBP and make improvements based on feedback.
3. Enabling Context: The team actively creates a hospitable environment to ensure an enabling context exists to support implementation and improvement in the use of the EBP.
4. Educationally Significant Outcomes: Successful implementation of the formula of success results in educationally significant outcomes.

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

Fidelity of EBP Implementation:

In Kentucky, districts have the option to select a TZ-approved tool to measure the fidelity of EBP implementation. The Observation Tool for Instructional Supports and Systems (OTISS) is a TZ-approved fidelity tool that identifies highly effective, research-based instructional practices being used during classroom instruction. The OTISS is comprised of seven items based on John Hattie's (2009) work evaluating research behind factors that influence educational achievement (<https://sisep.fpg.unc.edu/blog/observational-tool-instructional-supports-and-systems-empowering-teachers-instructional-leaders>). The Kentucky Mathematics Innovation Tool (KMIT) is another approved fidelity tool based on the Kentucky Mathematics Practice Profile which was informed by the eight Mathematics Teaching Practices as identified by the National Council of Teachers of Mathematics.

Forty schools were considered active during the past 12 months. Among those, 34 (84%) reported fidelity data, although only 20 (40%) reported fidelity data across 3 months or more. When combining KMIT and OTISS observations, 31 cohorts had at least 2 months of observations through which growth could be measured; 21 of those cohorts (68%) either demonstrated growth in fidelity to year-end observations or maintained high levels of fidelity at year-end observation (score of 1.5 of 2 or 75%). All but 2 cohorts (94%) met basic levels of fidelity (\geq score of 1 of 2) at their year-end assessment.

OTISS: One district with 12 cohorts from 9 schools used the OTISS tool to meet the EBP fidelity metric. 100% of these 9 schools regularly reported OTISS data over the past year (e.g. over 3 or more months). For the analysis, if two cohorts merged, the separate baselines of each cohort were averaged for a baseline score. If a new cohort was added, the initial OTISS assessment for the school was used as baseline. Annualized trends from January through October 2023 showed a 6% decline across all OTISS practices from January through October, however, overall, average fidelity scores across all schools was high (1.55 or 75%) and average final fidelity scores were 1.41 (72%). Average ratings for each domain throughout the reporting period ranged from 58% (or 1.16 out of 2) for "Engages Students" to 88.5% (1.77 out of 2) for "Adjusts to Engagement."

KMIT: As of October 2023, 11 schools using the KMIT had at least 3 months of fidelity data reported; 20 schools had at least 2 months of data and 25 schools reported data for at least one month. Among schools with at least two months of data, 15 (75%) either increased fidelity or maintained high levels of fidelity (i.e., score of 1.5 or more) from their baseline to reporting year-end assessment. All but 2 schools (90%) met basic levels of fidelity (average score of 1 of 2) in their final assessment of the reporting period. Annualized trends from January to October 2023 among schools with at least two months of data showed an average growth of 24% across all domains. The greatest fidelity observed (average of each school's average score was 1.44 or 72%) was for "Uses Representations." The lowest fidelity (average score across schools of 51% or 1.02 of 2) was for "Establishes Goals."

Capacity Assessments:

Annual capacity assessments are expected to be completed among all TZ sites to inform sites' action planning processes. During the reporting period, much attention was paid to reviewing and editing the SSIP evaluation plan, relevant project measures, and improving the data collection format. In addition, the schedule was modified for collecting capacity assessment data, with the new expectation that capacity assessments will occur annually and will inform the action plan for the school year.

Among the 18 active RITs and DITs assessed during the current reporting period, 10 (4 regional and 6 district), or 56% completed a capacity assessment during the present reporting period.

Regional Capacity Assessments: Among the 4 RITs completing capacity assessments during the reporting period, 3 (75%) either demonstrated growth in the Total domain (average of all questions) from year -beginning to year-end assessment or ended with an average score in the Total domain of $>80\%$, indicating high levels of capacity. When averaging domain scores from all regions in the present reporting period and the same regions in the prior reporting period, growth or maintenance of high capacity ($>75\%$ score) occurred across 7 of the 10 domains, with most occurring for Training (41% growth), followed by "Fidelity Performance Assessment" (15%) and "Stage-Based Functioning" (14%). The domains with the highest scores in the present reporting period included "Leadership" (100%) and "Training" (93%). Lowest scores for the present period were in "Systems Intervention" (50%) and "Action Planning" (54%). Declining scores were observed for "Coaching" (-13%) and "Action Planning" (-3%).

District Capacity Assessment: Among the 6 districts completing capacity assessments during the reporting period, 5 (83%) demonstrated growth in the Total domain (average of all questions) from beginning to year-end assessment. When averaging domain scores from all regions in the present reporting period and the same regions in the prior reporting period, growth occurred across 7 of the 8 domains. The domains with the highest scores in the present reporting period included "Fidelity" (66.67%) and "Leadership" (65.63%). The domains with the most growth from last year to the present year included "Coaching" (200% growth) and "Fidelity" (100% growth). The lowest score for the present period was "Systems Intervention" (16.67%), which also saw a decline from the prior period (-60%) across these districts.

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.

Student Benchmark Data:

15 schools (44% of all Building Implementation Teams) across 4 districts submitted student benchmark data between November 2022 and October 2023. Of the 15 schools, 3 reported data separately for different cohorts. 14 cohorts across 12 schools and 3 districts reported both Winter 2022 and Spring 2023 data.

When aggregating data across these cohorts, the average percentage of students meeting benchmarks rose from Winter 2022 to Spring 2023 (38.73% to 50.57%). In Spring 2023, 100% of reporting teams said that students with disabilities showed growth and 92.9% reported that benchmark goals were met by students with disabilities. Among the 12 teams reporting data for Fall 2023, 9 (75%) confirmed that they had set goals for students with disabilities.

The Winter 2022 to Spring 2023 cohort analysis showed growth for 14 cohorts. 11 or 79% of reporting teams saw growth in the percentage of students meeting the benchmark from Winter 2022 to Spring 2023.

Math Training Efficacy and Impact:

Participant evaluation results from two math training events in one district were recorded during the reporting period, all from Fall 2023. In all, 18 participants responded to seven questions on a 4-point scale (1=strongly disagree, 4=strongly agree); an eighth question asked respondents to rate their current knowledge of mathematical practices from 1 (beginner) to 4 (expert). For individual questions, the lowest average rating 3.38 (85%) was for the question 'How would you rate your current knowledge level regarding mathematical practices.' Nonetheless, 89% of participants self-rated their current knowledge of mathematical practices as 'competent' (score of 3 or 4). Average responses to all other questions was 4 (10), meaning that 100% of participants strongly agreed that the event helped further their understanding of mathematical practices and 100% of participants strongly agreed that the event made them both more efficient and more effective at meeting the mathematical needs of students. Average pre/post-test results for the two training sessions revealed a 665% increase in knowledge gained by training participants, from an average score of 10% on the pre-test to an average score of 75.5% on the post-test.

RIT data collection:

To monitor ongoing fidelity of RITs to the linked teaming infrastructure and supports, the state transformation specialist records RITs' participation in various TZ activities. During regular meetings with RITs, 6 of the 7 provided updates related to the following activities that map to expected project measures.

- All 6 (100% of respondents and 86% of RITs overall) reported adherence to a consistent training/onboarding process for district teams.

- All 6 (100% of respondents and 86% of RITs overall) reported that fidelity-measure observer teams undergo training that includes inter-observer agreement.

- All 6 (100% of respondents and 86% of RITs overall) reported using a communication protocol with DITs that is mutually agreed upon.

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

Next Step 1: The KDE will work with stakeholders to improve universal and targeted support related to the math EBPs and AIFs.

Anticipated Outcome 1: The targeted model will add additional districts and schools to work toward achieving the goals of the SiMR (scale-up efforts).

Next Step 2: The KDE will use training efficacy data to inform universal and targeted support for math EBPs and AIFs.

Anticipated Outcome 2: The KDE anticipates seeing an improvement in training efficacy data participation with the universal and targeted support model. Increased participation will provide more data to inform decision-making to support teachers.

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

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

Capacity Data:

Among the 4 RITs completing capacity assessments during the reporting period, 3 (75%) either demonstrated growth in the Total domain (average of all questions) from year- beginning to year-end assessment or ended with an average score in the Total domain of >80%, indicating high levels of capacity. Among the 6 districts completing capacity assessments during the reporting period, 5 (83%) demonstrated growth in the Total domain (average of all questions) from beginning to year-end assessment.

Student Benchmark Data:

The average percentage of students meeting benchmarks rose from Winter 2022 to Spring 2023 (38.73% to 50.57%). In Spring 2023, 100% of reporting teams said that students with disabilities showed growth and 92.9% reported that benchmark goals were met by students with disabilities.

Section C: Stakeholder Engagement

Description of Stakeholder Input

No revisions were made to any Indicator baselines or targets for FFY 2022.

Target Setting for FFY 2020-2025 (occurred in FFY 2020)-

As part of the new SPP package, the KDE engaged with a broad range of stakeholders to set new targets. Stakeholder groups included parents of students with disabilities, KY-SPIN staff, educators, LEA staff, state agency partners, disability-focused advocates, affiliated agency staff, disability organizations and Kentucky's State Advisory Panel for Exceptional Children (SAPEC). The KDE designed its selection of stakeholders to include feedback from a representative group. This included consideration of urban and rural regions, diverse ethnicities, disabilities and socioeconomic backgrounds.

The KDE scheduled and organized stakeholder meetings to obtain input and advice. The goal of the stakeholder meetings was to present participants with historical data for each indicator, improve stakeholders' understanding of the indicators and gather input from stakeholders about future targets. Participants were informed about the process, expectations and desired outcomes of the stakeholder meetings through PowerPoint presentations, agendas, meeting notes and visual representations. An impartial facilitator led a whole group explanation of the indicators before breaking stakeholders into smaller groups where they reviewed and provided feedback about the indicators. During stakeholder engagement meetings, participants were provided with visual representations of Kentucky's historical indicator data as well as the proposal of three potential targets. An expert statistician identified the potential targets for the KDE's future focus. The KDE also allowed stakeholders to propose a target outside of the three potential targets developed by the KDE.

Following each target setting meeting, participating stakeholders were encouraged to broadly share the information presented and to provide any feedback received to the KDE. To provide an opportunity for broader stakeholder engagement, the KDE created surveys and posted them to the public reporting website. This allowed for more extensive input from a larger and more diverse group of individuals throughout Kentucky. The surveys also

provided stakeholders the opportunity to provide input on progress, potential barriers and suggested improvement strategies.

Indicator 17-

The KDE involved the SAPEC with target setting related to the SSIP and the SiMR. Results Driven Accountability (RDA) and previous SiMR targets were discussed. The SAPEC was presented with potential new SiMR targets as well as the change in alignment to Indicator 3B 8th grade mathematics. Members of the SAPEC expressed no concerns with the alignment to Indicator 3B 8th grade mathematics.

Also involved in the target setting process for Indicator 17 were the All-Transformation Zones (All-TZ). The All-TZs consist of Regional Implementation Teams (RITs) from across the state that serve Kentucky LEAs. RIT members were invited to join biannual meetings to provide feedback to the KDE regarding the implementation of activities to support the SiMR. At an All-TZ meeting, the KDE shared the proposed alignment for the SiMR targets (2020-2025 targets). Members of the All-TZ indicated the proposed SiMR target is rigorous and achievable, and the KDE should consider aligning to Indicator 3B 8th grade mathematics. For FFY 2022 stakeholder engagement activities around the SSIP, see Indicator 17 Stakeholder Engagement.

Prior to setting SPP targets for FFY 2020-2025, the KDE considered input and feedback from all stakeholder engagement activities. The new targets were distributed and posted on the KDE's public reporting page located at (<https://www.education.ky.gov/specialed/except/MonitoringnResults/Pages/Public-Reporting-of-IDEA-B-Data.aspx>).

Revisions to Baseline/Target Setting (occurred in FFY 2021)-

In FFY 2021, due to changes in Kentucky's assessment and accountability system, the KDE sought broad stakeholder input to reset the baseline and targets for Indicator 3. The KDE engaged with a group of stakeholders who participated in the target setting for Indicator 3 during the FFY 2020 target setting year. This group was familiar with Indicator 3 and had been part of discussions and analyzing historical data. The KDE explained to the stakeholder group that the assessment methodology as well as the accountability system had changed for FFY 2021 and therefore baselines and targets should be reconsidered. The stakeholders were sent a copy of notes from the target setting discussions that occurred in FFY 2020 along with a survey to provide input about Indicator 3. Within the survey, stakeholders were asked if they agreed with the originally proposed target growth or if they disagreed now that the assessment and accountability system had changed. If stakeholders disagreed, they were asked to provide further input on why. The KDE then analyzed the responses from stakeholders and determined that the Indicator 3 baseline year would be reset to FFY 2021. Based on stakeholder feedback, targets were not reset for Indicator 3.

Ongoing Stakeholder Engagement for FFY 2022-

The KDE continued to engage with stakeholders to analyze data, develop improvement strategies and evaluate progress.

The SAPEC provided guidance to the KDE concerning special education and related services for students with disabilities in Kentucky. The SAPEC met quarterly. Each meeting included an open forum in which the public was invited to participate. The KDE solicited feedback from various stakeholders, including parents and educators, to increase the capacity to support activities around improving student outcomes. Additional information on the SAPEC can be found at ([https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-\(SAPEC\).aspx](https://education.ky.gov/CommofEd/adv/Pages/State-Advisory-Panel-on-Exceptional-Children-(SAPEC).aspx)).

The SAPEC was provided with an update on the SPP/APR progress data. SAPEC members, including parents, were given an opportunity to provide feedback, seek clarification or provide suggestions during an open public forum and an electronic survey.

In addition, the KDE facilitated a preschool advisory group made up of stakeholders including preschool coordinators from across the state. The preschool advisory group provided input around changes to Kentucky's Child Outcome Summary (COS) as part of Indicator 7 and made suggestions for ways to collect self-reported data more efficiently from LEAs for Indicator 12.

The OSEEL convened a Special Education Advisory Group for Infinite Campus (SEAGIC) made up of stakeholders from across the state. SEAGIC was charged with ensuring that Kentucky's student information system addressed the special education needs of both Kentucky LEAs and the OSEEL. This group ensured the mechanisms were in place in IC to capture and maintain data. The SEAGIC met several times throughout the year with representatives from IC to provide input and design and edit forms, reports and navigation enhancements within the product. The SEAGIC was comprised of state and local personnel with both programmatic and technical knowledge of special education laws, regulations and program requirements.

Additionally, the KDE produced a weekly email update for LEAs, SERTAC directors, regional TA providers, gifted and talented directors, DoSEs, KY-SPIN and other special education staff, including the Department of Juvenile Justice and the Department of Corrections. The News You Can Use email provided important upcoming dates, updates on initiatives within the KDE and any timely information that may impact special education students and families as well as LEAs. The KDE also provided an opportunity for DoSEs to engage in direct conversation with the KDE staff. An OSEEL liaison attended monthly meetings with SERTACs and DoSEs to provide updates and facilitate practice to policy communication. Feedback was brought back to the OSEEL and was used to guide the KDE's work to support all LEAs.

As part of the stakeholder engagement process for Indicator 17, the KDE reached out to and engaged with a broad range of stakeholders throughout FFY 2022.

Stakeholder Input-

The KDE uses a Practice to Policy Communication Cycle to gather input and remove barriers through the linked teaming structure with regions, districts and schools within the TZs. Feedback reported through the linked teaming structure indicated staff turnover within implementation teams continues to increase.

Additionally, the KDE presented on the Kentucky Mathematics Toolkit to Support Students with Disabilities and information on the SSIP, SiMR and TZ during the Kentucky Council for Exception Children (CEC) conference. Stakeholders included special education directors, teachers, preschool coordinators, SAPEC members and regional staff. Regarding the use of the universal tools in the classroom, stakeholders indicated that the tool could be used to support coaching. Stakeholders also indicated that the use of the practice profile from the mathematics toolkit could help them meet the needs of students. The KDE provided a TZ Symposium with RITs from across the state. The LTS was administered and provided data for improved supports within the linked teaming structure. The SIT met regularly throughout the reporting period to provide ongoing feedback in the development of a scale-up plan and changes to the evaluation plan, as well as infrastructure improvements.

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

As described in Phase II, the KDE uses a Linked Teaming Structure consisting of implementation teams at all levels of the system (state, region, district and school) to create an "enabling context" or a system that effectively removes barriers to achieving the goals of the SiMR.

The KDE also uses a Practice Policy Communication Cycle. This allows barriers encountered in practice to be rapidly communicated through the linked teaming structure to the highest level required for a solution. Stakeholder input reaches multiple levels of the system to inform practice and influence

policy. (<https://sisep.fpg.unc.edu/news/sisep-enotes-may-2015>)

Stakeholder activities within reporting period:

The KDE provided a TZ Symposium with RITs from across the state. Using feedback from the SIT, the symposium sessions were focused on areas of need. The State Transformation Specialist (STS) also shared accomplishments of the SIT, including updates to the evaluation plan prior to soliciting feedback. The LTS was provided to participants following the meeting.

RITs received regular updates from the STS. During meetings, implementation celebrations and barriers were shared. The STS also provided training and coaching on the Active Implementation Frameworks or other needs identified by RITs.

The 2023 Continuous Improvement Summit was held in person and open to district leaders across the state. During the summit, a session was offered to share the impact of Implementation Science in TZs along with how district leaders could engage with the work of the TZs. Participants were provided with local RIT contact information, leading to a school leader contacting a RIT to learn how to engage in the TZ work.

The Kentucky Leading, Educating, Advocating for Directors of Special Education (LEADS) academy provides monthly seminars for future Directors of Special Education (DoSE). A session on Implementation Science and the work occurring within TZs was shared with academy scholars. The session also highlighted how implementation science and the AIFs could benefit a DoSE. Post session survey results indicated that all of the participants felt that the training increased their knowledge of, understanding of, and confidence to implement the strategies covered.

The KDE presented at the 2023 Kentucky CEC on the Kentucky Mathematics Toolkit to Support Students with Disabilities and information on the SSIP, SiMR and TZ. Stakeholders included special education directors, teachers, preschool coordinators, SAPEC members and regional staff. Regarding the use of the universal tools in the classroom, stakeholders indicated that the tool could be used to support coaching. Stakeholders also indicated that the use of the practice profile could help them meet the needs of students.

The 2023 SISEP Active States Forum was held in person and virtually in June. The forum is held annually and includes STSs and implementation team members from SISEP Active States. During the conference, the KDE presented on the SSIP work in Kentucky, highlighting the data dashboard. Additionally, the KDE implementation team engaged in conversations around problems of practice. Active states provided input on potential solutions and next steps.

The SAPEC provides guidance to the KDE with respect to special education and related services for students with disabilities in Kentucky. The panel meets quarterly with an SSIP update given annually.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

Stakeholders identified the need to focus on sustainability and scale-up for systems improvement efforts. To respond to stakeholder feedback, the SIT focused on developing a targeted support plan.

Stakeholders indicated a need for wider communications with district leaders. As a result, a statewide conference session was provided at the Continuous Improvement Summit which included district and school leaders. Exploration activities and materials were provided to district and school leaders across the state. Contact information for districts interested in learning more about the TZ was also provided.

Additional Implementation Activities

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

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

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

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

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:

Carol Ann Morrison

Title:

Director of the Division of IDEA Monitoring and Results

Email:

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Phone:

(502) 564-4970 ext. 4123

Submitted on:

04/25/24 3:55:50 PM

Determination Enclosures

RDA Matrix

Kentucky 2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
87.50%	Meets Requirements

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	15	75.00%
Compliance	20	20	100.00%

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B."

2024 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	100%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	99%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	30%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	84%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	23%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	86%	1

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	100%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	99%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	42%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	90%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	16%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	85%	1

(2) Statewide assessments include the regular assessment and the alternate assessment.

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	10	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**	80	2

**When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. §300.102(a)(3)(iv), in effect June 30, 2017, "the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential."

2024 Part B Compliance Matrix

Part B Compliance Indicator (3)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2021 (4)	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	9.25%	N/A	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	YES	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	1.75%	N/A	2
Indicator 11: Timely initial evaluation	99.16%	YES	2
Indicator 12: IEP developed and implemented by third birthday	99.75%	YES	2
Indicator 13: Secondary transition	93.11%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

(3) The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at:

[https://sites.ed.gov/idea/files/2024 Part-B SPP-APR Measurement Table.pdf](https://sites.ed.gov/idea/files/2024%20Part-B%20SPP-APR%20Measurement%20Table.pdf)

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

Data Rubric

Kentucky

FFY 2022 APR (1)

Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1

APR Score Calculation

Subtotal	21
Timely Submission Points - If the FFY 2022 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	26

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

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 8/30/23	1	1	1	3
Personnel Due Date: 2/21/24	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Discipline Due Date: 2/21/24	1	1	1	3
State Assessment Due Date: 1/10/24	1	1	1	3
Dispute Resolution Due Date: 11/15/23	1	1	1	3
MOE/CEIS Due Date: 5/3/23	1	1	1	3

618 Score Calculation

Subtotal	21
Grand Total (Subtotal X 1.23809524) =	26.00

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

Indicator Calculation

A. APR Grand Total	26
B. 618 Grand Total	26.00
C. APR Grand Total (A) + 618 Grand Total (B) =	52.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	52.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 Submission

SPP/APR Data

1) Valid and Reliable Data - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

Part B 618 Data

1) Timely – A State will receive one point if it submits all *ED Facts* files or the entire *EMAPS* survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	C002 & C089	8/30/2023
Part B Personnel	C070, C099, C112	2/21/2024
Part B Exiting	C009	2/21/2024
Part B Discipline	C005, C006, C007, C088, C143, C144	2/21/2024
Part B Assessment	C175, C178, C185, C188	1/10/2024
Part B Dispute Resolution	Part B Dispute Resolution Survey in <i>EMAPS</i>	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in <i>EMAPS</i>	5/3/2023

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

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

Dispute Resolution

IDEA Part B

Kentucky

School Year: 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing" if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	32
(1.1) Complaints with reports issued.	19
(1.1) (a) Reports with findings of noncompliance	12
(1.1) (b) Reports within timelines	17
(1.1) (c) Reports within extended timelines	2
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	13

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	17
(2.1) Mediations held.	15
(2.1) (a) Mediations held related to due process complaints.	9
(2.1) (a) (i) Mediation agreements related to due process complaints.	8
(2.1) (b) Mediations held not related to due process complaints.	6
(2.1) (b) (i) Mediation agreements not related to due process complaints.	4
(2.2) Mediations pending.	2
(2.3) Mediations withdrawn or not held.	0

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	23
(3.1) Resolution meetings.	6
(3.1) (a) Written settlement agreements reached through resolution meetings.	3
(3.2) Hearings fully adjudicated.	1
(3.2) (a) Decisions within timeline (include expedited).	0
(3.2) (b) Decisions within extended timeline.	1
(3.3) Due process complaints pending.	9
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	13

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

(4) Total number of expedited due process complaints filed.	1
(4.1) Expedited resolution meetings.	0
(4.1) (a) Expedited written settlement agreements.	0
(4.2) Expedited hearings fully adjudicated.	0
(4.2) (a) Change of placement ordered	0
(4.3) Expedited due process complaints pending.	0
(4.4) Expedited due process complaints withdrawn or dismissed.	1

State Comments:

Errors:

Please note that the data entered result in the following relationships which violate edit checks:

State error comments:

This report shows the most recent data that was entered by:

Kentucky

These data were extracted on the close date:

11/15/2023

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

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



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

Final Determination Letter

June 21, 2024

Honorable Robin Kinney
Interim Commissioner of Education
Kentucky Department of Education
300 Sower Boulevard, 5th Floor
Frankfort, KY 40601

Dear Interim Commissioner Kinney :

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Kentucky meets the requirements and purposes of Part B of the IDEA. This determination is based on the totality of Kentucky's data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Kentucky's 2024 determination is based on the data reflected in its "2024 Part B Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for each State and Entity and consists of:

- (1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;
- (2) a Results Matrix that includes scoring on Results Elements;
- (3) a Compliance Score and a Results Score;
- (4) an RDA Percentage based on both the Compliance Score and the Results Score; and
- (5) the State's or Entity's Determination.

The RDA Matrix is further explained in a document, entitled "[How the Department Made Determinations under Section 616\(d\) of the Individuals with Disabilities Education Act in 2024: Part B](#)" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2024, as it did for Part B determinations in 2014-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for Kentucky).

In making Part B determinations in 2024, OSEP continued to use results data related to:

- (1) the participation and performance of CWD on the most recently administered (school year 2021-2022) National Assessment of Educational Progress (NAEP), as applicable (For the 2024 determinations, OSEP using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2024 determination as it did for Puerto Rico's 2023 determination. OSEP did not use NAEP data in making the BIE's 2024 determination because the NAEP data available for the BIE were not comparable to the NAEP data available for the 50 States, the District of Columbia, and Puerto Rico; specifically, the most recently administered NAEP for the BIE is 2019, whereas the most recently administered NAEP for the 50 States, the District of Columbia, and Puerto Rico is 2022.)
- (2) the percentage of CWD who graduated with a regular high school diploma; and
- (3) the percentage of CWD who dropped out.

For the 2024 IDEA Part B determinations, OSEP also considered participation of CWD on Statewide assessments (which include the regular assessment and the alternate assessment). While the participation rates of CWD on Statewide assessments were a factor in each State or Entity's 2024 Part B Results Matrix, no State or Entity received a Needs Intervention determination in 2024 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2025 determinations.

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

It is important for you to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

You will also find the following important documents in the Determinations Enclosures section:

- (1) Kentucky's RDA Matrix;
- (2) the HTDMD [link](#);

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

- (3) "2024 Data Rubric Part B," which shows how OSEP calculated Kentucky's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and
- (4) "Dispute Resolution 2022-2023," which includes the IDEA Section 618 data that OSEP used to calculate the Kentucky's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Kentucky's 2024 determination is Meets Requirements. A State's or Entity's 2024 RDA Determination is Meets Requirements if the RDA Percentage is at least 80%, unless OSEP has imposed programmatic Specific Conditions on the State's or Entity's last three IDEA Part B grant awards (for FFYs 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering three criteria related to IDEA Part B determinations as part of the Department's continued efforts to incorporate equity and improve results for CWD. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). This factor would be reflected in the determination for each State and Entity through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State or Entity that would otherwise receive a score of Meets Requirements would not be able to receive a determination of Meets Requirements if the State or Entity had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is considering as potential additional factors the improvement in proficiency rates of CWD on Statewide assessments. Third, the Department is considering whether and how to continue including in its determinations criteria the participation and proficiency of CWD on the NAEP.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix and States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 3, 5, and 6 (as they have in the past). Under EDFacts Modernization, States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in the EDPass or EMAPS system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, Kentucky must report annually to the public, by posting on the State educational agency's (SEA's) website, the performance of each local educational agency (LEA) located in Kentucky on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Kentucky's submission of its FFY 2022 SPP/APR. In addition, Kentucky must:

- (1) review LEA performance against targets in the State's SPP/APR;
- (2) determine if each LEA "meets the requirements" of Part B, or "needs assistance," "needs intervention," or "needs substantial intervention" in implementing Part B of the IDEA;
- (3) take appropriate enforcement action; and
- (4) inform each LEA of its determination.

Further, Kentucky must make its SPP/APR available to the public by posting it on the SEA's website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

- (1) includes Kentucky's determination letter and SPP/APR, OSEP attachments, and all State or Entity attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and
- (2) will be accessible to the public via the ed.gov website.

OSEP appreciates Kentucky's efforts to improve results for children and youth with disabilities and looks forward to working with Kentucky over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,

Valerie C. Williams

Valerie C. Williams
Director
Office of Special Education Programs

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cc: Kentucky Director of Special Education

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